



**1993 National Mortality Followback Survey with Death
Certificate, Proxy Respondent, and Medical Examiner/
Coroner Abstract Data File Description**

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
1-10	10	<u>Control Number</u>
11-12	2	<u>Sample Stratum</u>
		01 Suicide (black, both sexes, all ages; non-black, female, all ages; non-black, male, 80+)
		02 Homicide (black, males, 99+; black, female, all ages; non-black, both sexes, 99+)
		03 Drivers motorcycle operators, pedestrians (all races, both sexes, all ages)
		04 Other motor vehicle (black, both sexes, all ages; non-black, males, 99+; non-black, females, all ages)
		05 Non-motor accidents (black, both sexes, all ages; non-black, males, 99+; non-black, females, 15-34 and 99+)
		06 Alcohol abuse (black, both sexes, all ages; non-black males, 15-34 and 99+; nonblack, female, all ages)
		07 Drug abuse (black, both sexes, all ages; non-black, males, all ages; nonblack females, 15-34 and 99+)
		08 HIV (black, both sexes, all ages; nonblack, males, 15-24 and 99+; nonblack, females all ages)
		09 Cancer (81races, both sexes, 15-34 and 99+)
		10 COPD (black, both sexes, all ages; nonblack, both sexes, 15-34 and 99+)
		11 Heart (black, both sexes, 15-34 and 99+; non-black, males, 15-34 and 99+; nonblack, females, 15-34)
		12 Residual (black, both sexes, 15-34 and 99+; non-black, males, 15-24 and 99+; non-black, females, 15-34)
		13 Suicide (nonblack, males, 15-34)
		14 Suicide (nonblack, males, 25-34)
		15 Suicide (nonblack, males, 35-49)
		16 Suicide (nonblack, males, 50&)
		17 Suicide (nonblack, males 65-79)
		18 Suicide (Mack, male, 15-34)
11-12	2	<u>Sample Stratum – continued</u>
		19 Suicide (Mack, males, 35-98)
		20 Cancer (Mack, males, 35-98)
		21 Heart (Mack, males, 35.98)
		22 Residual (black, males, 35-98)
		23 Cancer (Mack, females, 35-98)
		24 Heart (Mack, females, 35-98)
		25 Residual (Mack, females, 35-98)
		26 Homicide (nonblack, males, 15-34)
		27 Homicide (nonblack, males, 35-98)
		28 Homicide (nonblack, females, 1524)
		29 Homicide (nonblack, females, 25-34)

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File Location	Field size	Item and code outline																																
		30 Homicide (non-black, females, 35-98) 31 Other motor vehicle (nonblack, males, 15-34) 32 Other motor <i>vehicle</i> (nonblack, males, 35-98) 33 Non-motor accident (nonblack, males, 35-34) 34 Non-motor accidents (nonblack, males, 35-98) 35 Non-motor accidents (non-black, females, 35-98) 36 HIV (nonblack, males, 25-34) 37 HIV (nonblack males, 35-98) 38 Cancer (nonblack, males, 35-88) 39 Cancer (nonblack females, 35-98) 40 COPD (nonblack, males, 35-98) 41 COPD (nonblack, females, 35-98) 42 Heart (nonblack, males, 35-98) 43 Heart (nonblack, females, 35-98) 44 Residual (nonblack, males, 25-34) 45 Residual (nonblack, males, 3598) 46 Residual (non-black, females, 35-98) 47 Alcohol abuse (nonblack, males, 35-98) 48 Drug abuse (non-black, fern-, 35-98) 49 Heart (nonblack, females, 99+) 50 Residual (nonblack, females, 99+)																																
13-17	5	<p>Selection Factor -- Values based on Inverse of probability of selection for each strata with 1 implied decimal point</p> <table border="1"> <thead> <tr> <th style="text-align: left;"><u>Factor</u></th> <th style="text-align: left;"><u>Strata</u></th> </tr> </thead> <tbody> <tr><td>00100</td><td>01</td></tr> <tr><td>00100</td><td>02</td></tr> <tr><td>00100</td><td>03</td></tr> <tr><td>00100</td><td>04</td></tr> <tr><td>00100</td><td>05</td></tr> <tr><td>00100</td><td>06</td></tr> <tr><td>00100</td><td>07</td></tr> <tr><td>00100</td><td>08</td></tr> <tr><td>00100</td><td>09</td></tr> <tr><td>00100</td><td>10</td></tr> <tr><td>00100</td><td>11</td></tr> <tr><td>00100</td><td>12</td></tr> <tr><td>00155</td><td>13</td></tr> <tr><td>00198</td><td>14</td></tr> <tr><td>00264</td><td>15</td></tr> </tbody> </table>	<u>Factor</u>	<u>Strata</u>	00100	01	00100	02	00100	03	00100	04	00100	05	00100	06	00100	07	00100	08	00100	09	00100	10	00100	11	00100	12	00155	13	00198	14	00264	15
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File Location	Field size	Item and code outline
		01339 21
		01308 22
		01047 23
		01336 24
		01304 25
		00115 26
		00114 27
		00460 28
		00535 29
		00374 30
		00135 31
		00134 32
		00228 33
		00229 34
		00138 35
		00190 36
		00193 37
		08302 38
		08279 39
		01543 40
		01542 41
		11520 42
		11524 43
		00190 44
		09520 45
		09533 46
		00109 47
		00110 48
		00265 49
		00214 50

CMS DEATH CERTIFICATE DATA

18	1	<p><u>Sex of Decedent</u></p> <p>1 Male 2 Female 9 Not Classifiable</p>
19-20	2	<p><u>Month of Death</u></p> <p>01 January 02 February 03 March 04 April 05 May 06 June 07 July 08 August 09 September 10 October 11 November</p>

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File Location	Field size	Item and code outline
		12 December 99 Not classifiable
21-22	2	<u>Day of Death</u> 01-31 Day 99 Not classifiable
23-26	4	<u>Year of Death</u> 1993 Year
27-29	3	<u>Age at death</u> 015-140 Age in Years 999 Not classifiable
30-59		Reserve
60	1	<u>Decedents Armed Forces status</u> 1 Yes 2 No 9 NA, blank, service other than specified above
61	1	<u>Decedents place of death</u> 1 Hospital, inpatient 2 Hospital, outpatient/ER 3 Hospital, DOA 4 Hospital, status unknown 5 Other, nursing home 6 Other, residence 7 Other, other not specified 9 Not classifiable
62-101		Reserve
102	1	<u>Decedent's marital status</u> 1 Married, separated 2 Never married, single 3 Widowed 4 Divorced 9 Not classifiable, blank
103-147		Reserve
148-150	3	<u>Hispanic origin of decedent</u> 001 No

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File Location	Field size	Item and code outline
		001 Non-Hispanic
		101 Chicano
		102 Mexican
		103 Mexican American
		201 Puerto Rican (Puertorriqueno)
		301 Cuban (Cubano)
		402 Belizian
		403 Bolivian (Boliviano)
		404 Central American
		405 Centroamericano
		406 Chile (Chileno)
		407 Colombia (Colombiano)
		408 Costa Rica (Costarricense)
		409 Dominican Republic (Dominicano)
		410 Argentina (Argentino)
		410 Ecuador (Ecuatoriano)
		411 El Salvador
		412 Falkland Islands
		413 Galapagos Islands
		414 Guatemala (Guatemalteco)
		415 Honduras (Hondureno)
		416 Nicaragua (Nicaraguense)
		417 Panama (Panameno)
		418 Paraguay (Paraguayo)
		419 Peru (Peruano)
		420 Salvadoreno
		421 South American
		422 Uruguay (Uruguayo)
		423 Venezuela (Venezolano)
		501 Balearic Islands
		502 Basque
		503 Boricua (Borinqueno)
		504 Californio
		505 Canary Islands
		506 Castellan
		507 Catalonia
		508 Espana
		509 Espanol
		510 Fernando Po
		511 Hispano
		512 Iberia (Ibero)
		513 La Raza
		514 Latin American
		515 Latino
		516 Majorca
		517 Mallorca (Mallorquin)
		518 Other Hispanic
		519 Spain
		520 Spaniard
		521 Unknown
		522 Valencian
		523 Yes
		999 Amish
		999 Arian (Aryan)
		999 Bahamian

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File Location	Field size	Item and code outline
		999 Caucasian 999 Central European 999 European 999 Jewish 999 Mixed 999 Moslem 999 Muslim 999 Not classifiable 999 White
151-153	3	<u>Detailed race of decedent</u> 000 Moor 000 Mixed 000 Nicaraguan 000 Panamanian 000 Salvadorian 000 Mestizo-Inca 000 Honduran 000 Guatemalan 000 Belizian 000 Mestizo 000 Carib 000 Jackson (Jack) White 000 Trigueno 090 Welsh 091 White 092 Wiam (White American) 093 Yugoslavian 094 Zoroastrian 100 Afghanistan 101 Algerian 102 American 103 Amish 104 Anglo-Saxon 105 Arabian 106 Argentinian 107 Armenian 108 Aryan 109 Assyrian 110 Australian 111 Austrian 112 Azores 113 Basque 114 Bavarian 115 Blanc 116 Bolivian 117 Brava (Bravo) 118 Brazilian 119 Cajun 120 Canadian 121 Caucasian 122 Chicano 123 Colombian 124 Costa Rican

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File Location	Field size	Item and code outline
		125 Creole
		126 Crucian
		127 Cuban
		128 Czechoslovakian
		129 Ebian
		130 Ecuadorian
		131 Egyptian
		132 English
		133 English-French
		134 English-Irish
		135 European
		136 Finnish.
		137 French
		138 French Canadian
		139 German
		140 Greek
		141 Gypsy
		142 Hebrew
		143 Hispanic
		144 Hungarian
		145 Icelandic
		146 Iran(ian)
		147 Iraqi
		148 Irish
		149 Islamic
		150 Israelite
		151 Italian
		152 Jew
		153 Jordanian
		154 Kuwaitian
		155 Ladina(Ladino)
		156 Latin American
		157 Latvian
		158 Lebanese
		159 libyan
		160 Uthuanian
		161 Maltese
		162 Marshenese
		163 Mauritian
		164 Mediterranean
		165 Mexican
		166 Muhammadan (Moslem)
		167 Moroccan
		168 Muslim
		169 Nordic
		170 Norwegian
		171 Occidental
		172 Parsi
		173 Persian
		174 Peruvian
		175 Polish
		176 Portuguese
		177 Puerto Rican
		178 Romanian
		179 Russian

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File Location	Field size	Item and code outline
		180 Saudi Arabia(n)
		181 Saxon(y)
		182 Scandinavian
		183 Scotch
		184 Semitic
		185 Serbian
		186 Serbian
151-153	3	<u>Detailed race of decedent –continued</u>
		187 Sicilian
		188 Slovakian
		189 South American
		190 Spanish
		191 Sunni
		192 Swedish
		193 Syrian
		194 Teutonic
		195 Tunisian
		196 Turk
		197 Ukrainian
		198 Venezuela(n)
		199 W
		200 A.A
		201 African
		202 Afro-American
		203 B
		204 Bilalian
		205 Brown
		206 Cape Verde
		207 Col.
		208 Color(ed)
		209 Dominican
		210 Eritrean
		211 Ethiopia(n)
		212 Ghanaian
		213 Haitian
		214 Hamitic
		215 Jamaican
		216 Kenyan
		217 Liberian
		218 Malawian
		219 Mugandan
		220 Mulatto
		221 N
		222 Nigerian
		223 Nubian
		224 Octaroon
		225 Quadroon
		226 Santo-Domingo
		227 Seychelloise
		228 Sudanese
		229 Tanzanian
		230 Trinidadian
		231 Ugandan
		232 West Indies(Indian)

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File Location	Field size	Item and code outline
		233 Black
		300 Aleut
		301 Athapaskan
		302 Eskimoan .
		303 French Indian
		304 Indian (North, Central and South American)
		305 Mexican Indian
		306 Native American
		307 Red
151-153	3	<u>Detailed race of decedent -continued</u>
		308 Selawik
		309 Taimskin
		310 Ute
		400 Chinese
		401 Sino Burman
		402 Taiwanese
		500 Japanese
		501 Nipponese (Nipon)
		502 Okinawan
		503 Ryukyuan
		600 Hawaiian
		700 Filipino
		800 Amerasian
		801 Asian (not specified)
		802 Asian Indian
		803 Asiatic
		804 Bangladeshi
		805 Burmese
		806 Cambodian
		807 Ceylonese
		808 Chamorro
		809 Dutch East Indian
		810 East Indian
		811 East Indies
		812 Eurasian
		813 Fijian
		814 Gilbertese
		815 Guam(ian)(ese)
		816 Hindu
		817 India
		818 Indo-Aryan
		819 Indonesian
		820 Java
		821 Korean
		822 Laotian (Asian)
		823 Malayan
		824 Maori
		825 Marshallese
		826 Melanesian
		827 Micornesian
		828 Mongolian
		829 Nepalese
		830 Oriental, not specified
		831 Pakistani

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File Location	Field size	Item and code outline
		832 Palauan 833 Polynesian 834 Ponapean 835 Punjabi 836 Rotanese 837 Saipanese 838 Samoa(n) 839 Siamese 840 Sikh 841 Singhalese 842 Tahitian
151-153	3	<u>Detailed race of decedent – continued</u> 843 Tamil-Ceylonese 844 Tamil-Malayan 845 Thai 846 Tibetan 847 Tongan 848 Ubontilian 849 Vietnam(ese) 850 Yapanes 851 Yellow 999 Phoenician 999 Alocona 999 C 999 Bahamian 999 Mosotho 999 Begri 999 Mal. 999 Colestran 999 Nassau 999 Guyanese 999 Cosmopolitan 999 Soanish 999 N/W 999 Malada 999 British Honduran 999 Bohemian 999 Chamosso 999 Siamsh Am 999 Ulithian
154-155	2	<u>Education of decedent</u> 00 Kindergarten, never attended 01-12 Elementary or Secondary 13 College, 1 year 14 College, 2 years 15 College, 3 years 16 College, 4 years 17 College, 5+ years 99 Blank, not classifiable
156	1	<u>Death referred to a Medical Examiner?</u>

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File Location	Field size	Item and code outline
		1 Yes 2 No 9 Blank
157	1	<u>Autopsy performed?</u> 1 Yes 2 No 9 Blank
158	1	<u>Manner of death</u> 1 Natural 2 Accident 3 Suicide 4 Homicide 5 Pending 6 Not determined 9 Blank
159-160	2	<u>Date of injury</u> <u>Month</u> 01-12 Month 99 Blank/not classifiable/not reported Blank Not Applicable
161 -162	2	<u>Day</u> 01-31 Day 99 Blank/not classifiable/not reported Blank Not Applicable
163-166	4	<u>Year</u> 1993 Year 1999 Blank/not classifiable/not reported Blank Not Applicable
		<u>Time of injury</u> <u>Time</u> 0000-1259 Numeric 9999 Blank/not classifiable/not reported Blank Not applicable
167 – 168	2	00-12 Hour 00-59 Minute
169-170	2	
171	1	<u>AM/PM</u> 1 AM 2 PM

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File Location	Field size	Item and code outline
		9 Blank/not classifiable/not reported Blank Not applicable
172-186	15	<u>Place of injury</u> Alpha, left justified
187	1	<u>Certifier check box</u> 1 Certifying physician 2 Pronouncing and certifying physician 3 Medical examiner/coroner 9 Blank/not classifiable
188-191	4	<u>Underlying Cause of Death</u> <u>ICD-9 cause</u> Numeric, one decimal implied See the <i>-'International Classification of Diseases,'</i> 1975 Revision, Volume 1. For injuries and poisoning, the external cause is coded (E800-E999). These positions do not include the letter E for the external cause of injury. For those causes that do not have a 4th digit, location 309 is blank.
192-194	3	<u>72 cause recode</u> 010 Shigellosis and amebiasis (004, 006) 020 Certain other intestinal infections (007-009) <u>Tuberculosis (010-018)</u> 040 Tuberculosis of respiratory system (010-012) 050 Other tuberculosis (013-018) 060 Whooping cough (033) 070 Streptococcal sore throat, scarlatina, and erysipelas (034-035) 080 Meningococcal infection (036) 090 Septicemia (038) 100 Acute poliomyelitis (045) 110 Measles (055) 120 Viral hepatitis (070) 130 Syphilis (090-097) 140 All other infectious and parasitic diseases (001-003,005,020-032,037,039-041, *042-*044, 046-054, 056-066, 071-088, 098-139) <u>Malignant neoplasms, including neoplasms of</u>

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File Location	Field size	Item and code outline
		<u>Lymphatic and hematopoietic tissues (140-208)</u> 160 Malignant neoplasms of lip, oral cavity, and pharynx(140-149) 170 Malignant neoplasms of digestive organs and peritoneum (150-159) 180 Malignant neoplasms of respiratory and intrathoracic organs (160-165) 190 Malignant neoplasm of breast (174-175) 200 Malignant neoplasms of genital organs (179-187) 210 Malignant neoplasms of urinary organs (188-189)
192-194	3	<u>Underlying Cause of Death -- continued</u> <u>72 cause recode -- continued</u> <u>Malignant neoplasms, including neoplasms of Lymphatic and hematopoietic tissues (140-208) -- continued</u> 220 Malignant neoplasms of all other and unspecified sites (170-173, 190-199) 230 Leukemia (204-208) 240 Other malignant neoplasms of lymphatic and .hematopoietic tissues (200-203) 250 Benign neoplasms, carcinoma in situ, and neoplasms of uncertain behavior and of unspecified nature (210-239) 260 Diabetes mellitus (250) 270 Nutritional deficiencies (260-269) 280 Anemias (280-285) 290 Meningitis (320-322) <u>Major cardiovascular diseases (390-448)</u> <u>Diseases of heart (390-398, 402, 404-429)</u> 320 Rheumatic fever and rheumatic heart disease (390-398) 330 Hypertensive heart disease (402) 340 Hypertensive heart and renal disease (404) <u>Ischemic heart disease (410-414)</u> 360 Acute myocardial infarction (410) 370 Other acute and subacute forms of ischemic heart disease (411) 380 Angina pectoris (413) 390 Old myocardial infarction and other forms of chronic ischemic heart disease (412,414) 400 Other diseases of endocardium (424) 410 All other forms of heart disease (415-423, 425-429) 420 Hypertension with or without renal disease (401, 403)

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File Location	Field size	Item and code outline
		<u>Cerebrovascular diseases (430-438)</u> 440 Intracerebral and other intracranial hemorrhage (431-432) . 450 Cerebral thrombosis and unspecified occlusion of cerebral arteries (434.0, 434.9) 460 Cerebral embolism (434.1) 470 All other and late effects of cerebrovascular diseases (430, 433, 435-438) 480 Atherosclerosis (440) 490 Other diseases of arteries, arterioles, and capillaries (441-448) 500 Acute bronchitis and bronchiolitis (466)
192-194	3	<u>Underlying Cause of Death -- continued</u> <u>72 cause recode -- continued</u> <u>Pneumonia and influenza (480-487)</u> 520 Pneumonia (480-486) 530 Influenza(487) <u>Chronic obstructive pulmonary diseases and allied conditions(490-496)</u> 550 Bronchitis, chronic and unspecified (490-491) 560 Emphysema (492) 570 Asthma (493) 580 Other chronic obstructive pulmonary diseases and allied conditions (494-496) 590 Ulcer of stomach and duodenum (531-533) 600 Appendicitis(540-543) 610 Hernia of abdominal cavity and intestinal obstruction without mention of hernia (550-553, 560) 620 Chronic liver disease and cirrhosis(571) 630 Cholelithiasis and other disorders of gallbladder(574-575) <u>Nephritis, nephrotic syndrome, and nephrosis (580-589)</u> 650 Acute glomerulonephritis and nephrotic syndrome (580-581) 660 Chronic glomerulonephritis, nephritis and nephropathy, not specified as acute or chronic, and renal sclerosis, unspecified(582-583, 587) 670 Renal failure, disorders resulting from impaired renal function, and small kidney of unknown cause(584-586,588-589) 680 Infections of kidney(590) 690 Hyperplasia of prostate (600) <u>Complications of pregnancy, childbirth and the puerperium (630-676)</u>

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File Location	Field size	Item and code outline
		710 Pregnancy with abortive outcome (630-638)
		720 Other complications of pregnancy, childbirth, and the puerperium (640-676)
		730 Congenital anomalies(740-759)
		<u>Certain conditions originating in the perinatal period (760-779)</u>
		750 Birth trauma, intrauterine hypoxia, birth asphyxia, and respiratory distress syndrome (767-769)
		760 Other conditions originating in the perinatal period (760-766, 770-779)
		770 Symptoms, signs, and ill-defined conditions (780-799)
		780 All other diseases (Residual)
192-194	3	<u>Underlying Cause of Death –continued</u>
		<u>72 cause recode – continued</u>
		<u>Accidents and adverse effects (E800-E949)</u>
		800 Motor vehicle accidents (E810-E825)
		810 All other accidents and adverse effects (E800-E807, E826-E949)
		820 Suicide (E950-E959)
		830 Homicide and legal intervention (E960-E978)
		840 All other external causes (E980-E999)
195-196	2	<u>Cancer cause recode</u>
		01 Malignant neoplasm of esophagus (150)
		02 Malignant neoplasm of stomach (151)
		03 Malignant neoplasms of colon, rectum, rectosigmoid junction, and anus (153,154)
		04 Malignant neoplasm of pancreas (157)
		05 Malignant neoplasms of trachea, bronchus, and lung (162)
		06 Malignant melanoma of skin (172)
		07 Malignant neoplasm of cervix uteri (180)
		08 Malignant neoplasms of body of uterus and of uterus, part unspecified (179, 182)
		09 Malignant neoplasm of ovary (183.0)
		10 Malignant neoplasm of prostate(185) .
		11 Malignant neoplasm of bladder (188)
		12 Malignant neoplasms of kidney and other and Unspecified urinary organs (189)
		13 Malignant neoplasms of brain and other and unspecified parts of nervous system (191, 192)
		14 Hodgkin's disease (201)
		15 Malignant lymphoma other than Hodgkin's disease (200, 202)
		16 Multiple myeloma and other immunoproliferative neoplasms (203)

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File Location	Field size	Item and code outline
		00 All other malignant neoplasms (residual of 140-208)
		17 All other causes
197-198	2	<u>Aids cause recode</u>
		02 With specified infections (*042.0)
		03 Causing other specified infections (*042.1)
		04 With specified malignant neoplasms (*042.2)
		05 Acquired immunodeficiency syndrome, unspecified (*042.9)
		07 Causing lymphadenopathy (*043.0)
		08 Causing specified diseases of the central nervous system (*043.1)
		09 Causing other disorders involving the immune mechanism (*043.2)
		10 Causing other specified conditions (*043.3)
		11 Acquired immunodeficiency syndrome-related complex, unspecified (*043.9)
197-198	2	<u>Underlying Cause of Death –continued</u>
		<u>Aids cause recode -- continued</u>
		13 Causing specified acute infections (*044.0)
		14 Human immunodeficiency virus infection, unspecified (*044.9)
		15 All other causes(898-909)
199	1	<u>Cause of death flag</u>
		1 A valid UC code
		2 A rare UC code
		3 An invalid UC code
200	1	<u>Region of death</u>
		1 Northeast
		2 Midwest
		3 South
		4 West
201-202	2	<u>Division/state subcode</u>
		<u>New England</u>
		11 Maine
		12 New Hampshire
		13 Vermont
		14 Massachusetts
		15 Rhode Island
		16 Connecticut
		<u>Middle Atlantic</u>
		21 New York
		22 New Jersey
		23 Pennsylvania

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File Location	Field size	Item and code outline
		<u>East North Central</u>
		31 Ohio
		32 Indiana
		33 Illinois
		34 Michigan
		35 Wisconsin
		<u>West North Central</u>
		41 Minnesota
		42 Iowa
		43 Missouri
		44 North Dakota
		45 South Dakota
		46 Nebraska
		47 Kansas
		<u>South Atlantic</u>
		51 Delaware
		52 Maryland
		53 District of Columbia
		54 Virginia
		55 West Virginia
		56 North Carolina
		57 South Carolina
		58 Georgia
		59 Florida
		<u>East South Central</u>
		61 Kentucky
		62 Tennessee
		63 Alabama
		64 Mississippi
		<u>West South Central</u>
		71 Arkansas
		72 Louisiana
		73 Oklahoma
		74 Texas
		<u>Mountain</u>
		81 Montana
		82 Idaho
		83 Wyoming
		84 Colorado
		85 New Mexico
		86 Arizona
		87 Utah
		88 Nevada
		<u>Pacific</u>
		91 Washington
		92 Oregon
		93 California
		94 Alaska

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		95 Hawaii
203	1	<u>Race recode #1</u>
		1 White
		2 Black
		3 All other races
204	1	<u>Race recode #2</u>
		1 Black
		2 Nonblack
205-206	2	<u>Single age with 99+</u>
		15-99 Age
207-208	2	<u>Age recode #20</u>
		05 15-19years
		06 20-24 years
		07 25-29 years
		08 30-34 years
		09 35-39 years
		10 40-44 years
		11 45-49 years
		12 50-54 years
		13 55-59 years
		14 60-64 years
		15 65-69 years
		16 70-74 years
		17 75-79 years
		18 80-84 years
		19 85 years and over
		20 Unknown age
209-210	2	<u>Age recode #12</u>
		04 15-24years
		05 25-34 years
		06 35-44 years
		07 45-54 years
		08 55-64 years
		09 65-74years
		10 75-84years
		11 85 years and over
		12 Unknown age
211	1	<u>Age recode #8</u>
		2 15-24 years
		3 25-34 years
		4 35-44 years
		5 45-54 years

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		6 55-64 years 7 65 years and over 8 Unknown age
212-216	5	<u>Sample frame number</u> Numeric
217-221	5	<u>Sample number</u> Numeric
PROXY RESPONDENT DATA		
222-223	2	Reserve
224	1	<u>Quarter number</u> 1 Quarter 1 2 Quarter 2 3 Quarter 3 4 Quarter 4
225	1	<u>Reinterview indicator</u> 0 Not selected for reinterview 1 Selected for reinterview
226-227	2	<u>Month of receipt</u> 01 January 02 February 03 March 04 April <u>Month of receipt -- continued</u> 05 May 06 June 07 July 08 August 09 September 10 October 11 November 12 December 00 No receipt
228	1	<u>Slash</u> / Month/day separator

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
229-230	2	<u>Day of receipt</u> 01-31 Day 00 No receipt
231	1	<u>Slash</u> / Day/year separator
232-233	2	<u>Year of receipt</u> 94-95 Year 00 No receipt
234-235	2	<u>Check-in code for the NMF-1. Respondent Questionnaire</u> 01 Complete interview 02 Partial interview 03 Refused 04 Consent not given on NMF-16(PM)- Pennsylvania 05 Consent not given on NMF-16(PM) - Maryland 06 Consent not given on NMF-16(PM) - Rhode Island 07 Could not contact by telephone, and lives outside PSU, no alternate respondent located 08 Could not contact -other reason, no alternate respondent located 09 Could not locate, "and no alternate respondent located 10 Other noninterview 11 Washington assigned noninterview 98 Jeffersonville "auto-check-in" code 99 Initialization Code/No response
236-243	8	<u>Receipt date for NMF-6, Reinterview Questionnaire</u> Format: 00/00/00 (See locations 226-233)
244-245	2	<u>Check-in code for the NMF-6, Reinterview Questionnaire</u> 01 Complete interview 02 Partial interview 03 Refused 04 Unable to contact 05 Wrong number/out of service/no phone (New/correct number not determined) 06 Original respondent deceased 07 Original respondent incapable

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		08 Ineligible for reinterview 09 Other noninterview 10 Washington assigned noninterview 98 Jeffersonville "auto check-in" code 99 Initialization Code/No response
246	1	<u>Multiple respondent indicator</u> 0 Not selected for multiple interview 1 Selected for multiple interview <u>Multiple interview control number</u>
247	1	9 Multiple respondent
248-255	8	Reserved
256	1	0-9 check digit
259-260	2	<u>Type of respondent (from NMF-1 questionnaire)</u> 01 Original 02 Alternate 03 Multiple 98 Blank/out of range
261-262	2	<u>Authorization to access Medical examiner or Coroner</u> 01 Authorization given 02 Authorization refused 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range
263	1	<u>Medical Examiner/Coroner mailing indicator</u> 0 Not included in the Medical Examiner/Coroner mailings 1 Included in the Medical examiner or Coroner mailings
264-273		Reserved
274	1	<u>SC0001: Mode of Interview</u> 1 Telephone 2 Personal visit 8 Blank/out of range
275	1	<u>SC0002: Type of respondent</u> 1 Original 2 Alternate

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		3 Multiple 8 Blank/out of range
276	1	<u>SC0003: Type of multiple</u> 1 Type 1 8 Blank/out of range
277-278	2	<u>SC0004: Final Status for Original or Alternate Interview</u> 01 Complete Interview 02 Partial Interview 03 Refused 04 Consent not given on NMF-16(PM) - Pennsylvania 05 Consent not given on NMF-16(PM) - Maryland 06 Consent not given on NMF-16(PM) - Rhode Island 07 Could not contact by telephone, and lives outside PSU, no alternate respondent located 08 Could not contact -other reason, no alternate respondent located 09 Could not locate, and no alternate respondent located 10 Other noninterview 98 Blank/out of range
279-280	2	<u>Reserved</u> <u>Date of Interview</u>
281-282	2	<u>Month</u> 01 January 02 February 03 March 04 April 05 May 06 June 07 July 08 August 09 September 10 October 11 November 12 December 98 Blank/out of range
283-284	2	<u>Day</u> 01-31 Day 98 Blank/out of range
285-286	2	<u>Year</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		94-95 Year 98 Blank/out of range
		<u>Beginning Time of Interview</u>
287-288	2	<u>Hour</u> 01-12 Hour 98 Blank/out of range
289-290	2	<u>Minutes</u> 00-59 Minutes 98 Blank/out of range
291	1	<u>A.M./P.M. Indicator for Beginning Time</u> 1 A.M. 2 P.M. 8 Blank/out of range
		<u>Ending Time of Interview</u>
292-293	2	<u>Hour</u> 01-12 Hour 98 Blank/out of range
294-295	2	<u>Minutes</u> 00-59 Minutes 98 Blank/out of range
296	1	<u>A.M./P.M. Indicator for Ending Time</u> 1 A.M. 2 P.M. 8 Blank/out of range
<u>Section VI – Original Respondent</u>		
297	1	<u>5a: Was the NMF-15 or NMF-16 (PM) contact form received from the original respondent?</u> 1 Yes 2 No 8 Blank/out of range
298	1	<u>5b: Did the original respondent refuse on the NMF-16 (PM)?</u> 1 Yes 2 No 3 Not applicable 8 Blank/out of range
299	1	<u>5c: Was the NMF-20 Authorization form received from the original respondent?</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		1 Yes 2 No 8 Blank/out of range
300	1	<u>5d: Was authorization given by the original respondent?</u> 1 Yes 2 No 8 Blank/out of range
<u>Section VII - Alternate Respondent</u>		
301	1	<u>5a: Was the NMF-15 or NMF-16 (PM) contact form received from the alternate respondent?</u> 1 Yes 2 No 8 Blank/out of range
302	1	<u>5b: Did the alternate respondent refuse on the NMF-16 (PM)?</u> 1 Yes 2 No 3 Not applicable 8 Blank/out of range
303	1	<u>5c: Was the NMF – 20 Authorization form Received from the alternate respondent</u> 1 Yes 2 NO 8 Blank/out of range
304	1	<u>5d: Was authorization given by the alternate respondent?</u> 1 Yes 2 No 8 Blank/out of range
<u>Section VIII - Multiple Respondent</u>		
305	1	<u>5a: Was the NMF-15 or NMF-16 (PM) contact form received from the multiple respondent?</u> 1 Yes 2 No

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		8 Blank/out of range
306	1	<u>5b: Did the multiple respondent refuse on the NMF-16 (PM)?</u> 1 Yes 2 No 3 Not applicable 8 Blank/out of range
307-308	2	<u>SC0010: How was -- related to you?</u> 01 Respondent's spouse 02 Respondent's parent 03 Respondent's step-parent 04 Respondent's chi 05 Respondent's sibling 06 Respondent's in-law 07 Other relative 08 Respondent's friend 09 Respondent's neighbor 10 Staff person at institution 11 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
309-311	3	<u>SC0011: How old was -at the time of death?</u> 001-125 Years of age 994 Refused 995 Don't know 996 Not applicable
309-311	3	<u>SC0011: How old was -at the time of death? -- continued</u> 998 Blank/out of range 999 Non-response
312-313	2	<u>SC0012: Was --a male or female?</u> 01 Male 02 Female 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
314-315	2	<u>SC0013: During -- last year of life, that is, between (date one year prior to date of death) and (date of death) did -usually live in a private home or apartment, a nursing home, or</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<p><u>somewhere else?</u></p> <p>01 Private home 02 Nursing home 03 Other health care facility 04 Other institution not health care (including prison) 05 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
316-320	5	<p><u>SC0014: In what city, county and state was This?</u></p> <p>Standard FIPS codes --2 digit state/3 digit county</p> <p>If locations 514-516 = 000; this means the county was not entered on the questionnaire.</p> <p>99994 Refused 99995 Don't know 99996 Not applicable 99998 Blank/out of range 99999 Non-response</p> <p><u>SC0015-0017: How long did -live In (city (or country and state In SC0014) ?</u></p>
321-323	3	<p><u>SC0015:</u></p> <p>888 Entire life 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range</p> <p><u>SC0015-0017: How long did -live In (city (or country and state In SC0014) ? -- continued</u></p>
321-323	3	<p><u>SC0015: -- continued</u></p> <p>999 Non-response</p>
324-326	3	<p><u>SC0016:</u></p> <p>001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response</p>
327-328	2	<p><u>SCO017:</u></p> <p>03 Days 04 Weeks 05 Months</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
329-330	2	<u>SC0018: At any time during -last year of life, did -live in a nursing home, another type of health care facility, or any other type of institution?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0019-0021: During the last year of life, how long did -live in any type of health care facility, hospice, or any type of institution?</u>
331-333	3	<u>SC0019:</u> 888 Entire life 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
334-336	3	<u>SC0020:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response <u>SC0019-0021: During the last year of life, how long did -live in any type of health care facility, hospice, or any type of institution? -- continued</u>
337-338	2	<u>SC0021:</u> 03 Days 04 Weeks 05 Months 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0022-0024: During the last year of life, how long did -live in the (type of health care facility</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<u>or institution in SC0013) or any (other) type of health care facility. or any type of institution?</u>
339-341	3	<u>SC0022:</u> 888 Entire life 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
342-344	3	<u>SC0023:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
345-346	2	<u>SC0024:</u> 03 Days 04 Weeks 05 Months 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
347-348	2	<u>SC0025: Even though -spent the entire last year of life, in (type of place in SC0013) or other health care facilities or institutions, did – have a private home or apartment</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
349-350	2	<u>SC0026: I'd like to get the relationship of the people -lived with in the last year of life. That is, if they lived with - for at least 3 months during that year. For example,-- (husband/wife), son, friend, and so forth.</u> 01 Lived alone 02 Lived with others 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
351-352	2	<p>SC0027: I'd like to get the relationship of the people --lived with in the last year of life when -- was not in the (<i>type of place in SC0013</i>). That is, if they lived with -- for at least 3 months during that year. For example, -- (husband/wife), son, friend, and so forth.</p> <p>01 Lived alone 02 Lived with others 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
353-354	2	<p>SC0028: I'd like to get the relationship of the people who lived at this home during -- last year of life. That is, if they lived In -home for at least 3 months during that year. For example, -- (husband/wife), son, friend, and so forth.</p> <p>01 Home unoccupied 02 Occupied by others 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
355-356	2	<p>SC0029-0040: Relationships of all persons living with or at decedents home. (2 characters <u>each source code</u>)</p> <p>01 Husband 02 Wife 03 Mother 04 Father 05 Step-parent - male 06 Step-parent - female 07 Step-parent - sex not specified 08 Son 09 Daughter 10 Brother 11 Sister 12 In-law - male 13 In-law - female 14 In-law - sex not stated 15 Other relative -male 16 Other relative -female 17 Other relative -sex not stated 18 Friend-male 19 Friend- female 20 Friend- sex not stated 21 Other person-male</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		22 Other person-female 23 Other person -sex not stated 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
357-378	21	Reserved
379-380	2	<u>SC0041: Did you ever live in the same home with --?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
381-382	2	<u>SC0042: Did you and -live in the same home at any time during -- last year of life?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0043-0046: Altogether, during -- entire life, how long did you and -live in the same home together?</u>
383-385	3	<u>SC0043:</u> 888 Decedent's entire life 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response <u>SC0043-0046: Altogether, during -entire life, how long did you and -live in the same home together? -- continued</u>
386-388	3	<u>SC0044:</u> 889 Respondent's entire life 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		999 Non-response
389-391	3	<u>SC0045:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
392-393	2	<u>SC0046:</u> 03 Days 04 Weeks 05 Months 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0047-0048: Altogether, how long did you Know -- ?</u>
394-396	3	<u>SC0047:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
397-398	2	<u>SC0048:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
399-400	2	<u>SC0053: During --entire life, was -ever admitted to a nursing home?</u>
		01 Yes 02 No
399-400	2	<u>SC0053: During --entire life, was -ever admitted to a nursing home? -- continued</u>
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		SC0054-0056: What was the total amount of time -- spent in a nursing home over - entire lifetime?
401-403	3	<u>SC0054:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
404-405	2	<u>SC0055:</u> 03 Days 04 Weeks 05 Months 06 Years 09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
406-407	2	<u>SC0056: Was it --</u> 01 Less than 3 months? 02 3 months to less than 1year? 03 1year to less than 5 years? 04 5 years or more? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		SC0057-0058: Was - an overnight patient or resident of any (other) nursing home during -- last year of life?
408-409	2	<u>SC0057:</u> 01 Yes 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		SC0057-0058: Was - an overnight patient or resident of any (other) nursing home during -- last year of life? -- continued
410-411	2	<u>SC0058:</u> 02 No

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0059-0060: Was - an overnight patient in (a/any other) hospital in the last year of life?</u>
412-413	2	<u>SC0059:</u> 01 Yes- 94 Refused 95 Don't know 96 Not applicable, 98 Blank/out of range 99 Non-response
414-415	2	<u>SC0060:</u> 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0061-0062: During the last year of life, did -- stay overnight at (a/any other) residential hospice, skilled nursing facility, or long stay hospital?</u>
416-417	2	<u>SC0061:</u> 01 Yes 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
418-419	2	<u>SC0062:</u> 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0063-0064: During the last year of life, did -- receive any care as an overnight patient in any (other) alcohol or drug treatment facility, psychiatric facility, or mental health facility?</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
420-421	2	<u>SC0063:</u> 01 Yes 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
422-423	2	<u>SC0064:</u> 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<p><u>Facility #1 where decedent received care in the last year</u></p> <p><u>Facility I.D. Number</u></p>
424	1	<u>Facility indicator</u> 2 Facility indicator 9 No Facility/non-response
425	1	<u>Data source</u> 1 AHA file 2 SAMHSA file 3 NCHS Nursing Home file 4 NCHS Hospice file 9 Facility added by Census/non-response
426-427	2	<u>AHA Region/State</u> <u>Region 0</u> 03 Marshall Islands 04 Puerto Rico 05 Virgin Islands 06 Guam 07 American Samoa <u>Region 1</u> 11 Maine 12 New Hampshire 13 Vermont 14 Massachusetts 15 Rhode Island 16 Connecticut

Facility #1 where decedent received care in the last year-- continued

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<u>Facility I.D. Number -- continued</u>
426-427	2	<u>AHA Region/State – continued</u>
		<u>Region 2</u>
		21 New York
		22 New Jersey
		23 Pennsylvania
		<u>Region 3</u>
		31 Delaware
		32 Maryland
		33 District of Columbia
		34 Virginia
		35 West Virginia
		36 North Carolina
		37 South Carolina
		38 Georgia
		39 Florida
		<u>Region 4</u>
		41 Ohio
		42 Indiana
		43 Illinois
		44 Michigan
		45 Wisconsin
		<u>Region 5</u>
		51 Kentucky
		52 Tennessee
		53 Alabama
		54 Mississippi
		<u>Region 6</u>
		61 Minnesota
		62 Iowa
		63 Missouri
		64 North Dakota
		65 South Dakota
		66 Nebraska
		67 Kansas
		<u>Region 7</u>
		71 Arkansas
		72 Louisiana
		73 Oklahoma
		74 Texas
		<u>Region 8</u>
		81 Montana
		82 Idaho
		83 Wyoming
		84 Colorado
		85 New Mexico

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<u>Facility #1 where decedent received care in the last year-- continued</u>
426-433		<u>Facility I.D. Number -- continued</u>
426-427	2	<u>AHA Region/State – continued</u>
		<u>Region 8 -- continued</u>
		86 Arizona
		87 Utah
		88 Nevada
		<u>Region 9</u>
		91 Washington
		92 Oregon
		93 California
		94 Alaska
		95 Hawaii
		99 Non-response
428-432	5	<u>5-digit unique, nonsequential facility number</u>
		00000 Numeric
		99999 Non-response
433	1	<u>Check digit</u>
		0-9 Numeric
434-443	10	Reserved
		 <u>SC0075-0076: How many nights did -stay in (name of facility in 6a(1)) during -- last year of Life?</u>
444-446	3	<u>SC0075:</u>
		001-370 Number of nights
		994 Refused
		995 Don't know
		996 Not applicable
		998 Blank/out of range
		999 Non-response
447-448	2	<u>SC0076: Was it –</u>
		01 Less than 1 week?
		02 One week to less than 1 month?
		03 One month to less than 2 months?
		04 Two months to less than 6 months?
		05 Six months to less than 9 months?
		06 Nine months to one year?
		09 Don't know
		94 Refused

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>Facility #2 where decedent received care in the last year</u>
449-458	10	<u>Facility I.D. Number</u> See locations 426-433
		<u>SC0077 -0078: How many nights did-stay in (name of facility in 62(2)) during -- last year of Life? -- continued</u>
459-461	3	<u>SC0077:</u> 001-370 Number of nights 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
462-463	2	<u>SC0078: Was it --</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>Facility #3 where decedent received care in the last year</u>
464-473	10	<u>Facility I.D. Number</u> See locations 426-433
474-523	50	Reserved
		<u>SC0079-0080: How many nights did -stay in (name of facility in 6a(3)) during -last year of Life?</u>
524-526	3	<u>SC0079:</u> 001-370 Number of nights

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
527-528	2	<u>SC0080: Was It --</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>Facility #4 where decedent received care in the last year</u>
529-538	10	<u>Facility I.D. Number</u> See locations 426-433
539-588	50	Reserved <u>SC0081-0082: How many nights did -stay in (name of facility in 6a(4)) during -last year of Life?</u>
589-591	3	<u>SC0081:</u> 001-370 Number of nights 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
592-593	2	<u>SC0082:</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than.9 months? 06 Nine months to one year? 09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		Facility #5 where decedent received care in the last year
594-603	10	<u>Facility I.D. Number</u> See locations 426-433
		SC0083-0084: How many nights did -stay in (name of facility in 6a(5)) during-last year of Life?
604-606	3	<u>SC0083:</u> 001-370 Number of nights 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
607-608	2	<u>SC0084: Was it –</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		Facility #6 where decedent received care in the last year
609-618	10	<u>Facility I.D. Number</u> See locations 426-433
		SC008S-0086: How many nights did -stay in (name of facility in 6a(6)) during -last year of life?
619-621	3	<u>SC0085:</u> 001-370 Number of nights 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
622-623	2	<p><u>SC0086: Was it --</u></p> <p>01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p> <p>Facility #7 where decedent received care in the last year</p>
624-633	10	<p><u>Facility I.D. Number</u></p> <p>See locations 426-433</p> <p>SC0081-0088: How many nights did -stay in (name of facility in 6a(7)) during -last year of Life?</p>
634-636	3	<p><u>SC0081:</u></p> <p>001-310 Number of nights 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response</p>
637-638	2	<p><u>SC0088: Was it --</u></p> <p>01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p> <p>Facility #8 where decedent received care In the last year</p>
639-648	10	<p><u>Facility I.D. Number</u></p> <p>See locations 426-433</p>

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File Location	Field size	Item and code outline
		SC0089-0090: How many nights did -stay in (name of facility in 6a(8)) during -last year of <u>Life?</u>
649-651	3	<u>SC0089:</u> 001-370 Number of nights 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
652-653	2	<u>SC0090: Was it –</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>Facility #9 where decedent received care in the last year</u>
654-663	10	<u>Facility I.D. Number</u> See locations 426-433
664-673	10	Reserved
		SC0091-0092: How many nights did -stay in (name of facility in 6a(9)) during -last year of <u>Life?</u>
674-676	3	<u>SC0091:</u> 001-370 Number of nights 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
677-678	2	<u>SC0092: Was it –</u> 01 Less than 1 week?

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>Facility #10 where decedent received care in the last year</u>
679-688	10	<u>Facility I.D. Number</u> See locations 426-433
689-698	10	Reserved <u>SC0093-0094: How many nights did -stay in (name of facility in 6a(10)) during -last year of Life?</u>
699-701	3	<u>SC0093:</u> 001-370 Number of nights 994 Refused 995 Don't know 996 Not applicable 998 Blank/out, of range 999 Non-response
702-703	2	<u>SC0094: Was It –</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>Facility #11 where decedent received care in the last year</u>
704-713	10	<u>Facility I.D. Number</u> See locations 426-433

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File Location	Field size	Item and code outline
		SC0095-0096: How many nights did -stay in (name of facility in 6a(11)) during -last year of <u>life?</u>
714-716	3	<u>SC0095:</u> 001-370 Number of nights 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
717-718	2	<u>SC0096: Was it –</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		Facility #12 where decedent received care in the <u>last year</u>
719-728	10	<u>Facility I.D. Number</u> See locations 426-433
		SC0097-0098: How many nights did -stay in (name of facility in 6a(12)) during -- last year of <u>life?</u>
729-731	3	<u>SC0097:</u> 001-370 Number of nights 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
732-733	2	<u>SC0098: Was it –</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year?

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File Location	Field size	Item and code outline
		09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
734-735	2	SC0100: During the last year of life, (when -- was not an overnight patient in (names of places in 6a), about how many days did illness or injury keep -- in bed more than half a day? 01 None 02 1-6 days 03 7 -13 days 04 14 days to under one month 05 1 up to 3 months 06 3 up to 6 months 07 6 up to 9 months 08 9 up to 12 months 09 Entire year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
736-737	2	SC0101: (Not counting visits while an overnight patient), during the last year of life, about how many times altogether did -- see a medical doctor of any kind? 01 None 02 1 time 03 2 to 4 times 04 5 to 9 times 05 10 to 14times 06 15 to 24 times 07 25 to 49 times 08 50 times or more 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
738-739	2	SC0102: (Not counting visits while an overnight patient), during the last year of life, did -- see. psychiatrist, psychologist, or any other mental health professional about any personal, emotional, behavioral, or mental problem? 01 Yes 02 No 94 Refused

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		96 Not applicable 98 Blank/out of range 99 Non-response
748-749	2	<u>SC0108: During -- last year of life, did -- family members not living with -help pay for care?</u>
		01 Yes 02 No 94 Refused 95 Don't know
748-749	2	<u>SC0108: During -- last year of life, did -- family members not living with -help pay for care? -- continued</u>
		96 Not applicable 98 Blank/out of range 99 Non-response
750-751	2	<u>SC0109: During -- last year of life, did -- a prepaid Health Maintenance Organization help pay for care?</u>
		01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
752-753	2	<u>SC0110: During -- last year of life, did -- Blue Cross/Blue Shield help pay for care?</u>
		01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
754-755	2	<u>SC0111: During -- last year of life, did -- any other private health insurance help pay for care?</u>
		01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
756-757	2	<p>SC0112: During -- last year of life, did - <u>Medicare help pay for care?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
758-759	2	<p>SC0113: During -- last year of life, did -- <u>Medicaid or (State name for Medicaid) help pay for care?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
760-761	2	<p>SC0114.: During -- last year of life, did -- the VA or Department of Veteran's Affairs help pay for <u>care?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
762-763	2	<p>SC0115: During-last year of life, did -- <u>Worker's compensation help pay for care?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
764-765	2	<p>SC0116: During -- last year of life, did -- another <u>government program help pay for care?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
774-775	2	<u>SC0121: During the last year of life, was covered by Medicare?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
776-777	2	<u>SC0122: During the last year of life, was -- covered by Medicaid or (Stat name for Medicaid)?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
778-779	2	<u>SC0123: During the last year of life, was -- covered by the VA or Department of Veterans Affairs?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
780-781	2	<u>SC0124: During the last year of life, was -- covered by Worker's Compensation?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
782-783	2	<u>SC0125: What was the total amount of -- OWN money (and money provided by family members living with --) that was used to pay for -medical</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<p>care during the last year of life? Include expenses for doctors, hospitals, nursing homes, dental, optical, medicines, and other health expenses. Also include payments or payroll deductions made for Medicare. and any other health insurance premiums. DO NOT include any amounts paid by or received from <u>insurance, Medicare, or Medicaid.</u></p>
		<p>01 Less than \$200 02 \$200 -\$499 03 \$500 -\$999 04 \$1,000-\$1,999 05 \$2,000 -\$2,999 06 \$3,000 -\$4,999 07 \$5,000 -\$9,999 08 \$10,000 -\$14,999 09 \$15,000-\$19,999 10 \$20,000- \$24,999</p>
782-783	2	<p>SC0125: What was the total amount of -- OWN money (and money provided by family members living with --) that was used to pay for -medical care during the last year of life? Include expenses for doctors, hospitals, nursing homes, dental, optical, medicines, and other health expenses. Also include payments or payroll deductions made for Medicare. and any other health insurance premiums. DO NOT include any amounts paid by or received from <u>insurance, Medicare, or Medicaid. -- continued</u></p> <p>11 \$25,000- \$49,999 12 \$50,000 or more 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
784-785	2	<p>SC0126: Were there any times during the last year of life that - needed health care but -- didn't <u>get it?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
		<p><u>SC0127-0133: Why was this?</u></p>
786-787	2	<p>SC0127: 01 Difficulties finding or getting into a facility</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		94 Refused. 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
788-789	2	<u>SC0128:</u> 02 Difficulties finding or getting treatment from a doctor 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
790-791	2	<u>SC0129:</u> 03 Problems getting help at home 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range <u>SC0127-0133: Why was this? – continued</u>
790-791	2	<u>SC0129: -- continued</u> 99 Non-response
792-793	2	<u>SC0130:</u> 04 Problems paying bills 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
794-795	2	<u>SC0131:</u> 05 Problems with transportation 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
796-797	2	<u>SC0132:</u> 06 Other 94 Refused 95 Don't know 96 Not applicable. 98 Blank/out of range 99 Non-response
798-799	2	<u>SC0133:</u> 07 Other 94 Refused 95 Don't know 96 Not applicable

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File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-response
800-801	2	SC0134: Were there any times during the last year of life that -needed health care but <u>avoided it or refused it?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
802-803	2	SC0135: During -last year of life, did - or - family have any (other) trouble getting any <u>health care for --?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
804-805	2	SC0136-0142: What were the (other) problems -- or the family had In getting care for -during the <u>last year of -life?</u> <u>SC0136:</u> 01 Finding or getting into a facility 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
806-807	2	<u>SC0137:</u> 02 Finding or getting treatment from a doctor 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
808-809	2	<u>SC0138:</u> 03 Getting help at home 94 Refused 95 Don't know 96 Not applicable

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-response
810-811	2	<u>SC0139:</u> 04 Paying the medical bills 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
812-813	2	<u>SC0140:</u> 05 Transportation 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
814-815	2	<u>SC0141:</u> 06 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
816-817	2	<u>SC0142:</u> 07 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
818-819	2	SC0143: AT ANY TIME IN -- LIFE, did -- ever have high blood pressure or hypertension, a heart attack, chest pains or angina pectoris, or a <u>stroke?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
820-821	2	SC0144: AT ANY TIME IN -- LIFE, did -- ever have high blood pressure or hypertension? For <i>female decedents read: Exclude high blood pressure or hypertension which was limited to <u>pregnancy.</u></i> 01 Yes

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0145-0149: When was the high blood pressure or hypertension first noticed?</u>
822-824	3	<u>SC0145:</u> 001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range
825-826	2	<u>SC0146:</u> 01-12 Month 94 Refuse 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
827-828	2	00-93 Year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
829-830	2	<u>SC0147:</u> 01 Time before death 02 Time before Interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
831-833	3	<u>SC0148:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
834-835	2	<u>SC0149:</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
836-837	2	<u>SC0150: Did a doctor ever prescribe medicine for the high blood pressure or hypertension?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
838-839	2	<u>SC151: At any time in -- life, did -- ever have a heart attack?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0152-0156: When did -have the FIRST heart attack?</u>
840-842	3	<u>SC0152:</u> 001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
843-844	2	<u>SC0153:</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
845-846	2	00-93 Year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
847-848	2	<u>SC0154:</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
849-851	3	<u>SC0155:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
852-853	2	<u>SC0156:</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0157-0162: When did - have - MOST RECENT heart attack?</u>
854-855	2	<u>SC0157:</u> 01 Only one heart attack 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
856-858	3	<u>SC0158:</u> 001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
859-860	2	<u>SC0159:</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable

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File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-response
861-862	2	00-93 Year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
863-864	2	<u>SC0160:</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
865-867	3	<u>SC0161:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
868-869	2	<u>SC0162:</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
870-871	2	<u>SC0163: At any time in -- life, did -- ever have chest pains or angina pectoris?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0164-0168: When were the chest pains or angina pectoris first noticed?</u>
872-874	3	<u>SC0164:</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
875-876	2	<u>SC0165:</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0164-0168: When were the chest pains or angina pectoris first noticed? -- continued</u>
877-878	2	00-93 Year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
879-880	2	<u>SC0166:</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
881-883	3	<u>SC0167:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
884-885	2	<u>SC0168:</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
886-887	2	<p>SCO169: At any time in -- life, did -- have a stroke in which any resulting conditions such as paralysis, or loss of vision or speech lasted AT LEAST ONE DAY OR LONGER? Include strokes which resulted in death.</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
		<p>SC0170-0174: When did -- have the FIRST stroke in which there were resulting conditions lasting at least one day?</p>
888-890	3	<p><u>SC0170:</u> 001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response</p>
891-892	2	<p><u>SC0171:</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
893-894	2	<p>00-93 Year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
895-896	2	<p><u>SC0172:</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
897-899	3	<p><u>SC0173:</u> 001-990 Number</p>

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File Location	Field size	Item and code outline
		994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
900-901	2	<u>SC0174:</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0175-0180: When did -- have the MOST RECENT stroke in which there were resulting conditions lasting at least one day?</u>
902-903	2	<u>SC0175:</u> 01 Only one stroke 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range
904-906	3	<u>SC0176:</u> 001-125 Age in years 994 Refused. 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
907-908	2	<u>SC0177:</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
909-910	2	00-93 Year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
911-912	2	<u>SC0178:</u> 01 Time before death

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File Location	Field size	Item and code outline
		02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
913-915	3	<u>SC0179:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
916-917	2	<u>SC0180:</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
918-919	2	<u>SC0181: AT ANY TIME IN -- LIFE, did a doctor say that -- had Alzheimer's disease?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0182-0186: When was this diagnosis first Made?</u>
920-922	3	<u>SC0182:</u> 001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
923-924	2	<u>SC0183:</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable

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File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-response
925-926	2	00-93 Year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
927-928	2	<u>SC0184:</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0182-0186: When was this diagnosis first Made? -- continued</u>
929-931	3	<u>SC0185:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
932-933	2	<u>SC0186:</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
934-935	2	<u>SC0187: AT ANY TIME IN-LIFE, did a doctor say that -- had (any other type of) organic brain syndrome, dementia, senility, or any other serious memory impairment?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		SC0188-SC0192 : When was this [other serious memory impairment] diagnosis first made?
936-938	3	<u>SC0188: Age</u> 1-107 Age in years range 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
939-940	2	<u>SC0189: Date</u> (Month) 1-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
941-942	2	(Year) 0-1993 Year range 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 9999 Non-respondent
943-944	2	<u>SC0190: Time</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
945-947	3	<u>SC0191: Number</u> 01-060 Number range 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range
948-949	2	<u>SC0192: Unit</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
950-952	2	SC0193: At any time in -- life, did -- have any (OTHER) mental health, nervous, or emotional problems? 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent SC0194-0198: When was the (other) mental health, nervous, or emotional problem first noticed?
952-954	3	<u>SC0194:</u> 001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
955-956	2	<u>SC0195:</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
957-958	2	00-93 Year 94 Refused

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
959-960	2	<u>SC0196:</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
961-963	3	<u>SC0197:</u> 001-990 Number 994 Refused 995 Don't know 998 Not applicable 998 Blank/out of range 999 Non-response
964-965	2	<u>SC0198:</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
966-967	2	<u>SC0199: AT ANY TIME IN -- LIFE, did -- ever have diabetes, cancer, asthma, emphysema, bronchitis, cirrhosis of the liver, or arthritis?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
968-969	2	SC0200: At any time during -- life, did -- have diabetes? For female decedents, read: Exclude

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<p>diabetes which was limited to pregnancy or "<u>gestational diabetes.</u>"</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
		<p><u>SC0201-0205: When was the diabetes first noticed?</u></p>
970-972	3	<p><u>SC0201: Age</u></p> <p>001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response</p>
973-974	2	<p><u>SC0202: Date</u></p> <p>01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
975-976	2	<p>00-93 Year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
977-978	2	<p><u>SC0203: Time</u></p> <p>01 Time before death 02 Time before Interview 94 Refused 95 Don't know 96 Not applicable' 98 Blank/out of range 99 Non-response</p>
979-981	3	<p><u>SC0204: Number</u></p> <p>001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<u>SC0201-0205: When was the diabetes first noticed? – continued</u>
982-983	2	<u>SC0205: Unit</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
984-985	2	<u>SC0206: Did a doctor ever prescribe medicine for the diabetes?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
986-987	2	<u>SC0207: At any time during -- life, did -- have cancer of any kind, except skin cancer?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0208-0212: When was the cancer, except skin cancer, first noticed?</u>
988-990	3	<u>SC0208: Age</u> 001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
991-992	2	<u>SC0209: Date</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-response
		<u>SC0208-0212: When was the cancer, except skin cancer, first noticed? – continued</u>
993-994	2	00-93 Year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
995-996	2	<u>SC0210: Time</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
997-999	3	<u>SC0211: Number</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1000-1001	2	<u>SC0212: Unit</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1002-1003	2	<u>SCO213: At any time during -- life, did -- have asthma?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
		SCO214-0218: When was the asthma first noticed?
1004-1006	3	<u>SC0214:</u> 001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1007-1008	2	<u>SC0215: Date</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1009-1010	2	00-93 Year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1011-1012	2	<u>SC0216: Time</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1013-1015	3	<u>SC0217: Number</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 9-8 Blank/out of range 999 Non-response
1016-1017	2	<u>SC0218: Unit</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		99 Non-response
1018-1019	2	<p>SC0219: Did- have asthma during -last year Of life?</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1020-1021	2	<p>SC0220: AT ANY TIME DURING -- LIFE, did -- have any other lung condition, such as emphysema or bronchitis, lasting 3 months or longer?</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent</p> <p>SC0221-0225: When was the lung condition first noticed?</p>
1022-1024	3	<p><u>SC0221: Age</u> 01-103 Age in years range 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-respondent</p>
1025-1026	2	<p><u>SC0222: Date</u> (Month) 1-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
1027-1028	2	(Year) 1902-1993 Year range 9994 Refused 9995 Don't know 9996 Not applicable 9998 Blank/out of range 9999 Non-respondent
1029-1030	2	<u>SC0223: Time</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
1031-1033	3	<u>SC0224: Number</u> 001-072 Number range 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-respondent
1034-1035	2	<u>SC0225: Unit</u> 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
1036-1037	2	<u>SC0226: Did -- have the lung condition during -- last year of life?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		99 Non-respondent
1038-1039	2	<p>SC0227: At any time during -- life, did -- have cirrhosis of the liver?</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent</p> <p>SC0228-SC0232 When was the cirrhosis first noticed?</p>
1040-1042	3	<p><u>SC0228: Age</u> 001-089 Age in years range 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-responden</p>
1043-1044	2	<p><u>SC0229: Date</u> (Month) 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent</p>
1045-1046	2	<p>(Year) 1950-1993 Year range 9994 Refused 9995 Don't know 9996 Not applicable 9998 Blank/out of range 9999 Non-respondent</p>
1047-1048	2	<p><u>SC0230: Time</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable</p>

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File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-respondent
1049-1051	3	<u>SC0231: Number</u> 001-030 Number range 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-respondent
1052-1053	2	<u>SC0232: Unit</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
1054-1055	2	<u>SC0233: At any time during -- life, did a doctor say that -- had arthritis of any kind?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent <u>SC0234-0238: When did a doctor first say that -- had arthritis?</u>
1056-1058	3	<u>SC0234: Age</u> 001-110 Age in years range 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-respondent <u>SC0235: Date</u>

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File Location	Field size	Item and code outline
1059-1060	2	(Month) 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
1061-1062	2	(Year) 1923-1993 Year range 9994 Refused 9995 Don't know 9996 Not applicable 9998 Blank/out of range 9999 Non-respondent
1063-1064	2	<u>SC0236: Time</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
1065-1067	3	<u>SC0237: Number</u> 001-065 Number range 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-respondent
		<u>SC0234-0238: When did a doctor first say that -- had arthritis? -- continued</u>
1068-1069	2	<u>SC0238: Unit</u> 01 Minutes 02 Hours 03 Days 04 Weeks 05 Months 06 Years

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
		<u>Section F -- Cognitive functioning</u>
1070-1071	2	<u>SC0239: During the last year of life, did -- have any trouble understanding where -- was?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
1072-1073	2	<u>SC0240: During the last year of life how often did -- have trouble understanding where -- was? Was it --</u> 01 All or most of the time? 02 Some of the time? 03 Only in last few hours or days before death? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
1074-1075	2	<u>SC0241: During the last year of life, did -- have any trouble remembering what year it was?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent

**1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent,
and Medical Examiner/Coroner Data File Documentation**

File Location	Field size	Item and code outline
1076-1077	2	<p>SC0242: During the last year of life how often did -- <u>have trouble remembering what year it was?</u> Was</p> <p>01 All or most of the time? 02 Some of the time? 03 Only in last few hours or days before death? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent</p>
1078-1079	2	<p>SC0243: During the last year of life, did -- have any trouble recognizing family members or good friends?</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent</p>
1080-1081	2	<p>SC0244: During the last year of life, how often did -- have trouble recognizing family members or good friends? <u>Was it --</u></p> <p>01 All or most of the time? 02 Some of the time? 03 Only in last few hours or days before death? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent</p>
1082-1083	2	<p><u>Section G -- Activities of daily living (ADL) and instrumental ADL</u></p> <p>SC0245: During the last year of life, because of any physical or mental condition, did -- have any difficulty taking care of <u>(himself/herself) or doing routine chores?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		96 Not applicable 98 Blank/out of range 99 Non-respondent
1084-1085	2	SC0246: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty climbing a flight of stairs without resting? Was this because of a physical or mental health condition? 01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
1086-1087	2	SC0247-0249: Now thinking about – ENTIRE LIFE, during -- entire life, how long did – have difficulty in lifting and carrying something as <u>heavyas 10 lbs?</u> <u>SC0247:</u> 00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent
1088-1090	3	<u>SC0248:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1091-1092	2	<u>SC0249:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
1093-1094	2	<p>SC0250: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty climbing a flight of stairs without resting? Was this because of a physical or mental health condition?</p> <p>01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p> <p>SC0251-0253: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in climbing a flight of stairs without resting?</p>
1095-1096	2	<p><u>SC0251:</u> 00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1097-1099	3	<p><u>SC0252:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range</p>
1100-1101	2	<p><u>SC0253:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1102-1103	2	<p>SC0254: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty walking a quarter of a mile, about 3 city blocks? Was this because of a physical or mental health condition?</p> <p>01 Yes</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		02 No 03 Didn't do 94 Refused
1102-1103	2	SC0254: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty walking a quarter of a mile, about 3 city blocks? Was this because of a <u>physical or mental health condition?</u> -- continued 95 Don't know 98 Not applicable 98 Blank/out of range 99 Non-response SC0255-0257: Now thinking about – ENTIRE LIFE, during -- entire life, how long did – have difficulty in walking a quarter of a mile, about 3 <u>city blocks?</u>
1104-1105	2	<u>SC0255:</u> 00 Entire life 94 Refused 95 Don't know 98 Not applicable 98 Blank/out of range 99 Non-response
1106-1108	3	<u>SCO256:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1109-1110	2	<u>SC0257:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1111-1112	2	SC0258: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty doing heavy work around the house, such as scrubbing floors or washing windows? Was this because of a physical or <u>mental health condition?</u> 01 Yes 02 No

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File Location	Field size	Item and code outline
		03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0259-0261: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in doing heavy work around the house, such as scrubbing floors or washing windows?</u>
1113-1114	2	<u>SC0259:</u> 00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1115-1117	3	<u>SC0260:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1118-1119	2	<u>SC0261:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1120-1121	2	<u>SC0262: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty shopping for personal items, such as food or medication? Was this because of a physical or mental health condition?</u>
		01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		SC0263-0265: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in shopping for personal items, such as food, or medication?
1122-1123	2	<u>SC0263:</u> 00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1124-1126	3	<u>SC0264:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1127-1128	2	<u>SC0265:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1129-1130	2	SC0266: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty going outside the home alone, such as to shop or visit a doctor's office? Was this because of a physical or mental health condition? 01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		SC0267-0269: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in going outside the home alone, such as to shop or visit a doctor's office?
1131-1132	2	<u>SC0267:</u> 00 Entire life

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1133-1135	3	<u>SC0268:</u> 001-990 Number 994 Refused 995 Don't know 896 Not applicable 998 Blank/out of range 999 Non-response
1136-1137	2	<u>SC0269:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1138-1139	2	<p><u>SC0270: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty doing light work around the house, such as washing dishes or doing light yard work? Was this because of a physical or mental health condition?</u></p> 01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1140-1141	2	<p><u>SC0271-273: Now thinking about -- ENTIRE LIE, during -- entire life, how long did -- have difficulty in doing light work around the house, such as washing dishes or doing light yard work?</u></p> <u>SC0271:</u> 00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		99 Non-response
		SC0271-273: Now thinking about -- ENTIRE LIE, during -- entire life, how long did -- have difficulty in doing light work around the house, such as washing dishes or doing light yard work? -- continued
1142-1144	3	<u>SC0272:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1145-1146	2	<u>SC0273:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1147-1148	2	SC0274: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty preparing -- meals? Was this because of a physical or mental health <u>condition?</u> 01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response SC0275-0277: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have <u>difficulty in preparing -- meals?</u>
1149-1150	2	<u>SC0275:</u> 00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range
1151-1153	3	<u>SC0276:</u>

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File Location	Field size	Item and code outline
		001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
		<u>SC0275-0277: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in preparing -- meals? -- continued</u>
1154-1155	2	<u>SC0277:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1156-1157	2	<u>SC0278: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty managing -- money, such as keeping track of expenses or paying bills? Was this because of a physical or mental health condition?</u>
		01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0279-0281: Now thinking about -- ENTIRE LIFE, during -entire life, how long did -- have difficulty in managing -- money, such as keeping track of expenses or paying bills?</u>
1158-1159	2	<u>SC0279:</u> 00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1160-1162	3	<u>SC0280:</u> 001-990 Number 994 Refused 995 Don't know

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File Location	Field size	Item and code outline
		996 Not applicable 998 Blank/out of range 999 Non-response
1163-1164	2	<u>SC0281:</u> 03 Days 04 Weeks 05 Months 06 Years
1165-1166	2	SC0282: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty using a telephone? Was this because of a physical or mental health condition? 01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response SC0283-0285: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in using a telephone?
1167-1168	2	<u>SC0283:</u> 00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1169-1171	3	<u>SC0284:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1172-1173	2	<u>SC0285:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know

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File Location	Field size	Item and code outline
		96 Not applicable 98 Blank/out of range 99 Non-response
1174-1175	2	SC0286: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty getting around inside the home? Was this because of a physical or mental health condition? 01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response SC0287-289: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in getting around inside the home?
1176-1177	2	<u>SC0287:</u> 00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1178-1180	3	<u>SC0288:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1181-1182	2	<u>SC0289:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1183-1184	2	SC0290: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty walking? Was this because

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File Location	Field size	Item and code outline
		<p><u>of a physical or mental health condition?</u></p> <p>01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
		<p><u>SC0291-0293: Now thinking about -- ENTIRE LIFE, during --entire life, how long did -- have difficulty In walking?</u></p>
1185-1186	2	<p><u>SCO291:</u></p> <p>00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1187-1189	3	<p><u>SC0292:</u></p> <p>001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response</p>
1190-1191	2	<p><u>SCO293:</u></p> <p>03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1192-1193	2	<p><u>SC0294: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty getting in and out of bed or chairs? Was this because of a physical or mental health condition?</u></p> <p>01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range</p>

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File Location	Field size	Item and code outline
		99 Non-response
		<u>SC0295-0297: Now thinking about -- ENTIRE LIFE. during -entire life, how long did -- have difficulty in getting in and out of chairs?</u>
1194-1195	2	<u>SC0295:</u> 00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1196-1198	3	<u>SC0296:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1199-1200	2	<u>SC0297:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1201-1202	2	<u>SC0298: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty eating? Was this because of a physical or mental health condition?</u> 01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0299-0301: Now thinking about --ENTIRE LIFE, during -- entire life, how long did -- have difficulty in eating?</u>
1203-1204	2	SC0299:

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File Location	Field size	Item and code outline
		00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1205-1207	3	<u>SC0300:</u> 001-990 Number 994 Refused . 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1208-1209	2	<u>SC0301:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1210-1211	2	<u>SC0302: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty using the toilet, including getting to and from the toilet? Was this because of a physical or mental health condition?</u> 01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0303-0305: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in using the toilet, including getting to and from the toilet?</u>
1212-1213	2	<u>SC0303:</u> 00 Entire life 94 Refused 95 Don't now 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
1214-1216	3	<u>SC0304:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1217-1218	2	<u>SC0305:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1219-1220	2	<u>SC0306: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty bathing or showering? Was this because of a physical or mental health condition?</u> 01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0307-4309: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in bathing or showering?</u>
1221-1222	2	<u>SC0307:</u> 00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1223-1225	3	<u>SC0308:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1226-1227	2	<u>SC0309:</u>

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File Location	Field size	Item and code outline
		03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1228-1229	2	SC0310: At any time during the last year of life, because of any physical or mental condition, did -- have any difficulty dressing? Was this because of a physical or mental health condition? <u>SC0310:</u> 01 Yes 02 No 03 Didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response SC0311-0313: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in dressing? <u>SC0311:</u>
1230-1231	2	<u>SC0311:</u> 00 Entire life 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1232-1234	3	<u>SC0312:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1235-1236	2	<u>SC0313:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
1237-1238	2	<p>SC0314: During - last year of life, did -- receive help AT-- HOME from anyone in <i>(all activities with "Yes" marked in SC246-SC310)?</i></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p> <p>SC0315-0326: Who helped -- AT HOME during the last year of life?</p>
1239-1240	2	<p><u>SC0315:</u> 01 Decedents spouse 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1241-1242	2	<p><u>SC0316:</u> 02 Decedent's mother 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1243-1244	2	<p><u>SC0317:</u> 03 Decedent's father 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1245-1246	2	<p><u>SC0318:</u> 04 Decedent's son 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1247-1248	2	<p><u>SC0319:</u> 05 Decedent's daughter 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>

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File Location	Field size	Item and code outline
		<u>SC0315-0326: Who helped -AT HOME during the last year of life? – continued</u>
1249-1250	2	<u>SC0320:</u> 06 Other relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1251-1252	2	<u>SC0321:</u> 07 Neighbor or friend 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1253-1254	2	<u>SC0322:</u> 08 Home hospice care 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1255-1256	2	<u>SC0323:</u> 09 Visiting nurse 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1257-1258	2	<u>SC0324:</u> 10 Visiting homemaker 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1259-1260	2	<u>SC0325:</u> 11 Personal care aide 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range
1261-1262	2	<u>SC0326:</u> 12 Other 94 Refused

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File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1263-1264	2	SC0327: Did -- or anyone else pay for any of the help -- received AT HOME during the last year of life in (all activities with "Yes" marked in <u>SC0315-SC0326</u>)? 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0328-0330: During the last year of life, for how long did -- receive any paid help at home?</u>
1265-1267	3	<u>SC0328:</u> 000 Entire year 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1268-1270	3	<u>SC0329:</u> 001-370 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1271-1272	2	<u>SC0330:</u> 03 Days 04 Weeks 05 Months 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0331-0332: (Including both paid and unpaid help), during -- ENTIRE LIFE, how long did -- receive help AT HOME in (all activities. with "Yes" marked in SC0246-SC0310)?</u>
1273-1275	3	<u>SC0331:</u> 001-990 Number 994 Refused

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File Location	Field size	Item and code outline
		995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
		<u>SC0331-0332: (Including both paid and unpaid help), during – ENTIRE LIFE, how long did -- receive help AT HOME in (all activities. with "Yes" marked in SC0246-SC0310)? -- continued</u>
1276-1277	2	<u>SC0332:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1278-1279	2	<u>SC0333: During the last year of life, did -- use any kind of device for a physical disability or impairment such as a brace, crutches, wheelchair, vision or hearing aid, or artificial limb?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1280-1281	2	<u>SC0334: During -- last year of life, did -- use a brace of any kind?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1282-1283	2	<u>SC0335: During -- last year of life, did -- use any special equipment for getting around, such as crutches, a cane, a walker, or a wheelchair?</u> 01 Yes 02 No 94 Refused

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File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1284-1285	2	<u>SC0336: During -- last year of life, did -- use any special equipment for hearing problems, such as a hearing aid, a special telephone, or other special equipment for hearing problems?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1286-1287	2	<u>SC0337: During -- last year of life, did -- use any special equipment for vision problems, such as a white cane? Do not count eyeglasses or contact lenses.</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1288-1289	2	<u>SC0338: During -- last year of life, did -- use an artificial leg, Foot, arm, or hand?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1290-1291	2	<u>SC0339: During -- last year of life, did -- use a communications aid for speech problems?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

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File Location	Field size	Item and code outline
		99 Non-response
1292-1293	2	<p><u>SC0340: Did -- ever have an artificial joint, such as an artificial hip, knee or finger joint implanted?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1294-1295	2	<p><u>SC0341: Which joints did -- have implanted?</u></p> <p>01 Shoulder joint, left or right 02 Elbow joint, left or right 03 Hand, left or right 04 Wrist joint, left or right 05 Finger joints, left or right 06 Hip joint, left or right 07 Knee joint, left or right 08 Foot, left or right 09 Ankle joint, left or right 10 Toe joints, left or right 11 Other joints 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range. 99 Non-response</p>
1296-1297	2	<p><u>SC0342: Which joints did -- have implanted?</u></p> <p>01 Shoulder joint, left or right 02 Elbow joint, left or right 03 Hand, left or right 04 Wrist joint, left or right 05 Finger joints, left or right 06 Hip joint, left or right 07 Knee joint, left or right 08 Foot, left or right 09 Ankle joint, left or right 10 Toe joints, left or right 11 Other joints 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1298-1299	2	<p><u>SC0343: Was the (joint specified in SC0341) implanted during the LAST YEAR OF LIFE?</u></p>

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File Location	Field size	Item and code outline
		01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1300-1301	2	<u>SC0344: Was the (joint specified in SC0342) implanted during the LAST YEAR OF LIFE?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1302-1303	2	<u>SC0345: In what month was the (joint specified in SC0341) implanted?</u> 01 January 02 February 03 March 04 April 05 May 06 June 07 July 08 August 09 September 10 October 11 November 12 December 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1304-1305	2	<u>SC0346: In what month was the (joint specified in SC0342) implanted?</u> 01-12 Month 94 Refused. 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0347-0349: Was the (joint specified in SC0341) removed or replaced during the LAST YEAR OF LIFE?</u>

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File Location	Field size	Item and code outline
1306-1307	2	<u>SC0347:</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1308-1309	2	<u>SC0348:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1310-1311	2	<u>SC0349:</u> 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0350-0352: Was the (joint specified in SC0342) removed or replaced during the LAST YEAR OF LIFE?</u>
1312-1313	2	<u>SC0350:</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1314-1315	2	<u>SC0351:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1316-1317	2	<u>SC0352:</u> 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1318-1319	2	<u>SC0353: In what month was the (joint in SC0341) (removed/replaced)?</u>

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File Location	Field size	Item and code outline
		01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1320-1321	2	<u>SCO354: In what month was the (joint in SC0342) (removed/replaced)?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1322-1323	2	<u>SC0355: Did -- ever have any implants, such as pins, screws, nails, wires, rods, or plates that were surgically inserted into the body?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1324-1325	2	<u>SC0356: In what part of the body were the pins, Screws, nails, wires, rods, or plates located?</u> 01 Skull 02 Face 03 Jaw 04 Clavicle 05 Sternum 06 Ribs 07 Back, spine/vertebrae -- unspecified 08 Back, spine/vertebrae -- upper 09 Back, spine/vertebrae -- middle 10 Back, spine/vertebrae -- lower 11 Shoulder, left or right 12 Arm -- unspecified, left or right 13 Arm -- upper, left or right 14 Arm -- lower, left or right 15 Elbow, left or right 16 Wrist, left or right 17 Hand, left or right 18 Fingers, left or right 19 Pelvis 20 Hip, left or right 21 Leg - unspecified, left or right 22 Leg - upper, left or right

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File Location	Field size	Item and code outline
		23 Leg - Lower, left or right 24 Knee, left or right 25 Foot, left or right 26 Ankle, left or right 27 Toes, left or right 28 Other body site 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1326-1327	2	<u>SC0357: In what part of the body were the pins, Screws, nails, wires, rods, or plates located?</u> 01 Skull 02 Face 03 Jaw 04 Clavicle 05 Sternum 06 Ribs 07 Back, spine/vertebrae -- unspecified 08 Back, spine/vertebrae -- upper 09 Back, spine/vertebrae -- middle 10 Back, spine/vertebrae -- lower 11 Shoulder, left or right 12 Arm - unspecified, left or right 13 Arm - upper, left or right 14 Arm - lower, left or right 15 Elbow, left or right 16 Wrist, left or right 17 Hand, left or right 18 Fingers, left or right 19 Pelvis 20 Hip, left or right 21 leg -- unspecified, left or right 22 leg -- upper, left or right 23 leg -- lower, left or right 24 Knee, left or right 25 Foot, left or right 26 Ankle, left or right 27 Toes, left or right 28 Other body site 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1328-1329	2	<u>SC0358: Was the device for (body site in SC356) Implanted during the LAST YEAR OF LIFE?</u> 01 Yes 02 No

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1330-1331	2	SC0359: Was the device for (<i>body site in SC357</i>) implanted during the LAST YEAR OF <u>LIFE</u>? 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1332-1333	2	SC0360: In what month was the device for (<i>body site in SC356</i>) implanted? 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range
1334-1335	2	SC0361: In what month was the device for (<i>body site in SC357</i>) implanted? 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response SC0362-4364: Was the device for (<i>body site in SC356</i>) removed or replaced during the LAST YEAR OF LIFE?
1336-1337	2	<u>SC0362.</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1338-1339	2	<u>SC0363:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable

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File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-response
1340-1341	2	<u>SC0364:</u> 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0365-0367: Was the device for (body site in SC357) removed or replaced during the LAST YEAR OF LIFE?</u>
1342-1343	2	<u>SC0365:</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1344-1345	2	<u>SC0366:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1346-1347	2	<u>SC0367:</u> 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1348-1349	2	<u>SC0368: In what month was the device for (body site in SC0356) (removed/replaced)?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1350-1351	2	<u>SC0369: In what month was the device for (body site in SC357) (removed/replaced)?</u> 01-12 Month 94 Refused 95 Don't know

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File Location	Field size	Item and code outline
		96 Not applicable 98 Blank/out of range 99 Non-response
1352-1353	2	<u>SC0370: Did -- ever have an artificial heart Valve?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1354-1355	2	<u>SC0371: There are four different types of heart valves; the mitral valve, the aortic valve, the tricuspid valve, and the pulmonic valve. Which of these different types of heart valves did -- ever have?</u> 01 Mitral valve 02 Aortic valve 03 Tricuspid valve 04 Pulmonic valve 05 Valve, unspecified type 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1356-1357	2	<u>SC0372: There are four different types of heart valves; the mitral valve, the aortic valve, the tricuspid valve, and the pulmonic valve. Which of these different types of heart valves did -- ever have?</u> 01 Mitral valve 02 Aortic valve 03 Tricuspid valve 04 Pulmonic valve 05 Valve, unspecified type 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1358-1359	2	<u>SC0373: There are four different types of heart valves; the mitral valve. the aortic valve. The tricuspid valve, and the pulmonic valve. Which of these different types of heart valves did - ever have?</u> 01 Mitral valve 02 Aortic valve

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File Location	Field size	Item and code outline
		03 Tricuspid valve 04 Pulmonic valve 05 Valve; unspecified type 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1360-1361	2	SC0374: There are four different types of heart valves; the mitral valve, the aortic valve, the tricuspid valve, and the pulmonic valve. Which of these different types of heart valves did -- <u>ever have?</u> 01 Mitral valve 02 Aortic valve 03 Tricuspid valve 04 Pulmonic valve 05 Valve, unspecified type 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1362-1363	2	SC0375: How many different types of heart valves did -- <u>ever have?</u> 01-04 Number of valves 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1364-1365	2	SC0376: Was the (<i>valve type in SC0371</i>) <u>implanted during the LAST YEAR OF LIFE?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1366-1367	2	SC0377: Was the (<i>valve type in SC0372</i>) <u>implanted during the LAST YEAR OF LIFE?</u>

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File Location	Field size	Item and code outline
		01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range
1368-1369	2	<u>SC0378: Was the (valve type in SC0373) implanted during the LAST YEAR OF LIFE?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1370-1371	2	<u>SC0379: Was the (valve type in SC0374) implanted during the LAST YEAR OF LIFE?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1372-1373	2	<u>SC0380: In what month was the (valve type in SC0371) implanted?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1374-1375	2	<u>SC0381: In what month was the (valve type in SC0372) implanted?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1376-1377	2	<u>SC0382: In what month was the (valve type in SC0373) implanted?</u> 01-12 Month 94 Refused

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File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1378-1379	2	<u>SC0383: In what month was the (valve type in SC0374) implanted?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0384-0386: Was the (valve type in SC0371) removed or replaced during the LAST YEAR OF LIFE?</u>
1380-1381	2	<u>SC0384:</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1382-1383	2	<u>SC0385:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1384-1385	2	<u>SC0386:</u> 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC087-0389: Was the (valve type in SC0372) removed or replaced during the LAST YEAR OF LIFE?</u>
1386-1387	2	<u>SC0387:</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
1388-1389	2	<u>SC0388:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1390-1391	2	<u>SC0389:</u> 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		SC0390-0392: Was the (<i>valve type in SC0373</i>) removed or replaced during the LAST YEAR OF <u>LIFE?</u>
1392-1393	2	<u>SC0390:</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1394-1395	2	<u>SC0391:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1396-1397	2	<u>SC0392:</u> 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		SC0393-0395: Was the (<i>valve type in SC0374</i>) removed or replaced during the LAST YEAR OF <u>LIFE?</u>
1398-1399	2	<u>SC0393:</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

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File Location	Field size	Item and code outline
		99 Non-response
1400-1401	2	<u>SC0394:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1402-1403	2	<u>SC0395:</u> 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1404-1405	2	<u>SC0396: In what month was the (value in SC0371) (removed/replaced)?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1406-1407	2	<u>SC0397: In what month was the (value in SC0372) (removed/replaced)?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1408-1409	2	<u>SC0398: In what month was the (value in SC0373) (removed/replaced)?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1410-1411	2	<u>SC0399: In what month was the (value in SC0374) (removed/replaced)?</u> 01-12 Month 94 Refused 95 Don't know

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File Location	Field size	Item and code outline
		96 Not applicable 98 Blank/out of range 99 Non-response
1412-1413	2	<u>SC0400: Did -- ever have an annuloplasty ring?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1414-1415	2	<u>SC0401: Was the ring implanted during the LAST YEAR OF LIFE?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1416-1417	2	<u>SC0402: In what month was the ring implanted?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0403-0405: Was the ring removed or replaced during the LAST YEAR OF LIFE?</u>
1418-1419	2	<u>SC0403:</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1420-1421	2	<u>SC0404:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1422-1423	2	<u>SC0405:</u> 03 No

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1424-1425	2	<u>SC0406: In what month was the ring removed/replaced?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1426-1427	2	<u>SC0407: Did – EVER have a lens implant? Do not include corneal transplants.</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1428-1429	2	<u>SC0408: In which eye did -- have the lens implanted?</u> 01 Right eye 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1430-1431	2	<u>SC0409: In which eye did -- have the lens implanted?</u> 02 Left eye 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1432-1433	2	<u>SC0410: Was the right eye lens implanted during the LAST YEAR OF LIFE?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable

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File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-response
1434-1435	2	<u>SC0411: Was the left eye lens Implanted during the LAST YEAR OF LIFE?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1436-1437	2	<u>SC0412: In what month was the right lens implanted?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1438-1439	2	<u>SC0413: In what month was the left lens implanted?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0414-0416: was the right lens removed or replaced during the LAST YEAR OF LIFE?</u>
1440-1441	2	<u>SC0414:</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1442-1443	2	<u>SC0415:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1444-1445	2	<u>SC0416:</u> 03 No

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0417-0419: Was the left lens removed or replaced during the LAST YEAR OF LIFE?</u>
1446-1447	2	<u>SC0417:</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0417-0419: Was the left lens removed or replaced during the LAST YEAR OF LIFE?</u> <u>-- continued</u>
1448-1449	2	<u>SC0418:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1450-1451	2	<u>SC0419:</u> 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1452-1453	2	<u>SC0420: In what month was the right lens (removed/replaced)?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1454-1455	2	<u>SC0421: In what month was the left lens (removed/replaced)?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable

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File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-response
1456-1457	2	<u>SC0422: Did – EVER have a silicone implant?</u> 01 Yes 02 No 94 Refused 95 Don' know 96 Not applicable 98 Blank/out of range 99 Non-response
1458-1459	2	<u>SC0423: In what part of the body was the silicone implanted? Was it in the (if female; breasts), nose, chin, or some other part of the body?</u> 01 Ear, left or right 02 Nose 03 Mouth 04 Chin 05 Jaw 06 Facial bones 07 Neck 08 Chest 09 Breast, left or right 10 Penis 11 Testes 12 Vagina 13 Extremity /limb - unspecified 14 Arm, left or right 15 Wrist, left or right 16 Hand, left or right 17 Leg, left or right. 18 Knee, left or right 19 Foot, left or right 20 Ankle, left or right 21 Toes, left or right 22 Other body site 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1460-1461	2	<u>SC0424: In what part of the body was the silicone Implanted? Was it in the (if female; breasts), nose, chin, or some other part of the body?</u> 01 Ear, left or right 02 Nose 03 Mouth 04 Chin

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File Location	Field size	Item and code outline
		05 Jaw 06 Facial bones 07 Neck 08 Chest 09 Breast, left or right 10 Penis 11 Testes 12 Vagina 13 Extremity/limb - unspecified 14 Arm, left or right 15 Wrist, left or right 16 Hand, left or -right 17 Leg, left or right 18 Knee, left or right 19 Foot, left or right 20 Ankle, left or right 21 Toes, left or right 22 Other body site 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1462-1463	2	SC0425: Did -- have the silicone originally implanted for breast reconstruction after a <u>mastectomy</u>? 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1464-1465	2	SC0426: Was the silicone for (<i>body site in SC0423</i>) implanted during the LAST YEAR OF <u>LIFE</u>? 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1466-1467	2	SC0427: Was the silicone for (<i>body site in SC0424</i>) implanted during the LAST YEAR OF <u>LIFE</u>? 01 Yes 02 No 94 Refused 95 Don't know

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File Location	Field size	Item and code outline
		96 Not applicable 98 Blank/out of range 99 Non-response
1468-1469	2	SC0428: In what month was the silicone for (<i>body site in SC0423</i>) implanted? 01-12 Month 94 Refused 95 Don't know. 96 Not applicable 98 Blank/out of range 99 Non-response
1470-1471	2	SC0429: In what month was the silicone for (<i>body site in SC0424</i>) implanted? 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response SC0430: Was the silicone for (<i>body site in SC0423</i>) removed or replaced during the LAST YEAR OF LIFE?
1472-1473	2	SC0430: 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1474-1475	2	SC0431: 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1476-1477	2	SC0432: 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response SC0433-SC0435: Was the silicone for (<i>body site in SC0424</i>) removed or replaced during the LAST YEAR OF LIFE?

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File Location	Field size	Item and code outline
1478-1479	2	<u>SC0433:</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1480-1481	2	<u>SC0434:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0433-SC0435: Was the silicone for (body site in SC0424) removed or replaced during the LAST YEAR OF LIFE? -- continued</u>
1482-1483	2	<u>SC0435:</u> 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1484-1485	2	<u>SC0436: Was the reason for removal (SC0423) In order to relieve physical symptoms believed to be due to the implant?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1486-1487	2	<u>SC0437: Was the reason for removal (SC0424) In order to relieve physical symptoms believed to be due to the implant?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1488-1489	2	<u>SC0438: In what month was the silicone for (body site in SC0423) removed/replaced)?</u> 01-12 Month

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File Location	Field size	Item and code outline
		94 Refused . 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1490-1491	2	<u>SC0349: In what month was the silicone for (body site in SC0424) (removed/replaced)?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1492-1493	2	<u>SC0440: Did -- ever have a pacemaker?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1494-1495	2	<u>SC0441: Was the pacemaker implanted during the LAST YEAR OF LIFE?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1496-1497	2	<u>SC0442: In what month was the pacemaker implanted?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1498-1499	2	<u>SC0443-0445: Was the pacemaker removed or replaced during the LAST YEAR OF LIFE?</u> <u>SC0443:</u> 01 Yes, removed 94 Refused 95 Don't know

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File Location	Field size	Item and code outline
		96 Not applicable 98 Blank/out of range 99 Non-response
1500-1501	2	<u>SC0444:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1502-1503	2	<u>SC0445:</u> 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1504-1505	2	<u>SC0446: In what month was the pacemaker (removed/replaced)?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1506-1507	2	<u>SC0447: Did -- EVER have an infusion pump?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1508-1509	2	<u>SC448: Was the infusion pump implanted during the LAST YEAR OF LIFE?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1510-1511	2	<u>SC0449: In what month was the infusion pump implanted?</u> 01-12 Month 94 Refused

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File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0450-0452: Was the infusion pump removed or replaced during the LAST YEAR OF LIFE?</u>
1512-1513	2	<u>SC0450:</u> 01 Yes, removed 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1514-1515	2	<u>SC0451:</u> 02 Yes, replaced 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1516-1517	2	<u>SC0452:</u> 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1518-1519	2	<u>SC0453: In what month was the infusion pump (removed/replaced)?</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1520-1521	2	<u>SC0454: Did -- have a shunt, catheter, or tube In place at any time while at home during the last year of life?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1522-1523	2	SC0455: Did -- have a shunt that drained fluid

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File Location	Field size	Item and code outline
		<p><u>away from the brain or spinal column?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1524-1525	2	<p><u>SC0456: Was the shunt implanted during the last year of life?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1526-1527	2	<p><u>SC0457: Did -- have a TEMPORARY intravenous (I.V.) catheter while living at home during the last year of life?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1528-1529	2	<p><u>SC0458: Did -- have an access device SURGICALLY INSERTED in (his/her) vein to allow infusion of fluids, medication or intravenous feedings?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1530-1531	2	<p><u>SC0459: Was the access device implanted during the last year of life?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range</p>

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File Location	Field size	Item and code outline
		99 Non-response
1532-1533	2	SC0460: Did - have a bladder drainage <u>catheter?</u>
		01 Yes
		02 No
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range
		99 Non-response
1534-1535	2	SC0461: Was the use of the catheter started <u>during the last year of life?</u>
		01 Yes
		02 No
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range
		99 Non-response
1536-1537	2	SC0462: Did -- have a feeding-tube while at <u>home during the last Year of life?</u>
		01 Yes
		02 No
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range
		99 Non-response
1538-1539	2	SC0463: Was the tube surgically Inserted into the abdomen or placed through the nose or <u>mouth?</u>
		01 Abdomen
		02 Nose/mouth
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range
		99 Non-response
1540-1541	2	SC0464: Were tube feedings started during the <u>last year of life?</u>
		01 Yes
		02 No
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range

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File Location	Field size	Item and code outline
		99 Non-response
1542-1543	2	<p><u>SC0465: Did -have a tube in the windpipe or trachea to assist breathing while at home during the last year of life?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1544-1545	2	<p><u>SC0466: Was the tube inserted during the last Year of life?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1546-1547	2	<p><u>SC0467: Did -- use dialysis equipment?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1548-1549	2	<p><u>SC0468: Did -- use a hospital bed?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1550-1551	2	<p><u>SC0469: Did -- use a blood glucose monitor?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range</p>

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File Location	Field size	Item and code outline
		99 Non-response
1552-1553	2	<p><u>SC0470: Did -- use protective restraints, such as vests or belts?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1554-1555	2	<p><u>SC0471: Did -- use an infusion pump?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p> <p><u>SC0472-0477: For what purpose was the pump used?</u></p>
1556-1557	2	<p><u>SC0472:</u></p> <p>01 Pain medication 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1558-1559	2	<p><u>SC0473:</u></p> <p>02 Chemotherapy 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1560-1561	2	<p><u>SC0474:</u></p> <p>03 Insulin 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1562-1563	2	<p><u>SC0475:</u></p> <p>04 Intravenous feeding 94 Refused 95 Don't know</p>

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File Location	Field size	Item and code outline
		96 Not applicable 98 Blank/out of range 99 Non-response
1564-1565	2	<u>SC0476:</u> 05 Tube feeding 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1566-1567	2	<u>SC0477:</u> 06 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1568-1569	2	<u>SC0478: Did - use oxygen or any devices for breathing therapy?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0479-0482: Which breathing devices did -- used?</u>
1570-1571	2	<u>SC0479:</u> 01 Oxygen supplies in any form 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1572-1573	2	<u>SC0480:</u> 02 Respirator or ventilator 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1574-1575	2	<u>SC0481:</u> 03 Nebulizer 94 Refused 95 Don't know 96 Not applicable

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File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-response
1576-1577	2	<u>SC0482:</u> 04 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1578-1579	2	<u>SC0487: During MOST of -- life, was -- overweight, underweight or just about right?</u> 01 Overweight 02 Underweight 03 About right 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1580-1581	2	<u>SC0488: Was -- very overweight, somewhat overweight or only a little overweight?</u> 01 Very overweight 02 Somewhat overweight 03 Only a little overweight 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1582-1583	2	<u>SC0489: Was -- right-handed or left-handed?</u> 01 Right-handed 02 left-handed 03 Ambidextrous 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1584-1585	2	<u>SC0490: Did -- ever drive a motor vehicle?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

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File Location	Field size	Item and code outline
		99 Non-response
1586-1587	2	<p>SC0491: During the last year of life, how often did -- wear a safety belt when driving or riding in <u>a car?</u></p> <p>01 Always 02 Most of the time 03 Some of the time 04 Rarely 05 Never 06 Didn't ride or drive in last year 07 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1588-1589	2	<p>SC0492: Did -- drive a motor vehicle in the last <u>year of life?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1590-1591	2	<p>SC0493: Did you ever ride with -- while -- drove <u>during the last year of life?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1592-1593	2	<p>SC0494: How often during the last year of life <u>did you ride with -- when -- drove? Was it.</u></p> <p>01 Everyday? 02 3 -6 times a week? 03 1 -2 times a week? 04 1 -3 times a month? 05 Less than once a month? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>

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File Location	Field size	Item and code outline
1594-1595	2	<p><u>SC0495: How often did – typically drive to work or school?</u></p> <p>01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1596-1597	2	<p><u>SC0496: How often did -- typically drive to Shopping, banking or personal business?</u></p> <p>01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1598-1599	2	<p><u>SC0497: How often did -- typically drive to visiting family or friends?</u></p> <p>01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused 95 Don't know. 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1600-1601	2	<p><u>SC0498: How often did – typically drive to other social or recreational activities?</u></p> <p>01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused</p>

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File Location	Field size	Item and code outline
		95 Don't know. 96 Not applicable 98 Blank/out of range
1602-1603	2	<u>SC0499: How often did -- typically drive to volunteer activities?</u> 01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1604-1605	2	<u>SC0500: How often did -- typically drive to a Bar, tavern, or nightclub?</u> 01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1606-1607	2	<u>SC0501: How often did -- typically drive to a restaurant?</u> 01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range
1608-1609	2	<u>SC0502: How often did -- typically drive to church or religious activities?</u> 01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month

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File Location	Field size	Item and code outline
		05 Never 06 Don't Know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range
1610-1611	2	<u>SC0503: How often did -- typically drive to any other places?</u> 01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1612-1613	2	<u>SC0504: How often did -- typically drive to any other places?</u> 01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1614-1615	2	<u>SC0505: In the last year of life, how often did -- drive after dark?</u> 01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1616-1617	2	<u>SC0506: In the last year of life, how often did --</u>

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File Location	Field size	Item and code outline
		<p><u>drive on expressways or interstate highways?</u></p> <p>01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1618-1619	2	<p><u>SC0507: In the last year of life, how often did -- drive on rural two-lane roads?</u></p> <p>01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1620-1621	2	<p><u>SC0508: In the last year of life, how often did -- drive on unfamiliar routes?</u></p> <p>01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused 95 Don't know 96 Not applicable 99 Non-response</p>
1622-1623	2	<p><u>SC0509: In the last year of life, how often did -- drive on trips greater than 50 miles each way?</u></p> <p>01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused 95 Don't know 96 Not applicable</p>

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File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-response
1624-1625	2	<p><u>SC0510: In the last year of life, how often did -- drive during rush hours?</u></p> <p>01 At least 3 times per week 02 1-2 times per week 03 1-3 times per month 04 Less than once per month 05 Never 06 Don't Know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1626-1627	2	<p><u>SC0511: In the last year of life, about how many total miles did -- drive?</u></p> <p>01 Under 5,000 02 Between 5,000 and less than 10,000 03 Between 10,000 and less than 15,000 04 Between 15,000 and less than 20,000 05 20,000 or more 06 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1628-1629	2	<p><u>SC0512: Compared to most other drivers on the road, how fast did -- usually drive in the last year of life? Would you say a lot faster, a little faster, about the same speed, a little slower, or a lot slower?</u></p> <p>01 A lot faster 02 A little faster 03 About the same speed 04 A little slower 05 A lot slower 06 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1630-1631	2	<p><u>SC0513: How often did -- pass a car in a no-passing zone?</u></p> <p>01 Often</p>

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File Location	Field size	Item and code outline
		02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1632-1633	2	<u>SC0514: How often did -- cut in front of another car at full speed so that -- could make a turn or exit the road?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1634-1635	2	<u>SC0515: How often did -- drive ten to nineteen miles an hour over the posted speed limit?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1636-1637	2	<u>SC0516: How often did -- drive twenty miles an hour or more over the posted speed limit?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1638-1639	2	<u>SC0517: How often did -- make a U-turn where a sign said not to?</u>

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File Location	Field size	Item and code outline
		01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable . 98 Blank/out of range 99 Non-response
1640-1641	2	SC0518: How often did -- tail gate another car to get it to go faster or to get it to pull over into a slower lane? <u>SC0518: How often did -- tail gate another car to get it to go faster or to get it to pull over into a slower lane?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1642-1643	2	SC0519: How often did -- drive through an intersection just as the light changed from yellow to red? <u>SC0519: How often did -- drive through an intersection just as the light changed from yellow to red?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1644-1645	2	SC0520: How often did -- drive through a stop sign without coming to a full stop? <u>SC0520: How often did -- drive through a stop sign without coming to a full stop?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
1646-1647	2	<p>SC0521: How often did -- speed through slower traffic by switching quickly back and forth between lanes?</p> <p>01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1648-1649	2	<p>SC0522: Old -- smoke at least 100 cigarettes IN - - ENTIRE LIFE?</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1650-1651	2	<p>SC0523: How long did -- smoke cigarettes fairly regularly?</p> <p>00 Less than 1 year' 01-90 Years 99 Never smoked regularly 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1652-1653	2	<p>SC0524: During the period -- smoked the most, on the average, about how many cigarettes a day did -- usually smoke?</p> <p>01 Less than 5 cigarettes a day 02 5 to 14 a day 03 15 to 24 a day 04 25 to 34 a day 05 35 to 44 a day 06 45 or more a day 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>

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File Location	Field size	Item and code outline
1654-1655	2	<p><u>SC0525: Old -- ever stop smoking and not start again?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p> <p><u>SC0526-0530: When did -- stop smoking?</u></p>
1656-1658	3	<p><u>SC0526:</u></p> <p>001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response</p>
1659-1660	2	<p><u>SC0527:</u></p> <p>01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1661-1662	2	<p>00-93 Year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1663-1664	2	<p><u>SC0528:</u></p> <p>01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1665-1667	3	<p><u>SC0529:</u></p> <p>000-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response</p>
1668-1669	2	<p><u>SC0530:</u></p> <p>03 Days</p>

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File Location	Field size	Item and code outline
		04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1670-1671	2	SC0531: In -- ENTIRE UFE, did -- have at least 12 drinks of any kind of alcoholic beverage? By a drink, I mean a 12 ounce bottle or can of beer or a wine cooler, a one and one-half ounce shot of liquor, or a 5 ounce glass of wine. 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1672-1673	2	SC0532: In -- ENTIRE LIFE, did -- ever take a drink of any kind of alcoholic beverage? 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1674-1675	2	SC0533: During the last year of life, did -- have at least 12 drinks of any kind of alcoholic beverage? 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1676-1677	2	SC0534: In ANY ONE YEAR of -- entire life, did -- have at least 12 drinks of ANY kind of alcoholic beverage? 01 Yes 02 No 94 Refused

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File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1678-1679	2	SC535: During the last year of -life, about how often did -- drink any alcoholic beverages? <u>was it --</u> 01 Every day? 02 3 to 6 times a week? 03 1 or 2 times a week? 04 1 to 3 times a month? 05 Less than once a month? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1680-1681	2	SC0536: ON THE DAYS THAT - DRANK during the last year of life, about how many drinks did -- usually have in a single day? 01 12 or more drinks 02 7 to 11 drinks 03 5 to 6 drinks 04 3 or 4 drinks 05 2 or 3 drinks 06 2 drinks 07 1 or 2 drinks 08 1 drink 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1682-1683	2	SC0537: During the last year of, WHERE did -- usually drink alcoholic beverages? 01 Decedent's home 02 Other people's home(s) 03 Restaurant 04 Bar/tavern/nightclub 05 Stadiums/arenas 06 Picnic areas/beach/playground 07 Parking lots/sidewalks/alleyways 08 Inside a motor vehicle(parked or moving) 09 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
1684-1685	2	<p><u>SC0538: During the last year of life, did -- EVER have 5 or more drinks at one time?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1686-1687	2	<p><u>SC0539: During the last year of life, how often did -- have at least 5 or more drinks at one time?</u></p> <p>01 Every day 02 3 to 6 times a week 03 1 or 2 times a week 04 1 to 3 times a month 05 Less than once a month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1688-1689	2	<p><u>SC0540: Was there ever a period in -life when -drank more than -- did in the last year of -- life?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1690-1692	3	<p><u>SC0541-0542: About how old was -- during the period when -- drank the most?</u></p> <p><u>SC0541:</u> 001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response</p>
1693-1694	2	<p><u>SC0542:</u> 01 Younger than 20 years old 02 20 to 29 years old 03 30 to 39 years old 04 40 to 49 years old 05 50 to 59 years old</p>

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File Location	Field size	Item and code outline
		06 60 to 69 years old 07 70 years or older 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1695-1696	2	SC0543: During this period when -- was (<i>answer in SC0541 or SC0542</i>), and when -- drank the most, about how often did -- drink alcoholic beverages? <u>01 Every day</u> <u>02 3 to 6 times a week</u> <u>03 1 or 2 times a week</u> <u>04 1 to 3 times a month</u> <u>05 Less than once a month</u> 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1697-1698	2	SC0544: During this period when -- drank the most, on the days that -- drank, about how many drinks did -- usually have in a day? <u>01 12 or more drinks</u> <u>02 7 to 11 drinks</u> <u>03 5 to 6 drinks</u> <u>04 3 or 4 drinks</u> <u>05 2 or 3 drinks</u> <u>06 2 drinks</u> <u>07 1 or 2 drinks</u> <u>08 1 drink</u> 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response SC0545-0547: For how many years did --drink about (<i>number in SC0544</i>) drink(s) (<i>frequency in SC0543</i>)? <u>SC0545:</u> <u>00 Under one year</u> 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1699-1700	2	<u>SC0546:</u> <u>00 Under one year</u> 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1701-1702	2	<u>SC0546:</u>

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File Location	Field size	Item and code outline
		00-90 Months 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1703-1704	2	<u>SC0547:</u> 00-90 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1705-1706	2	<u>SC0548: The next few questions refer to -- ENTIRE LIFE. Do you think -- EVER spent a lot of time drinking or hungover?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1707-1708	2	<u>SC0549: Did -- ever try to cut back or feel the need to cut back on -drinking?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1709-1710	2	<u>SC0550: Was -- Was annoyed by criticism of -- drinking?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1711-1712	2	<u>SC0551: Did -- ever seem to feel guilt about -- drinking?</u> 01 Yes 02 No 94 Refused

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File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1713-1714	2	SC0552: Did -- ever take a morning drink or "eye opener?" 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1715-1716	2	<u>SC0553: Did a doctor ever recommend that -- stop or decrease -- alcohol consumption?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0554-0557: Was this because of a drinking problem, or because of a health problem, or something else?</u>
1717-1718	2	<u>SC0554:</u> 01 Drinking problem 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1719-1720	2	<u>SC0555:</u> 02 Health problem 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1721-1722	2	<u>SC0556:</u> 03 Pregnancy 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
1723-1724	2	<p><u>SC0557:</u></p> <p>04 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1725-1726	2	<p>SC0558: In your judgment, was -- an alcoholic or problem drinker ANY time in -- life? By alcoholic or problem drinker, I mean a person who has physical or emotional problems because of drinking, problems with a spouse, family or friends because of drinking, problems at work or school because of drinking, problems with money because of drinking, or problems with the police because of drinking, such as <u>drunk driving</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1727-1728	2	<p>SC0559: Was -- a problem drinker during the <u>last MONTH of life?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1729-1730	2	<p>SC0560: During the last year of life, did -- ever drive a motor vehicle within two hours of having <u>a drink?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1731-1732	2	<p>SC0561: During the last year of life, how often did -- drive or operate a motor vehicle within two <u>hours of having a drink? Was it -</u></p> <p>01 Every day?</p>

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File Location	Field size	Item and code outline
		02 About 2 to 6 times a week? 03 Once a week? 04 About 1 to 3 times a month? 05 About 6 to 11 times a year? 06 About 2 to 5 times a year? 07 Only once? 09 Don't Know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1733-1734	2	<p><u>SC0562: When -- drove within two hours of drinking, WHERE did -- usually drink?</u></p> 01 Decedent's home 02 Other people's home(s) 03 Restaurant 04 Bar/tavern/nightclub 05 Stadiums/arenas 06 Picnic areas/beach/playground 07 Parking lots/sidewalks/alleyways 08 Inside a motor vehicle (parked or moving) 09 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1735-1736	2	<p><u>SC0563: About how long after the last drink did -- typically leave the place where -- was drinking and drive?</u></p> 01 less than 15 minutes 02 15 -29 minutes 03 30-59 minutes 04 At least 1 hour, but less than 2 hours 05 At least 2 hours, but less than 3 hours 06 3 or more hours 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<p><u>SC0564-0569: When -- drove within two hours of drinking, what did -- usually drink?</u></p>

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File Location	Field size	Item and code outline
1737-1738	2	<u>SC0564:</u> 01 Beer, not including malt liquor 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range { 99 Non-response
1739-1740	2	<u>SC0565:</u> 02 Malt liquor 94 Refused 95 Don't know 96 Not applicable. 98 Blank/out of range 99 Non-response
1741-1742	2	<u>SC0566:</u> 03 Wine, not including wine cooler 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1743-1744	2	<u>SC0567:</u> 04 Wine cooler 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1745-1746	2	<u>SC0568:</u> 05 Liquor such as whiskey, rum, gin, or vodka 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1747-1748	2	<u>SC0569:</u> 06 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1749-1750	2	<u>SC0570: During the last year of life, when -- drove within two hours of drinking, how many drinks did -- typically have?</u> 01 12 or more drinks 02 7 to 11 drinks 03 5 to 6 drinks

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File Location	Field size	Item and code outline
		04 3 or 4 drinks 05 2 or 3 drinks 06 2 drinks 07 1 or 2 drinks 08 1 drink 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0571-0575: When -- drove within two hours of drinking, with whom did -- usually drink?</u>
1751-1752	2	<u>SC0571:</u> 01 Drank alone 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1753-1754	2	<u>SC0572:</u> 02 Friends 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1755-1756	2	<u>SC0573:</u> 03 Relatives 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1757-1758	2	<u>SC0574:</u> 04 Work acquaintances 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1759-1760	2	<u>SC0575:</u> 05 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
		SC0576-0584: During the last year of life, when did -- typically drive after drinking? Was it during the day or at night, weekdays or weekends, or when?
1761-1762	2	<u>SC0576:</u> 01 Weekday during the day (Monday -Friday) 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1763-1764	2	<u>SC0577:</u> 02 Weekend during the day (Saturday or Sunday) 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1765-1766	2	<u>SC0578:</u> 03 Everyday during the day 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range, 99 Non-response
1767-1768	2	<u>SC0579:</u> 04 Weekday at night (Monday -Thursday) 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1769-1770	2	<u>SC0580:</u> 05 Weekend at night (Friday, Saturday, Sunday) 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1771-1772	2	<u>SC0581:</u> 06 Every night 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1773-1774	2	<u>SC0582:</u> 07 After a regularly scheduled event

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1775-1776	2	<u>SC0583:</u> 08 No particular pattern 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1777-1778	2	<u>SC0584:</u> 09 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1779-1780	2	<u>SC0585: Do you think -- drinking alcohol was related in any way to -- death?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1781-1782	2	<u>SC0586: Do you think the drinking of alcoholic beverages by someone other than -- was related in any way to -- death?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1783-1785	3	<u>SC0587: What was -- race? If multiple races are reported for the decedent, the second race reported is coded here.</u> 000-999 See locations 269-271 for codes
1786-1788	3	<u>SC0588: What was -- race? If multiple races are reported for the decedent, the third race reported is coded here.</u>

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File Location	Field size	Item and code outline
		000-999 See locations 269-271 for codes
1789-1790	2	<p>SC0591: At any time during the last year of life did -- use pain killers, such as Darvon, Percodan, or codeine with or without Tylenol?</p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1791-1792	2	<p>SC0592: Were the pain killers, such as Darvon, Percodan, or codeine with or without Tylenol, prescribed by a medical doctor?</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1793-1794	2	<p>SC0593: During the last year of life, at any time did -- take the pain killers, such as Darvon, Percodan, or codeine with or without Tylenol more often than the doctor prescribed or in larger doses?</p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1795-1796	2	<p>SC0594: At any time during the last year of life did -- use sedatives, such as barbiturates, sleeping pills, Seconal, or downers?</p> <p>01 Yes 02 No 03 Don't know</p>

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1797-1798	2	<u>SC0595: Were the sedatives, such as barbiturates, sleeping pills, Seconal or downers prescribed by a medical doctor?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1799-1800	2	<u>SC0598: During the last year of life, at any time did -- take the sedatives, such as barbiturates, sleeping pills, Seconal, or downers more often than the doctor prescribed or in larger doses?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1801-1802	2	<u>SC0597: At any time during the last year of life did -- use tranquilizers, such as Librium, Valium, or Xanax?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1803-1804	2	<u>SC0598: Were the tranquilizers, such as Librium, Valium, or Xanax prescribed by a medical doctor?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

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File Location	Field size	Item and code outline
		<p><u>did -- use steroids?</u></p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1815-1816	2	<p><u>SC0603: Were the steroids prescribed by a medical doctor?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1817-1818	2	<p><u>SC0605: During the last year of life, at any time did -- take the steroids more often than the doctor prescribed or in larger doses?</u></p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1819-1820	2	<p><u>SC0606: At any time during the last year of life did -- use methadone?</u></p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1821-1822	2	<p><u>SC0607: Was the methadone prescribed by a medical doctor?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable</p>

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File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-response
1823-1824	2	<p><u>SC0608: During the last year of life, at any time did -- take the methadone more often than the doctor prescribed or in larger doses?</u></p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 100 Non-response</p>
1825-1826	2	<p><u>SC0609: At any time during the last year of life did -- use heroin?</u></p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1827-1828	2	<p><u>SC0610: At any time during the last year of life did -- use stimulants, such as amphetamines Preludin, uppers, or speed?</u></p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1829-1830	2	<p><u>SC0611: At any time during the last year of life did -- use marijuana or hashish?</u></p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>

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File Location	Field size	Item and code outline
1831-1832	2	<p>SC0612: At any time during the last year of life did -- use cocaine, crack cocaine, free base, or <u>coca paste?</u></p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1833-1834	2	<p>SC0613: At any time during the last year of life did -- use hallucinogens, such as LSD, PCP, <u>peyote, or mescaline?</u></p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1835-1836	2	<p>SC0614: How often did -- take the pain killers, such as Darvon, Percodan, or codeine with or without tylenol more often than the doctor prescribed, or In larger doses than prescribed? <u>Would you say frequently or occasionally?</u></p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1837-1838	2	<p>SC0615: How often (altogether) did -- use the pain killers, such as Darvon, Percodan, or codeine with or without tylenol? <u>Would you say frequently or occasionally?</u></p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know</p>

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1839-1840	2	SC0616: How often did -drive or operate a motor vehicle within 2 hours of using the pain killers, such as Darvon, Percodan, or codeine with or without tylenol? Would you say frequently or occasionally? <u>frequently or occasionally?</u> 01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1841-1842	2	SC0617: How often did -take the sedatives, such as barbiturates, sleeping pills, Seconal, or downers more often than the doctor prescribed, or in larger doses than prescribed? Would you say frequently or occasionally? <u>frequently or occasionally?</u> 01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1843-1844	2	SC0618: How often (altogether) did -- use the sedatives, such as barbiturates, sleeping pills, Seconal or downers? Would you say frequently or occasionally? <u>frequently or occasionally?</u> 01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1845-1846	2	SC0619: How often did -- drive or operate a

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File Location	Field size	Item and code outline
		<p>motor vehicle within 2 hours of using sedatives, such as barbiturates, sleeping pills, Seconal, or downers? Would you say frequently or occasionally?</p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1847-1848	2	<p>SC0620: How often did - -take the tranquilizers, such as Librium, Valium, or Xanax more often than the doctor prescribed, or in larger doses than prescribed? Would you say frequently or occasionally?</p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1849-1850	2	<p>SCO621: How often (altogether) did -- use the tranquilizers, such as Librium, Valium, or Xanax? Would you say frequently or occasionally?</p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1851-1852	2	<p>SC0622: How often did – drive or operate a motor vehicle within 2 hours of using tranquilizers, such as Librium, Valium, or Xanax? Would you say frequently or occasionally?</p> <p>01 Frequently 02 Occasionally 03 Other</p>

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File Location	Field size	Item and code outline
		04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1853-1854	2	SC0623: How often did -- take the antidepressants, such as Prozac or Elavil more often than the doctor prescribed, or in larger doses than prescribed? Would you say frequently or occasionally? <u>frequently or occasionally?</u> 01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of rang 99 Non-response
1855-1856	2	SCO624: How often (altogether) did -- use the antidepressants, such as Prozac or Elavil? Would you say frequently or occasionally? <u>Would you say frequently or occasionally?</u> 01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1857-1858	2	SCO625: How often did -- drive or operate a motor vehicle within 2 hours of using antidepressants, such as Prozac or Elavil? Would you say frequently or occasionally? <u>Would you say frequently or occasionally?</u> 01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1859-1860	2	SC0626: How often did -- take the steroids more often than the doctor prescribed, or in larger doses than prescribed? Would you say

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File Location	Field size	Item and code outline
1867-1868	2	<p>SC0630: How often (altogether) did -- use the methadone? Would you say frequently or <u>occasionally</u>?</p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1869-1870	2	<p>SC0631: How often did -drive or operate a motor vehicle within 2 hours of using methadone? Would you say frequently or <u>occasionally</u>?</p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1871-1872	2	<p>SC0632: How often (altogether) did -- use the heroin? Would you say frequently or <u>occasionally</u>?</p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1873-1874	2	<p>SC0633: How often did -- drive or operate a motor vehicle within 2 hours of using heroin? <u>Would you say frequently or occasionally?</u></p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range</p>

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File Location	Field size	Item and code outline
		99 Non-response
1875-1876	2	<p>SC0634: How often (altogether) did -- use the stimulants, such as amphetamines, Preludin, uppers, or speed? Would you say frequently or <u>occasionally</u>?</p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1877-1878	2	<p>SC0635: How often did -- drive or operate a motor vehicle within 2 hours of using stimulants such as amphetamines, Preludin, uppers, or speed? Would you say frequently or <u>occasionally</u>?</p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1879-1880	2	<p>SC0636: How often (altogether) did -- use the marijuana or hashish? Would you say frequently or <u>occasionally</u>?</p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1881-1882	2	<p>SC0637: How often did -- drive or operate a motor vehicle within 2 hours of using marijuana or hashish? Would you say frequently or <u>occasionally</u>?</p> <p>01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused</p>

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File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1883-1884	2	SC0638: How often (altogether) did -- use the cocaine, crack cocaine, free base, or coca paste? Would you say frequently or <u>occasionally</u>? 01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1885-1886	2	SC0639: How often did -- drive or operate a motor vehicle within 2 hours of using cocaine, crack cocaine, free base, or coca paste? Would you say frequently or <u>occasionally</u>? 01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1887-1888	2	SC0640: How often (altogether) did -- use the hallucinogens, such as LSD, PCP, peyote, or mescaline? Would you say frequently or <u>occasionally</u>? 01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1889-1890	2	SC0641: How often did --drive or operate a motor vehicle within 2 hours of using hallucinogens, such as LSD, PCP, peyote, or mescaline? Would you say frequently or <u>occasionally</u>?

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File Location	Field size	Item and code outline
		01 Frequently 02 Occasionally 03 Other 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1891-1892	2	SCO642: At any time during the last year of life, were there any firearms kept in or around (-- home/the home where -- stayed)? Include those kept in a garage, outdoor storage area, truck or <u>car</u>. 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1893-1894	2	SC0643: Was there one or more than one <u>firearm</u>? 01 One 02 More than one 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1895-1896	2	SC0644: What kind of firearm was it? 01 Handgun, including pistol or revolver 02 Shotgun 03 Rifle 04 Other 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1897-1898	2	SC0645: Which of these statements best <u>describes the PLACE the firearm was kept?</u>

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File Location	Field size	Item and code outline
		01 The firearm was kept in a LOCKED PLACE, such as a drawer, cabinet, or closet. 02 The firearm was kept in an UNLOCKED place. 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1899-1900	2	<u>SC0646: Which of these statements best describe the WAY the firearm was kept?</u> 01 Taken apart 02 With a trigger lock or other locking mechanism 03 Assembled without a locking mechanism 04 Some other way 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1901-1902	2	<u>SC0647: Was the firearm kept loaded or unloaded?</u> 01 Loaded 02 Unloaded 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1903-1904	2	<u>SC0648: Besides the ammunition in the firearm, was there any other ammunition kept in or around (-- home/the home where – stayed)?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1905-1906	2	<u>SC0649: Was there any ammunition kept in or around the home?</u> 01 Yes

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File Location	Field size	Item and code outline
		02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1907-1908	2	<u>SC0650: Was this ammunition kept in a locked Place?</u> 01 Yes, all 02 Yes, some 03 No, none 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1909-1910	2	<u>SC0651: Where was this ammunition kept? Was it kept with the firearm, or kept in a separate place away from the firearm?</u> 01 With the firearm 02 In a separate place 03 Don't know' 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0652-0656: What kinds of firearms were they?</u>
1911-1912	2	<u>SC0652:</u> 01 Handgun, including pistol or revolver 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1913-1914	2	<u>SC0653:</u> 02 Shotgun 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1915-1916	2	<u>SC0654:</u> 03 Rifle

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1917-1918	2	<u>SC0655:</u> 04 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1919-1920	2	<u>SC0656:</u> 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1921-1922	2	<u>SC0657: Which of these statements best describe the PLACES the firearms were kept?</u> 01 All the firearms were kept in LOCKED PLACES, such as drawers, cabinets, or Closets. 02 One or more firearms were kept in an UNLOCKED place. 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0658-0662: Which of these statements best describe the WAYS in which the firearms were kept?</u>
1923-1924	2	<u>SC0658:</u> 01 Taken apart 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1925-1926	2	<u>SC0659:</u> 02 With a trigger lock or other locking mechanism 94 Refused 95 Don't know 96 Not applicable

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File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non-response
1927-1928	2	<u>SCO660:</u> 03 Assembled without a locking mechanism 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1929-1930	2	<u>SC0661:</u> 04 Some other way 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1931-1932	2	<u>SC0662:</u> 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1933-1934	2	<u>SC0663: Were the firearms kept loaded or unloaded?</u> 01 One or more were kept loaded 02 All were kept unloaded 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1935-1936	2	<u>SC0664: Besides the ammunition kept in a firearm, was there any other ammunition kept in or around -- home?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1937-1938	2	<u>SC0665: Was any ammunition kept in or around (-- home/the home where -- stayed)?</u>

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File Location	Field size	Item and code outline
		01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1939-1940	2	<u>SC0666: Was this ammunition kept in a locked Place?</u> 01 Yes, all 02 Yes, some 03 No, none 04 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1941-1942	2	<u>SC0667: Where was this ammunition kept? Was it kept with a firearm, or kept in a separate place away from all firearms?</u> 01 With a firearm 02 In a separate place 03 Both 04 Don't know 94 Refused 95 Don't know 96 Not applicable. 98 Blank/out of range 99 Non-response
1943-1944	2	<u>SC0668: At the time of -- death, was -- married, widowed, divorced, separated, or NEVER married?</u> 01 Married 02 Widowed 03 Divorced 04 Separated 05 Never married 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
		<u>SC0669-0670: When did -- become (marital status in SC0668)?</u>
1945-1948	4	<u>SC0669:</u> 1900-1993 Year 9994 Refused 9995 Don't know 9996 Not applicable 9998 Blank/out of range 9999 Non-response
1949-1951	3	<u>SC0670:</u> 001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
1952-1953	2	<u>SC0671: Was -- born in e United States?</u>
		01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1954-1956	3	<u>SC0672: In what country was -- born?</u>
		057 United States 060 American Samoa 006 Guam 067 Johnston Island 069 Northern Mariana Islands 071 Midway Islands 072 Puerto Rico 076 Navassa Island 078 U.S. Virgin Islands 079 Wake Island 081 Baker Island 084 Howland Island 086 Jarvis Island 089 Kingman Reef 095 Palmyra Atoll 096 U.S. Outlying Area 100 Albania 101 Andorra 102 Austria 103 Belgium 104 Bulgaria 105 Czechoslovakia

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File Location	Field size	Item and code outline
		106 Denmark
		107 Faeroe Islands
		108 Finland
		109 France
		110 Germany
		111 Federal Republic of Germany
		112 West Berlin
		113 East Berlin
		114 Germany Demo. Republic
		115 Gilbralter
		116 Greece
		117 Hungary
		118 Iceland
		119 Ireland
		120 Italy
		121 Jan Meyan
		122 Liechtenstein
		123 Luxembourg
		124 Malta
		125 Monaco
		126 Netherlands
		127 Norway
		128 Poland
		129 Portugal
		130 Azores Islands
		131 Madeira Islands
		132 Romania
		133 San Marino
		134 Spain
		135 Svalbard
		136 Sweden
		137 Switzerland
		138 Great Britain
		139 United Kingdom
		140 Scotland
		141 Wales
		142 Northern Ireland
		143 Guernsey
		144 Jersey
		145 Isle of Man
		146 Vatican City
		147 Yugoslavia
		148 Europe
		149 Central Europe
		150 Eastern Europe
		151 Lapland
		152 Northern Europe
		153 Southern Europe
		154 Western Europe
		180 Union of Soviet Socialist Republics
		181 Baltic States
		182 Estonia
		183 Latvia
		184 Lithuania
		185 Armenia

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File Location	Field size	Item and code outline
		186 Azerbaijan
		187 Byelorussia
		188 Georgia
		189 Kazakhstan
		190 Kirgizskaya
		191 Moldova
		192 Russia
		193 Tajikistan
		194 Turkmenistan
		195 Ukraine
		196 Uzbekistan
		200 Afghanistan
		201 Bahrain
		202 Bangladesh
		203 Bhutan
		204 Brunei
		205 Burma
		206 Cambodia
		207 China, People's Republic of
		208 Cyprus
		209 Hong Kong
		210 India
		211 Indonesia
		212 Iran
		213 Iraq
		214 Israel
		215 Japan
		216 Jordan
		217 Korea
		218 Republic of Korea
		219 Demo. People's Republic of Korea
		220 Kuwait
		221 Laos
		222 Lebanon
		223 Macao
		224 Malaysia
		225 Maldives Islands
		226 Mongolian People's Republic
		227 Nepal
		228 Oman
		229 Pakistan
		230 Paracel Islands
		231 Philippines
		232 Qatar
		233 Saudi Arabia
		234 Singapore
		235 Spratley Islands
		236 Sri Lanka
		237 Syria
		238 Republic of China
		239 Thailand
		240 Turkey
		241 United Arab Emirates
		242 Vietnam
		243 People's Demo. Republic of Yemen

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File Location	Field size	Item and code outline
		244 Yemen Arab Republic
		245 Asia
		246 Asia Minor
		247 East Asia
		248 Gaza Strip
		249 Indo China
		250 Iraq-Saudi Arabia Neutral Zone
		251 Mesopotamia
		252 Middle East
		253 Palestine
		254 Persian Gulf States
		255 Southeast Asia
		256 West Bank
		300 Bermuda
		301 Canada
		302 Greenland
		303 St. Pierre and Miquelon
		304 North America
		310 Belize
		311 Costa Rica
		312 El Salvador
		313 Guatemala
		314 Honduras
		315 Mexico
		316 Nicaragua
		317 Panama
		318 Central America
		330 Anguilla
		331 Antigua
		332 Aruba
		333 Bahamas
		334 Barbados
		335 British Virgin Islands
		336 Cayman Islands
		337 Cuba
		338 Dominica
		339 Dominican Republic
		340 Grenada
		341 Guadeloupe
		342 Haiti
		343 Jamaica
		344 Martinique
		345 Monts
		353 Caribbean
		354 Antilles
		355 British West Indies
		356 Latin America
		357 Leeward Islands
		359 Windward Islands
		375 Argentina
		376 Bolivia
		377 Brazil
		378 Chile
		379 Colombia
		380 Ecuador

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File Location	Field size	Item and code outline
		381 Falkland Islands
		382 French Guiana
		383 Guyana
		384 Paraguay
		385 Peru
		386 Surinam
		387 Uruguay
		388 Venezuela
		389 South America
		400 Algeria
		401 Angola
		402 Bassas Da India
		403 Benin
		404 Botswana
		405 British Indian Ocean Territory
		406 Burkina
		407 Burundi
		408 Cameroon
		409 Cape Verde
		410 Central African Republic
		411 Chad
		412 Comoros
		413 People's Republic of Congo
		414 Djibouti
		415 Egypt
		416 Equatorial Guinea
		417 Ethiopia
		418 Europa Island
		419 Gabon
		420 Gambia
		421 Ghana
		422 Glorioso Islands
		423 Guinea
		424 Guinea-Bissau
		425 Ivory Coast
		427 Kenya
		428 Lesotho
		429 Liberia
		430 Lybia
		431 Madagascar
		432 Malawi
		433 Mali
		434 Mauritania
		435 Mayotte
		436 Morocco
		437 Mozambique
		438 Namibia
		439 Niger
		440 Nigeria
		441 Reunion
		442 Rwanda
		443 San Tome and Principe
		444 Senegal
		445 Mauritius
		446 Seychelles

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File Location	Field size	Item and code outline
		447 Sierra Leone
		448 Somalia
		449 South Africa
		450 St. Helena
		451 Sudan
		452 Swaziland
		453 Tanzania
		454 Togo
		455 Tromelin Island
		456 Tunisia
		457 Uganda
		458 Western Sahara
		459 Zaire
		460 Zambia
		461 Zimbabwe
		462 Africa
		463 Central Africa
		464 East Africa
		465 Equatorial Africa
		466 French Equatorial Africa
		467 French West Africa
		468 North Africa
		469 Western Africa
		470 Southern Africa
		500 Ashmore/ Cartier Islands
		501 Australia
		502 Christmas Island, Indian Ocean
		503 Clipperton Island
		504 Cocos Islands
		505 Cook Islands
		506 Coral Sea Islands
		507 Fiji
		508 Oceania
		509 Kiribati
		510 Marshall Islands
		511 Micronesia
		512 Nauru
		513 New Caledonia
		514 New Zealand
		515 Niue
		516 Norfolk Island
		517 Palau
		518 Papua New Guinea
		519 Pitcairn Islands
		520 Solomons Islands
		521 Tokelau
		522 Tonga
		523 Tuvalu
		524 Vanuatu
		525 Wallis and Futuna Islands
		526 Western Samoa
		527 Oceania
		528 Polynesia
		529 Melanesia
		550 Antarctica

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		551 Bouvet Island 552 French Antarctic Territory 553 Head and McDonald Islands 554 At sea 555 Abroad 994 Refused 995 Don't know 996 Not applicable 997 Other Foreign Country 998 Blank/out of range 999 Non-response
1957-1959	3	<p><u>SC0673: What was -- race?</u> If multiple races are listed for the decedent, the first race listed is coded here. The second and third races listed are coded in SC0587 and SC0588.</p> <p>000-999 See location 269-271 for codes</p>
1960-1962	3	<p><u>SC0674: Which of those groups; that is (<i>entries in SC0587, SC0588, SC0673</i>) would you say BEST represents -- race?</u></p> <p>000-999 See location 269-271 for codes</p>
1963-1964	2	<p><u>SC0675: Which of these groups BEST represents -- race? Was -- race --</u></p> <p>01 White? 02 Black? 03 Indian (American)? 04 Eskimo? 05 Aleut? 06 Chinese? 07 Filipino? 08 Hawaiian? 09 Korean? 10 Vietnamese? 11 Japanese? 12 Asian Indian? 13 Samoan? 14 Guamanian? 15 Other Asian/Pacific Islander? 16 Other race? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1965-1966	2	<p><u>SC0676: Was -- of Spanish or Hispanic origin or descent?</u></p> <p>01 Yes</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range
		<u>SC0677-0683: Which of these groups was -- national origin or ancestry? (Where did -- ancestors come from?) Was it -</u>
1967-1968	2	<u>SC0677:</u> 01 Puerto Rican? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1969-1970	2	<u>SC0678:</u> 02 Cuban? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1971-1972	2	<u>SC0679:</u> 03 Mexican/Mexicano? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1973-1974	2	<u>SC0680:</u> 04 Mexican American? 94 Refused' 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0677-0683: Which of these groups was -- national origin or ancestry? (Where did -- ancestors come from?) Was it - -- continued</u>
1975-1976	2	<u>SC0681:</u> 05 Chicano? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1977-1978	2	<u>SC0682:</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		06 Other Latin American? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1979-1980	2	<u>SC0683:</u> 07 Other Spanish? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0684-0686: What was the highest grade or year of regular school -- ever attended?</u>
1981-1982	2	<u>SC0684:</u> 00 Never attended or only kindergarten 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1983-1984	2	<u>SC0685:</u> 01-12 Elementary/secondary 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1985-1986	2	<u>SC0686:</u> 01-06 College 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
1987-1988	2	<u>SC0687: Did -- finish the (number in SC0685 or SC0686) grade / year?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
1989-1990	2	<p><u>SC0688: At the time of death, was -- either going to school or on vacation from school?</u></p> <p>01 Yes, going to school 02 Yes, on vacation 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p> <p><u>SC0689-0693: When did -- stop going to school?</u></p>
1991-1993	3	<p><u>SC0689:</u></p> <p>001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response</p>
1994-1995	2	<p><u>SC0690:</u></p> <p>01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1996-1997	2	<p>00-93 Year 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
1998-1999	2	<p><u>SC0691:</u></p> <p>01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p> <p><u>SC0689-0693: When did -- stop going to school?</u> -- continued</p>
2000-2002	3	<p><u>SC0692:</u></p> <p>001-990 Number 994 Refused 995 Don't know 996 Not applicable</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		998 Blank/out of range 999 Non-response
2003-2004	2	<u>SC0693:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2005-2006	2	<u>SC0694: Did – EVER work at a job or business not counting work around the house? Include unpaid work in a family farm or business.</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0695: Of all the jobs or businesses -- ever had, what KIND of work did -- do the longest? (For example, electrical engineer, stock clerk, typist, farmer, etc.) Do not include homemaking.</u>
2007-2086	80	An 80-character field containing the verbatim written entry for kind of work.
2087-2089	3	<u>SC0695:</u> 1990 modified Census occupational codes. Numbers in parentheses following the occupation categories are the 1980 Standard Occupational Classification code equivalents. The abbreviation "pt" means "part" and "n.e.c." means "not elsewhere classified." <u>MANAGERIAL AND PROFESSIONAL SPECIALTY OCCUPATIONS</u> <u>Executive, Administrative, and Managerial Occupations</u> 003 Legislators(111) 004 Chief executives and general administrators, public administration(112) 005 Administrators and officials, public administration (1132-1139) 006 Administrators, protective services(1131) 007 Financial managers (122)

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		008 Personnel and labor relations managers (123)
		009 Purchasing managers (124)
		013 Managers, marketing, advertising, and public relations (125)
		014 Administrators, education and related fields (128)
		015 Managers, medicine and health (131)
		016 Postmasters and mail superintendents (1344)
		017 Managers, food serving and lodging establishments (1351)
		018 Managers, properties and real estate(1353)
		019 Funeral directors (pt 1359)
		021 Managers, service organizations, n.e.c. (127, 1352,1354, pt 1359)
		022 Managers and administrators, n.e.c. (121,126, 132-1343, 136-139)
		<u>Management Related Occupations</u>
		023 Accountants and auditors (1412)
		024 Underwriters(1414)
		025 Other financial officers(1415, 1419)
		026 Management analysts (142)
		027 Personnel, training, and labor relations specialists (1 43)
		028 Purchasing agents and buyers, farm products (11 43)
		029 Buyers, wholesale and retail trade except farm products (1 442)
		033 Purchasing agents and buyers, n.e.c. (1449)
		034 Business and promotion agents (145)
		035 Construction inspectors (1472)
		036 Inspectors and compliance officers, except construction(1473)
		037 Management related occupations, n.e.c. (149)
		<u>Professional Specialty Occupations</u>
		043 Architects (161)
		044 Aerospace (1622)
		<u>MANAGERIAL AND PROFESSIONAL SPECIALTY OCCUPATIONS -- continued</u>
		<u>Engineers</u>
		045 Metallurgical and materials (1623)
		046 Mining (1624)
		047 Petroleum (1625)
		048 Chemical (1626)
		049 Nuclear (1627)
		053 Civil (1628)
		054 Agricultural (1 632)
		055 Electrical and electronic (1633,1636)
		056 Industrial (1634)
		057 Mechanical (1635)
		058 Marine and naval architects (1637)

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File Location	Field size	Item and code outline
		059 Engineers, n.e.c. (1639)
		063 Surveyors and mapping scientists (164)
		<u>Mathematical and Computer Scientists</u>
		064 Computer systems analysts and scientists (171)
		065 Operations and systems researchers and analysts (172)
		066 Actuaries(1732)
		067 Statisticians(1733)
		068 Mathematical scientists, n.e.c. (1739)
		<u>Natural Scientists</u>
		069 Physicists and astronomers (1842,1843)
		073 Chemists, except biochemists (1845)
		074 Atmospheric and space scientists (1846)
		075 Geologists and geodesists (1847)
		076 Physical scientists, n.e.c. (1849)
		077 Agricultural and food scientists(1853)
		078 Biological and life scientists (1854)
		079 Forestry and conservation scientists (1852)
		083 Medical scientists(1855)
		<u>Health Diagnosing Occupations</u>
		084 Physicians(261)
		085 Dentists(262)
		086 Veterinarians(27)
		087 Optometrists(281)
		088 Podiatrists(283)
		089 Health diagnosing practitioners ,n.e.c. (289)
		<u>Health Assessment and Treating Occupations</u>
		095 Registered nurses (29)
		096 Pharmacists (301)
		097 Dietitians (302)
		<u>Therapists</u>
		098 Respiratory therapists (3031)
		099 Occupational therapists (3032)
		103 Physical therapists (3033)
		104 Speech therapists (3034)
		105 Therapists, n.e.c. (3039)
		106 Physicians' assistants (304)
		<u>Teachers, Postsecondary</u>
		113 Earth, environmental, and marine science teachers (2212)
		114 Biological science teachers (2213)
		115 Chemistry teachers (2214)
		116 Physics teachers (2215)
		117 Natural science teachers, n.e.c. (2216)
		118 Psychology teachers (2217)
		119 Economics teachers (2218)

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File Location	Field size	Item and code outline
		123 History teachers (2222)
		124 Political science teachers (2223)
		125 Sociology teachers (2224)
		126 Social science teachers, n.e.c. (2225)
		127 Engineering teachers (2226)
		128 Mathematical science teachers (2227)
		129 Computer science teachers (2228)
		133 Medical science teachers (2231)
		134 Health specialties teachers (2232)
		135 Business, commerce, and marketing teachers (2233)
		136 Agriculture and forestry teachers (2234)
		137 Art, drama, and music teachers (2235)
		138 Physical education teachers (2236)
		139 Education teachers (2237)
		143 English teachers (2238)
		144 Foreign language teachers (2242)
		145 Law teachers (2243)
		146 Social work teachers (2244)
		147 Theology teachers (2245)
		148 Trade and industrial teachers (2246)
		149 Home economics teachers (2247)
		153 Teachers, Postsecondary, n.e.c. (2249)
		154 Postsecondary teachers, subject not Specified
		<u>Teachers, Except Postsecondary</u>
		155 Teachers, prekindergarten and kindergarten (231)
		156 Teachers, elementary school (232)
		157 Teachers, secondary school (233)
		158 Teachers, special education (235)
		159 Teachers, n.e.c. (236,239)
		163 Counselors, educational and vocational (24)
		164 Librarians (251)
		165 Archivists and curators (252)
		<u>Social Scientists and Urban Planners</u>
		166 Economists (1912)
		167 Psychologists (1915)
		168 Sociologists (1916)
		169 Social scientists, n.e.c. (1913,1914,1919)
		173 Urban planners (192)
		<u>Social, Recreation, and Religious Workers</u>
		174 Social workers (2032)
		175 Recreation workers (2033)
		176 Clergy (2042)
		177 Religious workers, n.e.c. (2049)
		<u>Lawyers and Judges</u>
		178 Lawyers (211)
		179 Judges (212)
		<u>Writers, Artists, Entertainers, and Athletes</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		183 Authors (321)
		184 Technical writers (398)
		185 Designers (322)
		186 Musicians and composers (323)
		187 Actors and directors (324)
		188 Painters, sculptors, craft-artists and artist printmakers (325)
		189 Photographers (326)
		193 Dancers (327)
		194 Artists, performers, and related workers, n.e.c. (328, 329)
		195 Editors and reporters (331)
		197 Public relations specialists (332)
		198 Announcers (333)
		199 Athletes (34)
		<u>TECHNICAL SALES AND ADMINISTRATIVE SUPPORT OCCUPATIONS</u>
		<u>Health Technologists and Technicians</u>
		203 Clinical laboratory technologists and technicians (362)
		204 Dental hygienists (363)
		205 Health record technologists and technicians (364)
		206 Radiologic technicians (365)
		207 Licensed practical nurses (366)
		208 Health technologists and technicians, n.e.c. (369)
		<u>TECHNICAL SALES AND ADMINISTRATIVE SUPPORT OCCUPATIONS -- continued</u>
		<u>Engineering and Related Technologists and Technicians</u>
		213 Electrical and electronic technicians (3711)
		214 Industrial engineering technicians (3712)
		215 Mechanical engineering technicians (3713)
		216 Engineering technicians, n.e.c. (3719)
		217 Drafting occupations (372)
		218 Surveying and mapping technicians (373)
		<u>Science Technicians</u>
		223 Biological technicians (382)
		224 Chemical technicians (3831)
		225 Science technicians, n.e.c. (3832, 3833, 384, 389)
		<u>Technicians: Except Health, Engineering, and Science</u>
		226 Airplane pilots and navigators (825)
		227 Air traffic controllers (392)
		228 Broadcast equipment operators (393)
		229 Computer programmers (3971, 3972)
		233 Tool programmers, numerical control (3974)

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File Location	Field size	Item and code outline
		234 Legal assistants (396)
		235 Technicians, n.e.c. (399)
		<u>Sales Occupations</u>
		243 Supervisors and proprietors, sales occupations (40)
		<u>Sales Representatives, Finance and Business Services</u>
		253 Insurance sales occupations (4122)
		254 Real estate sales occupations (4123)
		255 Securities and financial services sales occupations (4124)
		256 Advertising and related sales occupations (4153)
		257 Sales occupations, other business services (4152)
		<u>Sales Representatives, Commodities Except Retail</u>
		258 Sales engineers (421)
		259 Sales representatives, mining, manufacturing, and wholesale (423, 424)
		 <u>TECHNICAL SALES AND ADMINISTRATIVE SUPPORT OCCUPATIONS -- continued</u>
		<u>Sales Workers Retail and Personal Services</u>
		263 Sales workers, motor vehicles and boats (4342, 4344)
		264 Sales workers, apparel (4346)
		265 Sales workers, shoes (4351)
		266 Sales workers, furniture and home furnishings (4348)
		267 Sales workers; radio, TV, hi-fi, and appliances (4343, 4352)
		268 Sales workers, hardware and building supplies (4353)
		269 Sales workers, parts (4367)
		274 Sales workers, other commodities (4345, 43479, 43549, 4356, 4359, 4362, 4369)
		275 Sales counter clerks (4363)
		276 Cashiers (4364)
		277 Street and door-to-door sales workers (4366)
		278 News vendors (4365)
		<u>Sales Related Occupations</u>
		283 Demonstrators, promoters and models, sales (445)
		284 Auctioneers (447)
		285 Sales support occupations, n.e.c. (444, 446, 449)

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File Location	Field size	Item and code outline
		<u>Administrative Support Occupations Including Clerical Supervisors, Administrative Support Occupations</u>
	303	Supervisors, general office (4511, 4513, 4514, 4516, 4519, 4529)
	304	Supervisors, computer equipment operators (4512)
	305	Supervisor, financial records processing (4521)
	306	Chief communications operators (4523)
	307	Supervisors, distribution, scheduling, and adjusting clerks (4522, 4524-4528)
		<u>Computer Equipment Operators</u>
	308	Computer operators (4612)
	309	Peripheral equipment operators (4613)
		<u>Secretaries, Stenographers, and Typists</u>
	313	Secretaries (4622)
	314	Stenographers (4623)
	315	Typists(4624)
		<u>TECHNICAL SALES AND ADMINISTRATIVE SUPPORT OCCUPATIONS -- continued</u>
		<u>Information Clerks</u>
	316	Interviewers (4642)
	317	Hotel clerks (4643)
	318	Transportation ticket and reservation agents (4644)
	319	Receptionists (46-45)
	323	Information clerks, n.e.c. (4649)
		<u>Records Processing Occupations, Except Financial</u>
	325	Classified-ad clerks (4662)
	326	Correspondence clerks (4663)
	327	Order clerks (4664)
	328	Personnel clerks except payroll and timekeeping (4692)
	329	Library clerks (4694)
	335	File clerks (4696)
	336	Records clerks (4699)
		<u>Financial Records Processing Occupations</u>
	337	Bookkeepers, accounting, and auditing clerk, (4712)
	338	Payroll and bookkeeping clerks (4713)
	339	Billing clerks (4715)
	343	Cost and rate clerks (4716)
	344	Billing, posting, and calculating machine operators (4718)
		<u>Duplicating, Mail and Other Office Machine Operators</u>
	345	Duplicating machine operators (4722)

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File Location	Field size	Item and code outline
		346 Mail preparing and paper handling machine operators (4723)
		347 Office machine operators, n.e.c. (4729)
		<u>Communications Equipment Operators</u>
		348 Telephone operators (4732)
		353 Communications equipment operators, n.e.c. (4733, 4739)
		<u>Mail and Message Distributing Occupation</u>
		354 Postal clerks, exc. mail carriers (4742)
		355 Mail carriers, postal service (4743)
		356 Mail clerks, exc. postal service (4744)
		357 Messengers (4745)
		 <u>TECHNICAL SALES AND ADMINISTRATIVE SUPPORT OCCUPATIONS -- continued</u>
		<u>Material Recording, Scheduling, and Distributing Clerks</u>
		359 Dispatchers (4751)
		363 Production coordinators (4752)
		364 Traffic, shipping, and receiving clerks (4753)
		365 Stock and inventory clerks (4754)
		366 Meter readers (4755)
		368 Weighers, measurers, checkers and samplers (4756, 4757)
		373 Expeditors (4758)
		374 Material recording, scheduling, and distributing clerks, n.e.c. (4759)
		<u>Adjusters and Investigators</u>
		375 Insurance adjusters, examiners, Investigators (4782)
		376 Investigators and adjusters, except insurance (4783)
		377 Eligibility clerks, social welfare (4784)
		378 Bill and account collectors (4786)
		<u>Miscellaneous Administrative Support Occupations</u>
		379 General office clerks (463)
		383 Bank tellers (4791)
		384 Proofreaders (4792)
		385 Data-entry keyers (4793)
		386 Statistical clerks(4794)
		387 Teachers' aides (4795)
		389 Administrative support occupations, n.e.c. (4787,4799)
		 <u>SERVICE OCCUPATIONS</u>
		<u>Private Household Occupations</u>

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File Location	Field size	Item and code outline
		403 Launderers and ironers (503)
		404 Cooks, private household (504)
		405 Housekeepers and butlers (505)
		406 Child care workers, private household (506)
		407 Private household cleaners and servants (502, 5079, 509)
		<u>Supervisors, Protective Service Occupations</u>
		413 Supervisors, fire fighting and fire prevention occupations (5111)
		414 Supervisors, police and detectives (5112)
		415 Supervisors, guards (5113)
		<u>SERVICE OCCUPATIONS -- continued</u>
		<u>Firefighting and Fire Prevention Occupations</u>
		416 Fire inspection and fire prevention occupations (5122)
		417 Fire fighting occupations (5123)
		<u>Police and Detectives</u>
		418 Police and detectives, public service (5132) .
		423 Sheriffs, bailiffs, and other law enforcement officers (5134)
		424 Correctional institution officers (5133)
		<u>Guards</u>
		425 Crossing guards (5142)
		426 Guards and police, exc. Public service (5144)
		427 Protective service occupations, n.e.c. (5149)
		<u>Food Preparation and Service Occupations</u>
		433 Supervisors, food preparation and service occupations (5211)
		434 Bartenders (5212)
		435 Waiters and waitresses (5213)
		436 Cooks (5214, 5215)
		438 Food counter, fountain and related occupations (5216)
		439 Kitchen workers, food preparation (5217)
		443 Waiters'/waitresses' assistants (5218)
		444 Miscellaneous food preparation occupations (5219)
		<u>Health Service Occupations</u>
		445 Dental assistants (5232)
		446 Health aides, except nursing (5233)
		447 Nursing aides, orderlies, and attendants
		<u>Cleaning and Building Service Occupations except Household</u>
		448 Supervisors, cleaning and building service (5241)
		449 Maids and housemen (5242, 5249)
		453 Janitors and cleaners (5244)

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File Location	Field size	Item and code outline
		454 Elevator operators (5245)
		455 Pest control occupations (5246)
		<u>Personal Service Occupations</u>
		456 Supervisors, personal service occupations (5251)
		457 Barbers (5252)
		458 Hairdressers and cosmetologists (5253)
		<u>SERVICE OCCUPATIONS -- continued</u>
		<u>Personal Service Occupations -- continued</u>
		459 Attendants, amusement and recreation facilities (5254)
		461 Guides (5255)
		462 Ushers (5256)
		463 Public transportation attendants (5257)
		464 Baggage porters and bellhops (5262)
		465 Welfare service aides (5263)
		466 Family child care providers (pt 5264)
		467 Early childhood teacher's assistants (pt 5264)
		468 Child care workers, n.e.c. (pt 5264)
		469 Personal service occupations, n.e.c. (5258, 5269)
		<u>FARMING, FORESTRY, AND FISHING OCCUPATIONS</u>
		<u>Farm Operators and Managers</u>
		473 Farmers, except horticultural (5512-5514)
		474 Horticultural specialty farmers (5515)
		475 managers, farms, except horticultural (5522-5524)
		476 Managers, horticulture farms (5525)
		<u>Farm Occupations, Except Managerial</u>
		477 Supervisors, farm workers (5611)
		479 Farm workers (5612-5617)
		483 Marine life cultivation workers (5618)
		484 Nursery workers (5619)
		<u>Related Agricultural Occupations</u>
		485 Supervisors, related agricultural occupations (5621)
		486 Grounds keepers and gardeners, except farm (5622)
		487 Animal caretakers, except farm (5624)
		488 Graders and sorters, agricultural products (5625)
		489 Inspectors, agricultural products (5627)
		<u>Forestry and Logging Occupations</u>
		494 Supervisors, forestry, and logging workers (571)
		495 Forestry workers, except logging (572)
		496 Timber cutting and logging occupations (573)

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File Location	Field size	Item and code outline
		<u>Fishers, Hunters, and Trappers</u>
	497	Captains and other officers, fishing vessels (pt 8241)
	498	Fishers (583)
	499	Hunters and trappers (584)
		<u>PRECISION PRODUCTION, CRAFT, AND REPAIR OCCUPATIONS</u>
		<u>Mechanics and Repairers</u>
	503	Supervisors, mechanics and repairers (60)
	504	
		<u>Vehicle and Mobile Equipment Mechanics and Repairers</u>
	505	Automobile mechanics (pt 6111)
	506	Automobile mechanic apprentices (pt 6111)
	507	Bus, truck, and stationary engine mechanics (6112)
	508	Aircraft engine mechanics (6113)
	509	Small engine repairers (6114)
	514	Automobile body and related repairers (6115)
	515	Aircraft mechanics, exc. engine (6116)
	516	Heavy equipment mechanics (6117)
	517	Farm equipment mechanics (6118)
	518	Industrial machinery repairers (613)
	519	Machinery maintenance occupations (614)
		<u>Electrical and Electronic Equipment Repairers</u>
	523	Electronic repairers, communications and Industrial equipment (6151, 6153, 6155)
	525	Data processing equipment repairers (6154)
	526	Household appliance and power tool repairers (6156)
	527	Telephone line installers and repairers (6157)
	529	Telephone Installers and repairers (6158)
	533	Miscellaneous electrical and electronic equipment repairers (6152, 6159)
	534	Heating, air conditioning, and refrigeration mechanics (616)
		<u>Miscellaneous Mechanics and Repairers</u>
	535	Camera, watch, and musical instrument repairers (6171, 6172)
	536	Locksmiths and sate repairers (6173)
	538	Office machine repairers (6174)
	539	Mechanical controls and valve repairers (6175)
	543	Elevator installers and repairers (6176)
	544	Millwrights (6178)
	547	Specified mechanics and repairers, n.e.c. . (6177, 6179)
	549	Not specified mechanics and repairers
		<u>PRECISION PRODUCTION, CRAFT, AND REPAIR</u>

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File Location	Field size	Item and code outline
		<u>OCCUPATIONS -- continued</u>
		<u>Construction Trades</u>
		<u>Supervisors, Construction Occupations</u>
553		Supervisors, brick masons, stonemasons, and tile setters (6312)
554		Supervisors, carpenters and related workers (6313)
555		Supervisors, electricians and power transmission installers (6314)
556		Supervisors, painters, paper hangers, and plasterers (6315)
557		Supervisors, plumbers, pipefitters, and steam fitters (6316)
558		Supervisors, construction n.e.c. (6311, 6318)
559		
		<u>Construction Trades, Except Supervisors</u>
563		Brick masons and stonemasons (pt 6412 pt 6413)
564		Brick masons and stonemason apprentices (pt 6412, pt 6413)
565		Tile setters, hard and soft (pt 64149 pt 6462)
566		Carpet installers (pt 6422)
567		Carpenters (pt 6422)
569		Carpenter apprentices (pt 6422)
573		Drywall installers (6424)
575		Electricians (pt6432)
576		Electrician apprentices (pt 6432)
577		Electrical power installers and repairers (6433)
579		Painters, construction and maintenance (6442)
583		Paperhangers (6443)
584		Plasterers (6444)
585		Plumbers, pipefitters, and steam fitters (645)
587		Plumber, pipefitter, and steam fitter apprentices (pt 645)
588		Concrete and terrazzo finishers (6463)
589		Glaziers (6464)
593		Insulation workers (6465)
594		Paving, surfacing, and tamping equipment operators (6466)
595		Roofers (6468)
596		Sheetmetal duct installers (6472)
597		Structural metal workers (6473)
598		Drillers, earth (6474)
599		Construction trades, n.e.c. (6467, 6475, 6476, 6479)
		<u>PRECISION PRODUCTION, CRAFT, AND REPAIR OCCUPATIONS -- continued</u>
		<u>Extractive Occupations</u>
613		Supervisors, extractive occupations (632)
614		Drillers, oil well (652)

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File Location	Field size	Item and code outline
		615 Explosives workers (653)
		616 Mining machine operators (654)
		617 Mining occupations, n.e.c. (656)
		<u>Precision Production Occupations</u>
		628 Supervisors, production occupations (67, 71)
		<u>Precision Metal Working Occupations</u>
		634 Tool and die makers (pt 681 1)
		635 Tool and die maker apprentices (pt 6811)
		636 Precision assemblers, metal (6812)
		637 Machinists (pt 6813)
		639 Machinist apprentices (pt 6813)
		643 Boilermakers (6814)
		644 Precision grinders, filers, and tool sharpeners (6816)
		645 Pattern makers and model makers, metal (6817)
		646 Lay-out workers (6821)
		647 Precious, stones and metals workers (Jewelers) (6822, 6866)
		649 Engravers, metal (6823)
		653 Sheet metal workers (pt 6824)
		654 Sheet metal worker apprentices (pt 6824)
		655 Miscellaneous precision metal workers (6832)
		<u>Precision Woodworking Occupations</u>
		656 Pattern makers and model makers, wood (6831)
		657 Cabinet makers and bench carpenters (6832)
		658 Furniture and wood finishers (6835)
		659 Miscellaneous precision wood workers (6839)
		<u>Precision Textile, Apparel, and Furnishings Machine Workers</u>
		666 Dressmakers (pt 6852, pt 7752)
		667 Tailors (pt 6852)
		668 Upholsterers (6853)
		669 Shoe repairers (6854)
		674 Miscellaneous precision apparel and fabric Workers (6856, 6859, pt 7752)
		<u>PRECISION PRODUCTION, CRAFT, AND REPAIR OCCUPATIONS -- continued</u>
		<u>Precision Workers, Assorted Materials</u>
		675 Hand molders and shapers, exc. jewelers (6861)
		676 Pattern makers, lay-out workers, and cutters (6862)
		677 Optical goods workers (6864, pt 7477, pt 7677)
		678 Dental laboratory and medical technicians (6865)
		679 Bookbinders (6844)

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File Location	Field size	Item and code outline
		683 Electrical and electronic equipment assemblers (6867)
		684 Miscellaneous precision work n.e.c. (6869)
		<u>Precision Food Production Occupations</u>
		686 Butchers and meat cutters (6871)
		687 Bakers (6872)
		688 Food batch makers (6873, 6879)
		<u>Precision Inspectors, Testers, and Related Workers</u>
		689 Inspectors, testers, and grades (6881, 828)
		693 Adjusters and calibrators (6882)
		<u>Plant and System Operators</u>
		694 Water and sewage treatment plant operators (691)
		695 Power plant operators (pt 693)
		696 Stationary engineers (pt 693, 7668)
		699 Miscellaneous plant and system operators (692, 694, 695, 696)
		<u>OPERATORS, FABRICATORS, AND LABORERS</u>
		<u>Metalworking and Plastic Working Machine Operators</u>
		703 Lathe and turning machine set-up operators (7312)
		704 Lathe and turning machine operators (7512)
		705 Milling and planning machine operators (7313, 7513)
		706 Punching and stamping press machine operators (7314, 7317, 7514, 7517)
		707 Rolling machine operators (7316, 7516)
		708 Drilling and boring machine operators (7318, 7518)
		709 Grinding, abrading, buffing, and polishing machine operators (7322, 7324, 7522)
		713 Forging machine operators (7319,7519)
		<u>OPERATORS, FABRICATORS, AND LABORERS</u>
		<u>-- continued</u>
		<u>Metalworking and Plastic Working Machine Operators- continued</u>
		714 Numerical control machine operators (7326)
		715 Miscellaneous metal, plastic, stone, and glass working machine operators (7329, 7529)
		717 Fabricating machine operators, n.e.c. (7339, 7539)
		<u>Metal and Plastic Processing Machine Operators</u>
		719 Molding and casting machine operators

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File Location	Field size	Item and code outline
		(7315, 7342, 7515, 7542)
	723	Metal plating machine operators (7343, 7543)
	724	Heat treating equipment operators (7344, 7544)
	725	Miscellaneous metal and plastic processing machine operators (7349, 7549)
		<u>Woodworking Machine Operators</u>
	726	Wood lathe, routing, and planing machine operators (7431, 7432, 7631, 7632)
	727	Sawing machine operators (7433, 7633)
	728	Shaping and joining machine operators (7435, 7635)
	729	Nailing and tacking machine operators (7636)
	733	Miscellaneous woodworking machine operators (7434, 7439, 7634, 7639)
		<u>Printing Machine Operators</u>
	734	Printing press operators (7443, 7643)
	735	Photoengravers and lithographers (6842, 7444, 7644)
	736	Typesetters and compositors (6841, 7642)
	737	Miscellaneous printing machine operators (6849, 7449, 7649)
		<u>Textile, Apparel, and Furnishings Machine Operators</u>
	738	Winding and twisting machine operators (7451, 7651)
	739	Knitting, looping, taping, and weaving machine operators (7452, 7652)
	743	Textile cutting machine operators (7654)
	744	Textile sewing machine operators (7655)
	745	Shoe machine operators (7656)
	747	Pressing machine operators (7657)
		<u>OPERATORS, FABRICATORS, AND LABORERS</u>
		<u>-- continued</u>
		<u>Textile, Apparel, and Furnishings Machine Operators -- continued</u>
	748	Laundry and dry cleaning machine operators (6855, 7658)
	749	Miscellaneous textile machine operators (7459, 7659)
		<u>Machine Operators, Assorted Materials</u>
	753	Cementing and gluing machine operators (7661)
	754	Packaging and filling machine operators (7463, 7663)
	755	Extruding and forming machine operators (7463, 7663)
	756	Mixing and blending machine operators

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File Location	Field size	Item and code outline
		(7664)
	757	Separating, filtering, and clarifying machine operators (7476, 7666, 7676)
	758	Compressing and compacting machine operators (7467, 7667)
	759	Painting and paint spraying machine operators (7669)
	763	Roasting and baking machine operators, food (7472, 7672)
	764	Washing, cleaning, and pickling machine operators (7673)
	765	Folding machine operators (7474, 7674)
	766	Furnace, kiln, and oven operators, exc. food (7675)
	768	Crushing and grinding machine operators (pt7477, pt7677)
	769	Slicing and cutting machine operators (7478, 7678)
	773	Motion picture projectionists (pt7479)
	774	Photographic process machine operators (6863, 6868, 7671)
	777	Miscellaneous machine operators, n.e.c.(pt 7479, 7665, 7679)
	779	Machine operators, not specified
		<u>Fabricators, Assemblers, and Hand Working Occupations</u>
	783	Welders and cutters (7332, 7532, 7714)
	784	Solderers and brazers (7333, 7533, 7717)
	785	Assemblers (772, 774)
	786	Hand cutting and trimming occupations (7753)
	787	Hand molding, casting, and forming occupations (7754, 7755)
		<u>OPERATORS, FABRICATORS, AND LABORERS</u> <u>-- continued</u>
		<u>Fabricators, Assemblers, and Hand Working Occupations - continued</u>
	789	Hand painting, coating, and decorating occupations (7756)
	793	Hand engraving and printing occupations (7757)
	795	Miscellaneous hand working occupations (7758, 7759)
		<u>Production Inspectors, Testers, Samplers, and Weighers</u>
	796	Production inspectors, checkers, and examiners (782, 787)
	797	Production, testers (783)
	798	Production samplers and weighers (784)
	799	Graders and sorters, exc. agricultural (785)

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File Location	Field size	Item and code outline
		<u>Transportation and Material Moving Occupations --</u>
		<u>-- Motor Vehicle Operators</u>
	803	Supervisors, motor vehicle operators (8111)
	804	Truck drivers (8212-8214)
	806	Driver-sales workers (8218)
	808	Bus drivers (8215)
	809	Taxicab drivers and chauffeurs (8216)
	813	Parking lot attendants (874)
	814	Motor transportation occupations, n.e.c. (8219)
		<u>Transportation Occupations, Except Motor</u>
		<u>Vehicles</u>
		<u>Rail Transportation occupations</u>
	823	Railroad conductors and yardmasters (8113)
	824	Locomotive operating occupations (8232)
	825	Railroad brake, signal, and switch operators (8233)
	826	Rail vehicle operators, n.e.c. (8239)
		<u>Water Transportation Occupations</u>
	828	Ship captains and mates, except fishing boats (pt 8241, 8242)
	829	Sailors and deckhands (8243)
	833	Marine engineers (8244)
	834	Bridge, lock, and lighthouse tenders (8245)
		<u>Material Moving Equipment Operators</u>
	843	Supervisors, material moving equipment operators (812)
	844	Operating engineers (8312)
		<u>OPERATORS, FABRICATORS, AND LABORERS</u>
		<u>-- continued</u>
		<u>Material Moving Equipment Operators</u>
		<u>-- continued</u>
	845	Longshore equipment operators (8313)
	848	Hoist and winch operators (8314)
	849	Crane and tower operators (8315)
	853	Excavating and loading machine operators (8316)
	855	Grader, dozer, and scraper operators (8317)
	856	Industrial truck and tractor equipment operators (8318)
	859	Miscellaneous material moving equipment operators (8319)
		<u>Handlers, Equipment Cleaners, Helpers and Laborers</u>
	864	Supervisors, handlers, equipment cleaners, and laborers, n.e.c. (85)
	865	Helpers, mechanics and repairers (863)

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File Location	Field size	Item and code outline
		<p style="text-align: center;"><u>Helpers, Construction and Extractive Occupations</u></p> <p>866 Helpers, construction trades (8641-8645, 8648)</p> <p>867 Helpers, surveyor (8646)</p> <p>868 Helpers, extractive occupations (865)</p> <p>869 Construction laborers (871) .</p> <p>874 Production helpers (861,862)</p> <p style="text-align: center;"><u>Freight Stock, and Material Handlers</u></p> <p>875 Garbage collectors (8722)</p> <p>876 Stevedores (8723)</p> <p>877 Stock handlers and baggers (8724)</p> <p>878 Machine feeders and off bearers (8725)</p> <p>883 Freight, stock, and material handlers, n.e.c. (8726)</p> <p>885 Garage and service station related occupations (873)</p> <p>887 Vehicle washers and equipment cleaners (875)</p> <p>888 Hand packers and packages (8761)</p> <p>889 Laborers, except construction (8769)</p> <p style="text-align: center;"><u>MILITARY OCCUPATIONS</u></p> <p>903 Commissioned Officers and Warrant Officers</p> <p>904 Non-commissioned Officers and Other Enlisted Personnel</p> <p>905 Military occupation, rank not specified</p> <p style="text-align: center;"><u>EXPERIENCED UNEMPLOYED NOT CLASSIFIED BY OCCUPATION</u></p> <p>909 Last worked 1984 or earlier</p> <p>913 Retired</p> <p style="text-align: center;"><u>OTHER OCCUPATIONS</u></p> <p>914 Housewife/homemaker</p> <p>915 Student</p> <p>916 Volunteer</p> <p>917 Unemployed, never worked, disabled, child, infant</p> <p>994 Refused</p> <p>995 Don't know</p> <p>996 Not applicable</p> <p>998 Blank/out of range</p> <p>999 Non-response</p>
2090-2091	2	<p><u>SC0696: For how many years did -- do this kind of Work?</u></p> <p>01 Less than 1 year</p> <p>02 1 to less than 5 years</p> <p>03 5 to less than 10 years</p> <p>04 10to less than 20 years</p> <p>05 20 to less than 30 years</p>

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File Location	Field size	Item and code outline
		06 30 to less than 40 years 07 40 years or more 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2092-2093	2	<u>SC0697: For whom did – work the longest as a (occupation in SC0695)?</u> 01 Armed Forces 02 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2094-2176	83	<u>SC0698: What kind of business or industry is this? (For example, TV and radio manufacturing, retail shoe store, State Labor Department, farm etc.)</u>
2094-2173	80	An 80-character fields containing the verbatim written entry for kind of business or industry
2174-2176	3	<u>SC0698:</u> 1990 modified Census industrial codes. Numbers in parentheses following the occupation categories are the 1980 Standard Occupational Classification code equivalents. The abbreviation "pt" means "part" and "n.e.c" means "not elsewhere classified". <u>AGRICULTURE, FORESTRY, AND FISHERIES</u> 010 Agricultural production, crops (01) 011 Agricultural production, livestock (02) 012 Veterinary services (074) 020 Landscape and horticultural services (078) 030 Agricultural services, n.e.c. (071, 071 075, 076) 031 Forestry (08) 032 Fishing, hunting, and trapping (09) <u>MINING</u> 040 Metal mining (10) 041 Coal mining (12) 042 Oil and gas extraction (13)

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File Location	Field size	Item and code outline
		050 Nonmetallic mining and quarrying except fuels (14)
		<u>CONSTRUCTION</u>
		060 Construction (15, 16, 17)
		<u>MANUFACTURING -- Nondurable Goods</u>
		100 Meat products (201)
		101 Dairy products (202)
		102 Canned, frozen, and preserved fruits and vegetables (203)
		110 Grain mill products (204)
		111 Bakery products (205)
		112 Sugar and confectionery products (206)
		120 Beverage industries (208)
		121 Miscellaneous food preparations and kindred products (207, 209)
		122 Not specified food industries
		130 Tobacco manufactures (21)
		132 Knitting mills (225)
		140 Dyeing and finishing textiles, except wool and knit goods (226)
		141 Carpet and rugs (227)
		142 Yarn thread, and fabric mills (221-224, 228)
2094-2176	83	SC0698: What kind of business or industry is this? (For example, TV and radio manufacturing, retail shoe store, State Labor Department, farm etc.)
2174-2176	3	<u>SC0698: -- continued</u>
		<u>MANUFACTURING -- Nondurable Goods -- continued</u>
		150 Miscellaneous textile mill products (229)
		151 Apparel and accessories, except knit (231- 238)
		152 Miscellaneous fabricated textile products (239) paper and allied products
		160 Pulp, paper, and paperboard mills (261-263)
		161 Miscellaneous paper and pulp products (267)
		162 Paperboard containers and boxes (265)
		171 Newspaper publishing and printing (271)
		172 Printing, publishing, and allied industries, except newspapers (272-279)
		180 Plastics, synthetics, and resins (282)
		181 Drugs (283)
		182 Soaps and cosmetics (284)
		190 Paints, varnishes, and related products (285)
		191 Agricultural chemicals (287)
		192 Industrial and miscellaneous chemicals (281, 286, 289)
		200 Petroleum refining (291)
		201 Miscellaneous petroleum and coal products

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File Location	Field size	Item and code outline
		(295, 299)
		210 Tires and Inner tubes (301)
		211 Other rubber products, and plastics footwear and belting (302-306)
		212 Miscellaneous plastics products (308)
		220 Leather tanning and finishing (311)
		221 Footwear, except rubber and plastic (313, 314)
		222 Leather products, except footwear (315-317, 319)
		<u>MANUFACTURING -- Durable Goods</u>
		230 Logging (241)
		231 Sawmills, planing mills, and millwork (242, 243)
		232 Wood buildings and mobile homes (245)
		241 Miscellaneous wood products (244, 249)
		242 Furniture and fixtures (25)
		250 Glass and glass products (321-323)
		251 Cement, concrete, gypsum, and plaster products (324, 327)
		252 Structural clay products (325)
		261 Pottery and related products (326)
		262 Miscellaneous nonmetallic mineral and stone products (328, 329)
		270 Blast furnaces, steelworks, rolling and finishing mills (331)
		271 Iron steel foundries (332)
		272 Primary aluminum industries (3334, pt 334, 3353-3355, 3363, 3365)
2094-2176	83	SC0698: What kind of business or industry is this? (For example, TV and radio manufacturing, retail shoe store, State Labor Department, farm etc.) -- continued
2174-2176	3	<u>SC0698: -- continued</u>
		<u>MANUFACTURING -- Durable Goods -- continued</u>
		280 Other primary metal industries (3331, 3339, pt 334, 3351, 3356, 3357, 3364, 3366, 3369, 339)
		281 Cutlery, hand tools, and general hardware (342)
		282 Fabricated structural metal products (344)
		290 Screw machine products (345)
		291 Metal forgings and Stampings (346)
		292 Ordnance (348)
		300 Miscellaneous fabricated metal products (341, 343, 347, 349)
		301 Not specified metal industries
		310 Engines and turbines (351)
		311 Farm machinery and equipment (352)
		312 Construction and material handling machines (353)
		320 Metalworking machinery (354)
		321 Office and accounting machines (3578, 3579)

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File Location	Field size	Item and code outline
		322 Computers and related equipment (3571-3577)
		331 Machinery, except electrical, n.e.c. (355, 356, 358, 359)
		332 Not specified machinery
		340 Household appliances (363) .
		341 Radio, TV, and communication equipment (365, 366)
		342 Electric machinery, equipment, and supplies, n.e.c. (361, 362, 364, 367, 369)
		350 Not specified electrical machinery, equipment, and supplies
		351 Motor vehicles and motor vehicle equipment (371)
		352 Aircraft and parts (372)
		360 Ship and boat building and repairing (373)
		361 Railroad locomotives and equipment (374)
		362 Guided missiles, space vehicles, and parts (376)
		370 Cycles and miscellaneous transportation Equipment (375, 379)
		371 Scientific and controlling instruments (381, 382, exc. 3827)
		372 Medical, dental, and optical instruments and supplies (3827, 384, 385)
		380 Photographic equipment and supplies (386)
		381 Watches, clocks, and clockwork operated devices (387)
		390 Toys, amusement, and sporting goods (394, 376)
		391 Miscellaneous manufacturing industries (39 exc. 394)
		392 Not specified manufacturing industries
2094-2176	83	SC0698: What kind of business or industry is this? (For example, TV and radio manufacturing, retail shoe store, State Labor Department, farm etc.) – continued
2174-2176	3	<u>SC0698: -- continued</u>
		<u>TRANSPORTATION, COMMUNICATIONS, AND OTHER PUBLIC UTILITIES</u>
		400 Railroads (40)
		401 Bus service and urban transit (41, except 412)
		402 Taxicab service (412)
		410 Trucking service (421, 423)
		411 Warehousing and storage (422)
		412 U.S. Postal Service (43)
		420 Water transportation (44)
		421 Air transportation (45)
		422 Pipe lines, except natural gas (46)
		432 Services incidental to transportation (47)
		440 Radio and television broadcasting and cable (483, 484)
		441 Telephone communications (481)

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File Location	Field size	Item and code outline
		442 Telegraph and miscellaneous communications services (482, 489) 450 Electric light and power (491) 451 Gas and steam supply systems (492, 496) 452 Electric and gas, and other combinations (493) 470 Water supply and irrigation (494, 497) 471 Sanitary Services (495) 472 Not specified utilities <u>WHOLESALE TRADE -- Durable Goods</u> 500 Motor vehicles and equipment (501) 501 Furniture and home furnishings (502) 502 Lumber and construction materials (503) 510 Professional and commercial equipment and supplies (504) 511 Metals and minerals, except petroleum (505) 512 Electrical goods (506) 521 Hardware, plumbing and heating supplies (507) 530 Machinery, equipment and supplies (508) 531 Scrap and waste materials (5093) 532 Miscellaneous wholesale, durable goods (509 exc. 5093) <u>WHOLESALE TRADE -- Nondurable Goods</u> 540 Paper and paper products (511) 541 Drug, chemicals and allied products (512, 516) 542 Apparel, fabrics, and nations (513) 550 Groceries and related products (514) 551 Farm-product raw materials (515) 552 Petroleum products (517) 560 Alcoholic beverages (518) 561 Farm supplies (5191)
2094-2176	83	<u>SC0698: What kind of business or industry is this? (For example, TV and radio manufacturing, retail shoe store, State Labor Department, farm etc.) – continued</u>
2174-2176	3	<u>SC0698: -- continued</u> <u>WHOLESALE TRADE -- Nondurable Goods – continued</u> 562 Miscellaneous wholesale, nondurable goods (5192-5199) 571 Not specified wholesale trade <u>RETAILTRADE</u> 580 Lumber and building material retailing (521, 523) 581 Hardware stores (525) 582 Retail nurseries and garden stores (526) 590 Mobile home dealers (527) 591 Department stores (531)

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File Location	Field size	Item and code outline
		592 Variety stores (533)
		600 Miscellaneous general merchandise stores (539)
		601 Grocery stores (541)
		602 Dairy products stores (545)
		610 Retail bakeries (546)
		611 Food stores, n.e.c. (542, 543, 544, 549)
		612 Motor vehicle dealers (551,552)
		620 Auto and home supply stores (553)
		621 Gasoline service stations (554)
		622 Miscellaneous vehicle dealers (555, 556, 557, 559)
		623 Apparel and accessory store, except shoe (56, except 566)
		630 Shoe stores (566)
		631 Furniture and home furnishings stores (571)
		832 Household appliance stores (572)
		633 Radio, TV, and computer stores (5731, 5734)
		640 Music stores (5735, 5736)
		641 Eating and drinking places (58)
		842 Drug stores (591)
		650 Liquor stores (592)
		651 Sporting goods, bicycles and hobby stores (5941, 5945, 5946)
		652 Book and stationery stores (5942, 5943)
		660 Jewelry stores (5944)
		661 Gift, novelty, and souvenir shops (5947)
		662 Sewing, needlework and piece goods stores (5949)
		663 Catalog and mail order houses (5961)
		670 Vending machine operators (6962)
		671 Direct selling establishments (5963)
		672 Fuel dealers (698)
		681 Retail florists (5992)
		682 Miscellaneous retail stores (593, 5948, 5993-5995, 5999)
		691 Not specified retail trade
2094-2176	83	SC0698: What kind of business or industry is this? (For example, TV and radio manufacturing, retail shoe store, State Labor Department, farm etc.) – continued
2174-2176	3	<u>SC0698: -- continued</u>
		<u>FINANCE, INSURANCE, AND REAL ESTATE</u>
		700 Banking (60 exc. 603 and 606)
		701 Savings Institutions, including credit unions (603, 606)
		702 Credit agencies n.e.c. (61) ,
		710 Security, commodity brokerage, and investment companies (62, 67)
		711 Insurance (63, 64)
		712 Real estate, Including real estate-insurance Offices (65)

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<p style="text-align: center;"><u>BUSINESS AND REPAIR SERVICES</u></p> <p>721 Advertising (731) 722 Services to dwellings and other buildings (734) 731 Personnel supply services (736) 732 Computer and data processing services (737) 740 Detective and protective services (7381,7382) 741 Business services, n.e.c. (732, 733, 735, 7383-7389) 742 Automotive rental and leasing, without drivers (751) 750 Automobile, parking and carwashes(752, 7542) 751 Automotive repair and related services (753, 7549) 752 Electrical repair shops (763, 7694) 760 Miscellaneous repair services (763, 764, 7692, 7699)</p> <p style="text-align: center;"><u>PERSONAL SERVICES</u></p> <p>761 Private households (88) 762 Hotels and motels (701) 770 Lodging places, except hotels and motels (702, 703, 704) 771 Laundry, cleaning. and garment services (721 exc. pt 7219) 772 Beauty shops (723) 780 Barber shops (724) 781 Funeral service and crematories (726) 782 Shoe repair shops (725) 790 Dressmaking shops (pt 7219) 791 Miscellaneous personal services (722, 729)</p> <p style="text-align: center;"><u>ENTERTAINMENTANDRECREATIONSERVICES</u></p> <p>800 Theaters and motion pictures (781-783, 792) 801 Video tape rental (784) 802 Bowling centers (793)</p>
2094-2176	83	<p>SC0698: What kind of business or industry is this? (For example, TV and radio manufacturing, retail shoe store, State Labor Department, farm etc.) – continued</p>
2174-2176	3	<p><u>SC0698: -- continued</u></p> <p style="text-align: center;"><u>ENTERTAINMENTANDRECREATIONSERVICES</u> <u>-- continued</u></p> <p>810 Miscellaneous entertainment and recreation services (791, 794, 799)</p> <p style="text-align: center;"><u>PROFESSIONAL AND RELATED SERVICES</u></p> <p>812 Offices and clinics of physicians (801, 803)</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		820 Offices and clinics of dentists (802)
		821 Offices and clinics of chiropractors (8041)
		822 Offices and dentists and optometrists
		830 Offices and clinics and health practitioners, n.e.c. (8043, 8049)
		831 Hospitals (806)
		832 Nursing and personal care facilities (805)
		840 Health services, n.e.c. (807, 808, 809)
		841 Legal services (81)
		842 Elementary and secondary schools
		850 Colleges and universities (822)
		851 Vocational schools (824)
		852 Libraries (823)
		860 Educational services, n.e.c. (829)
		861 Job training and vocational rehabilitation services (833}
		862 Child day care services (pt 835)
		863 Family child care homes (pt 835)
		870 Residential care facilities, without nursing (836)
		871 Social services, n.e.c. (832, 839)
		872 Museums, art galleries, and zoos (84)
		873 Labor unions (863)
		880 Religious organizations (866)
		881 Membership organizations, n.e.c. (861, 862, 864, 865, 869)
		882 Engineering, architectural, and surveying services (871)
		890 Accounting auditing and bookkeeping services (873)
		891 Research, development and testing services (873)
		892 Management and public relation services (874)
		893 Miscellaneous professional and related services (899)
		<u>PUBLIC ADMINISTRATION</u>
		900 executive and legislative offices (911 -913)
		901 General government, n.e.c. (919)
		910 Justice, public order, and safety (92)
		921 Public finance, taxation, and monetary policy
2094-2176	83	SC0698: What kind of business or industry is this? (For example, TV and radio manufacturing, retail shoe store, State Labor Department, farm etc.) – continued
2174-2176	3	<u>SC0698: -- continued</u>
		<u>PUBLIC ADMINISTRATION -- continued</u>
		(93)
		922 Administration of human resource programs (94)
		930 Administration of environmental quality and housing programs (95)
		931 Administration of economic programs (96)

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File Location	Field size	Item and code outline
		932 National security and international affairs (97) <u>ACTIVE DUTY MILITARY</u> 940 Army 941 Air Force 942 Navy 950 Marines 951 Coast Guard 952 Armed Forces, Branch not specified 960 Military Reserves or National Guard <u>EXPERIENCED UNEMPLOYED NOT CLASSIFIED BY INDUSTRY</u> 961 Own home or at home 970 Retired 990 Unknown or not applicable 992 last worked 1984 or earlier 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
2177-2178	2	<u>SC0699: Was --</u> 01 an employee of a PRIVATE company, business or individual for wages, salary, or commission? 02 a FEDERAL government employee? 03 a STATE government employee? 04 a LOCAL government employee? Self-employed in (his/her) OWN business, professional practice, or farm? Was the business incorporated? 05 Yes, the business was incorporated 06 No, the business was not incorporated 07 working WITHOUT PAY in a family business or farm? 08 or (he/she) never worked at a job lasting 2 weeks or more? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2179-2180	2	<u>SC0700: Did -- work at any time during the last year of life?</u> 01 Yes 02 No 94 Refused

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File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2181-2182	2	<u>SC0701: Did -- have a job or business up until -- died?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2183-2184	2	<u>SC0702: Why did -- stop working?</u> 01 Because of a health problem or disability 02 Because of loss of job 03 Normal retirement 04 Family responsibilities 05 Didn't like job 06 Other reason 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0703-0707: When did -- last work even for a few days?</u>
2185-2187	3	<u>SC0703:</u> 001-125 Age in years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
		<u>SC0703-0707: When did -- last work even for a few days? -- continued</u>
2188-2189	2	<u>SC0704:</u> 01-12 Month 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2190-2191	2	00-93 Year

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2192-2193	2	<u>SC0705:</u> 01 Time before death 02 Time before interview 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2194-2196	3	<u>SC0706:</u> 001-990 Number 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
2197-2198	2	<u>SC0707:</u> 03 Days 04 Weeks 05 Months 06 Years 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range
2199-2200	2	<u>SC0708: Did -- ever serve on active duty in the Armed Forces of the United States?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0709-714: When did -- serve?</u>
2201-2202	2	<u>SC0709:</u> 01 Gulf War Era (Aug '90 to present) 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
2203-2204	2	<u>SC0710:</u> 02 Vietnam Era (Aug '64 to April 75) 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2205-2206	2	<u>SC0711 :</u> 03 Korean War (June '50 to Jan '55) 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2207-2208	2	<u>SC0712:</u> 04 World War II (Sept '40 to July '47) 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2209-2210	2	<u>SC0713:</u> 05 World War I (April '17 to Nov'18) 94 Refused. 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2211-2212	2	<u>SC0714:</u> 06 Other Service (All other periods) 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2213-2214	2	<u>SC0715: Was -- on full-time active duty with the armed forces at the time of death?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range
2215-2216	2	<u>SC0716: Was -- EVER an active member of a National Guard or military reserve unit?</u> 01 Yes 02 No

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File Location	Field size	Item and code outline
		03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2217-2218	2	<u>SC0717: Was ALL of -- active duty service related to National Guard or military reserve training?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2219-2220	2	<u>SC0718: Did (If respondent is decedent's spouse:: you/ -s husband/ - 's wife) EVER work at a job or business not counting work around the house? Include unpaid work in a family farm or business.</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2221-2223	3	<u>SC0719: Of all the jobs or businesses (you/ -- Husband/ -- wife) ever had, what KIND of work did (you/he/she) do the longest? (For example, electrical engineer, stock clerk, typist, farmer, etc.) Do not include homemaking.</u> 000 See locations 2753-2755 for standard occupation codes 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response.
2224-2225	2	<u>SC0720: For whom did (you/he/she) work the longest as a (occupation in SC0719)?</u> 01 Armed Forces 02 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

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File Location	Field size	Item and code outline
		99 Non-response
2226-2228	3	<p>SC0721: What kind of business or industry is this? (For example, TV and radio manufacturing, retail shoe store, State Labor Department, farm, etc.)</p> <p>000 See locations 2840-2842 for standard industry codes</p> <p>994 Refused</p> <p>995 Don't know</p> <p>996 Not applicable</p> <p>998 Blank/out of range</p> <p>999 Non-response</p>
2229-2230	2	<p><u>SC0722: (Were/was) (yow -- husband/ -- wife) -</u></p> <p>01 an employee of a PRIVATE company, business or individual for wages, salary, or commission?</p> <p>02 a FEDERAL government employee?</p> <p>03 a STATE government employee?</p> <p>04 a LOCAL government employee?</p> <p>self-employed in (your/his/her) OWN business, professional practice, or farm? Was the business incorporated?</p> <p>05 Yes, the business was incorporated</p> <p>06 No, the business was not incorporated</p> <p>07 Working WITHOUT PAY in a family business or farm?</p> <p>08 or (you/he/she) never worked at a lasting 2 weeks or more?</p> <p>94 Refused</p> <p>95 Don't know</p> <p>96 Not applicable</p> <p>98 Blank/out of range</p> <p>99 Non-response</p>
2231-2232	2	<p><u>SC0723: What was the cause of -- death?</u></p> <p>01 Homicide</p> <p>02 Suicide</p> <p>03 Injury involving motor vehicle</p> <p>04 Other injury or accident</p> <p>05 Other cause</p> <p>94 Refused</p> <p>95 Don't know</p> <p>96 Not applicable</p> <p>98 Blank/out of range</p> <p>99 Non-response</p>
2233-2234	2	<p>SC0724: Was -- working when the (homicide/suicide/fatal accident or injury) happened? (If motor vehicle add: Include going to</p>

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File Location	Field size	Item and code outline
		<p>or from a workplace, if -- was being paid for that time.)</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2235-2236	2	<p><u>SC0725: Where did the (homicide/suicide/fatal accident or injury) happen?</u></p> <p>01 Home or private area around the home 02 Farm 03 Mine or quarry 04 Industrial site 05 Place of recreation or sport 06 Street or highway 07 Public building 08 Residential institution 09 School 10 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2237-2238	2	<p><u>SC0726: What kind of firearm was it?</u></p> <p>00 No firearm involved 01 Handgun, including pistol or revolver 02 Shotgun 03 Rifle 04 Military firearm 05 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2239-2240	2	<p><u>SC0727: Did -- know -- assailant?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range</p>

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File Location	Field size	Item and code outline
		99 Non-response
		<u>SC0728-0732: Did the homicide happen during a robbery, an abduction, family argument or a drug deal?</u>
2241-2242	2	<u>SC0728:</u> 01 Robbery 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2243-2244	2	<u>SC0729:</u> 02 Abduction 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2245-2246	2	<u>SC0730:</u> 03 Family argument 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2247-2248	2	<u>SC0731:</u> 04 Drug deal 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2249-2250	2	<u>SC0732:</u> 05 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2251-2252	2	<u>SC0733: Where did -- fall from or into?</u> 00 Fall not involved On or down: 01 Escalator 02 Stairs or steps

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File Location	Field size	Item and code outline
		From: 03 Ladder 04 Scaffolding 05 Building or other structure 06 Playground equipment 07 Cliff 08 Chair or bed 09 Other place Into: 10 Swimming pool 11 Well 12 Storm drain or manhole 13 Other hole or opening in surface 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2253-2254	2	<u>SC0734: What caused -- to fall? Was it due to --</u> 01 Slipping, tripping or stumbling? 02 Jumping or diving 03 Collision, pushing or shoving by another person? 04 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2255-2256	2	<u>SC0735: At the time of the fall was -- impaired in any way because of a disability, a health condition. or intoxication?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2257-2258	2	<u>SC0736: How was -- impaired?</u> 01 Disability 02 Health condition 03 Intoxication 04 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
2259-2260	2	<p><u>SC0737: What kind of machinery was involved in the (homicide/suicide/fatal accident or injury)?</u></p> <ul style="list-style-type: none"> 00 No machinery involved 01 Agricultural or farming 02 Mining or earth drilling 03 Lifting machinery 04 Metalworking 05 Woodworking or framing 06 Turbines, steam or internal combustion engines 07 Belt, cable, chain, gear, or pulley 08 Earth moving, scraping, or other excavating 09 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2261-2262	2	<p><u>SC0738: Was the machinery operating at the time of the fatal incident?</u></p> <ul style="list-style-type: none"> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2263-2264	2	<p><u>SC0739: Where did -- drown? Was It in --</u></p> <ul style="list-style-type: none"> 00 Drowning not involved 01 A bay or estuary? 02 A harbor or marina? 03 A swimming pool? 04 A bathtub or shower? 05 An ocean? 06 A lake or pond? 07 A river? 08 Some other place? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2265-2266	2	<p><u>SC0740: Where did -- die? Was It --</u></p> <ul style="list-style-type: none"> 01 In a hospital emergency room? 02 In a hospital, not in an emergency room?

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File Location	Field size	Item and code outline
		03 On the way to a hospital? 04 In a nursing home or personal care home? 05 In his or her own home? (Regardless of ownership of home) 06 In another person's home? 07 In a hospice? 08 Some other place? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2267-2268	2	<u>SC0741: Was the accident on the roadway or shoulder, or some other place?</u> 01 Roadway or shoulder 02 Some other place 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2269-2270	2	<u>SC0742: Was -- the driver, a passenger, or a pedestrian?</u> 01 Driver 02 Passenger 03 Pedestrian 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2271-2272	2	<u>SC0743: What type of vehicle was -- driving or riding in?</u> 01 Passenger car or van 02 Motorcycle 03 Truck 04 Bus 05 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2273-2274	2	<u>SC0744: Was it a private or commercial vehicle?</u>

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File Location	Field size	Item and code outline
		01 Private 02 Commercial 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2275-2276	2	<u>SC0745: Was -- wearing a helmet at the time of the accident?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2277-2278	2	<u>SC746: Where in the (type of motor vehicle in SC0743) was -- sitting at the time of the accident?</u> 01 Front - driver's seat 02 Front - middle 03 Front - passenger's seat 04 Back seat - driver's side 05 Back seat - middle 06 Back seat - passenger's side 07 Truck bed 08 Other 09 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2279-2280	2	<u>SC0747: Was -- wearing a safety belt at the time of the accident?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
2281-2282	2	<p><u>SC0748: Was the (type of vehicle in SC0743) equipped with air bags?</u></p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2283-2284	2	<p><u>SC0749: Was the seat that -- was sitting in equipped with an air bag?</u></p> <p>01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2285-2286	2	<p><u>SC0750: Just prior to the (crash/fatal injury/accident), where was -- (driving from/if pedestrian: walking from)?</u></p> <p>01 Decedent's home 02 Other people's home(s) 03 Restaurant 04 Bar/tavern/nightclub 05 Stadiums/arenas 06 Picnic areas/beach/playgrounds 07 Place of work or school 08 Shopping, banking, or personal business 09 Church or religious activities 10 Volunteer activities 11 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2287-2288	2	<p><u>SC0751: Where was -- (driving to / if pedestrian: walking to)?</u></p> <p>01 Decedent's home 02 Other people's home(s) 03 Restaurant 04 Bar/tavern/nightclub 05 Stadiums/arenas 06 Picnic areas/beach/playgrounds 07 Place of work or school</p>

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File Location	Field size	Item and code outline
		08 Shopping, banking, or personal business 09 Church or religious activities 10 Volunteer activities 11 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2289-2290	2	<u>SC0752: Within four hours of the (homicide/suicide/fatal accident or injury), had -- been drinking any alcoholic beverages?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0753-0756: Prior to the (homicide/suicide/fatal accident or injury) -- with whom was -- drinking?</u>
2291-2292	2	<u>SC0753:</u> 01 Drank alone 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2293-2294	2	<u>SC0754:</u> 02 Friends 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2295-2296	2	<u>SC0755:</u> 03 Spouse/other relatives 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2297-2298	2	<u>SC0756:</u> 04 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

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File Location	Field size	Item and code outline
		99 Non-response <u>SC0757-0762: What was -- drinking prior to the (homicide/suicide/fatal accident or injury)?</u>
2299-2300	2	<u>SC0757:</u> 01 Beer, not including malt liquor 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2301-2302	2	<u>SC0758:</u> 02 Malt liquor 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2303-2304	2	<u>SC0759:</u> 03 Wine, not including wine coolers 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2305-2306	2	<u>SC0760:</u> 04 Wine cooler 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2307-2308	2	<u>SC0761:</u> 05 Liquor, such as whiskey, rum, gin, or vodka 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2309-2310	2	<u>SC0762:</u> 06 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2311-2312	2	<u>SC0763: Where was -- last drinking prior to the (homicide/suicide/fatal accident or injury)?</u>

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File Location	Field size	Item and code outline
		01 Decedent's home 02 Other people's home(s) 03 Restaurant 04 Bar/tavern/nightclub 05 Stadiums/arenas 06 Picnic areas/beach/playgrounds 07 Parking lots/sidewalks/alleyways 08 Inside motor vehicle (parked or moving) 09 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2313-2314	2	<u>SC0764: How long before (becoming fatally injured/fatally injuring (himself/herself) did -- take the last drink of any alcoholic beverage?</u> 01 Less than 15 minutes 02 15 -29 minutes 03 30 -59 minutes 04 At least 1 hour, but less than 2 hours 05 At least 2 hours, but less than 3 hours 06 3 hours or more 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2315-2316	2	<u>SC0765: How many drinks had -- drunk within 4 hours of the (homicide/suicide/fatal accident or injury)?</u> 01 12 or more drinks 02 7 -11 drinks 03 5 -6 drinks 04 3 -4 drinks 05 2 drinks 06 1 drink 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2317-2318	2	<u>SC0766: Had -- taken or used any drugs or medicines of any kind within 24 hours of (becoming fatally injured/fatally injuring (himself/herself))?</u> 01 Yes 02 No

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File Location	Field size	Item and code outline
		03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		SC0767-0778: Which of the following drugs did -- take or use within 24 hours of (becoming fatally injured/fatally injuring (himself/herself)? Did -- take or use -
2319-2320	2	SC0767: 01 Pain killers, such as Darvon, percodan, or codeine with or without tylenol? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2321-2320	2	SC0768: 02 Sedatives, such as barbiturates, sleeping pills, Seconal, or downers? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2323-2324	2	SC0769: 03 Tranquilizers, such as Librium, Valium, or Xanax? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2325-2326	2	SC0770: 04 Antidepressants, such as Prozac or Elavil? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2327-2328	2	SC0771: 05 Steroids? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response SC0767-0778: Which of the following drugs did --

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File Location	Field size	Item and code outline
		take or use within 24 hours of (becoming fatally injured/fatally injuring (himself/herself)? Did -- take or use - -- continued
2329-2330	2	<u>SCO772:</u> 06 Methadone? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2331-2332	2	<u>SCO773:</u> 07 Heroin? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2333-2334	2	<u>SCO774:</u> 08 Stimulants, such as amphetamines, Preludin, uppers or speed? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2335-2336	2	<u>SC0775:</u> 09 Marijuana or hashish? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2337-2338	2	<u>SC0776:</u> 10 Cocaine, crack cocaine, free base, or coca paste? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2339-2340	2	<u>SC0777:</u> 11 Hallucinogens, such as LSD, PCP, peyote, or mescaline? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
		<p>SC0767-0778: Which of the following drugs did -- take or use within 24 hours of (becoming fatally injured/fatally injuring (himself/herself)? Did -- take or use - -- continued</p>
2341-2342	2	<p><u>SC0778:</u> 12 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
		<p>SC0781-0793: We are interested in how people learn about the opportunity to become donors of body organs and tissues and bones. Where have you heard about organ donorship?</p>
2343-2344	2	<p><u>SC0781:</u> 01 Decedent 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2345-2346	2	<p><u>SC0782:</u> 02 (Other) family 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2347-2348	2	<p><u>SC0783:</u> 03 Friends 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2349-2350	2	<p><u>SC0784:</u> 04 School 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2351-2352	2	<p><u>SC0785:</u> 05 Work 94 Refused 95 Don't know</p>

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File Location	Field size	Item and code outline
		96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0781-0793: We are interested in how people learn about the opportunity to become donors of body organs and tissues and bones. Where have you heard about organ donorship? -- continued</u>
2353-2354	2	<u>SC0786:</u> 06 Media (radio, TV, newspapers or magazines) 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2355-2356	2	<u>SC0787:</u> 07 Church or clergy 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2357-2358	2	<u>SC0788:</u> 08 Physician 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2359-2360	2	<u>SC0789:</u> 09 Other health professional 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2361-2362	2	<u>SC0790:</u> 10 Clubs 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2363-2364	2	<u>SC0791:</u> 11 Department of Motor Vehicles 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

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File Location	Field size	Item and code outline
		99 Non-response
2365-2366	2	<u>SC0792:</u> 12 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2367-2368	2	<u>SC0793:</u> 13 Never heard about 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2369-2370	2	<u>SC0794: Did -- have a donor card or a drivers license stating that -- wanted to be a donor when died?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2371-2372	2	<u>SC0795: Did -- ever tell you or another family member that -- would like to donate -- organs when -- died?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2373-2374	2	<u>SC0796: At the time of death, were any of -- body organs, tissue, or bone removed in order to give them to another person?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

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File Location	Field size	Item and code outline
		99 Non-response
		<u>SC0797-0798: What was removed? Was this Organs, tissue or bone?</u>
2375-2376	2	<u>SC0797:</u> 01 Organ(s) 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2377-2378	2	<u>SC0798:</u> 02 Tissue/bone 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0799-0806: What were the reasons -- organs or tissue or bones were not donated?</u>
2379-2380	2	<u>SC0799:</u> 01 Decedent hadn't expressed desire to be a donor 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2381-2382	2	<u>SC0800:</u> 02 Decedent did not want to be a donor 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2383-2384	2	<u>SC0801:</u> 03 Family did not want it 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2385-2386	2	<u>SC0802:</u> 04 No one thought about it 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
2387-2388	2	<u>SC0803:</u> 05 Never asked 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2389-2390	2	<u>SC0804:</u> 06 Body too damaged 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2391-2392	2	<u>SC0805:</u> 07 Otherwise ineligible to be a donor 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2393-2394	2	<u>SC0806:</u> 08 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2395-2396	2	<u>SC0807: Would you or the family have chosen to donate -- organs, tissue, or bone If -- had said to you or another family member that -- wanted to be a donor?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2397-2398	2	<u>SC0808: Would you or the family have chosen to donate -- organs, tissues, or bone If -- had a donor card or driver's license stating that -- wanted to be a donor?</u> 01 Yes 02 No 03 Don't know

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2399-2400	2	<u>SC0809: Would you or the family have chosen to donate -- organs, tissues, or bone if -- had said to you or another family member that -- wanted to be a donor, or if -- had a donor card or driver's license stating that -- wanted to be a donor?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2401-2402	2	<u>SC0810: When -- died, did anyone talk to you or another family member about donating --'s body organs, tissue, or bone?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0811-816: Who talked to you or the family about donating -- body organs, tissue, or bone?</u>
2403-2404	2	<u>SC0811:</u> 01 A friend or relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2405-2406	2	<u>SC0812:</u> 02 Clergy 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0811-816: Who talked to you or the family about donating -- body organs, tissue, or bone?</u>

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File Location	Field size	Item and code outline
		<u>-- continued</u>
2407-2408	2	<u>SC0813:</u> 03 Nurse 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2409-2410	2	<u>SC0814:</u> 04 Doctor 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2411-2412	2	<u>SC0815:</u> 05 Transplant coordinator 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2413-2414	2	<u>SC0816:</u> 06 Other 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2415-2416	2	<u>SC0817: How often did -- go outdoors during the last year of life? Was it every day, 3 to 8 times a week, 1 to 2 times a week, 1 to 3 times a month, less than once a month, or -- didn't go outside at all during the last year of life?</u> 01 Every day 02 3 to 6 times a week 03 1 to 2 times a week 04 1 to 3 times a month 05 Less than once a month 06 Never/didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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and Medical Examiner/Coroner Data File Documentation**

File Location	Field size	Item and code outline
2417-2418	2	<p>SC0818: Where did -- spend most of -- time during the last year of life? in – bedroom or some other <u>place?</u></p> <p>01 Bedroom 02 Other place 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2419-2420	2	<p>SC0819: During the last year of life, how often did -- leave <u>the (place in SC0818)? Was it -</u></p> <p>01 Every day? 02 3 to 6 times a week? 03 1 to 2 times a week? 04 1 to 3 times a month? 05 Less than once a month? 06 Never/didn't go outside? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2421-2422	2	<p>SC0820: How often did -- visit or talk on the <u>telephone with family or friends?</u></p> <p>01 Everyday 02 3 to 6 times a week 03 1 to 2 times a week 04 1 to 3 times a month 05 less than once a month 06 Never/didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2423-2424	2	<p>SC0821: (How often did --) do vigorous physical activity, such as <u>jogging, tennis, aerobics, swimming laps, bicycling, or other active sports?</u></p> <p>01 Every day 02 3 to 6 times a week 03 1 to 2 times a week 04 1 to 3 times a month 05 less than once a month 06 Never/didn't do 94 Refused 95 Don't know 96 Not applicable</p>

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File Location	Field size	Item and code outline
		01 Every day 02 3 to 6 times a week 03 1 to 2 times a week 04 1 to 3 times a month 05 Less than once a month 06 Never/didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2433-2434	2	<u>SC0826: (How often did --) participate in volunteer organizations or activities?</u> 01 Every day 02 3 to 6 times a week 03 1 to 2 times a week 04 1 to 3 times a month 05 less than once a month 06 Never/didn't do 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2435-2436	2	<u>SC0827: During the last year of life, did -- move or have a change in residence?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable , 98 Blank/out of range 99 Non-response
2437-2438	2	<u>SC0828: During the last year of life, did -- become engaged?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2439-2440	2	<u>SC0829: During the last year of life, did -- receive a promotion in a job?</u> 01 Yes 02 No 94 Refused

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File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2441-2442	2	<u>SC0830: (During the last year of life) did -- have a demotion in a job?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2443-2444	2	<u>SC0831: (During the last year of life,) did -- get or begin a new job?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2445-2446	2	<u>SC0832: (During the last year of life,) was -- laid off from a job?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2447-2448	2	<u>SC0833: (During the last year of life,) did -- quit a job?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2449-2450	2	<u>SC0834: During the last year of life, did -- retire from work?</u> 01 Yes 02 No 94 Refused

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File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2451-2452	2	<u>SC0835: During - last year of life, did (if respondent is decedent's spouse: you/ -- husband/ -- wife) have a very serious illness?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2453-2454	2	<u>SC0836: During -- last year of life, did -- have a (husband/wife) die?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2455-2456	2	<u>SC0837: During -- last year of life, did -- have any (other) close family member had a very serious illness?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2457-2458	2	<u>SC0838: (During -- last year of life) did any (other) close family member die?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
2459-2460	2	<p>SC0839: (During -- last year of life,) did -- have any close friend or significant other who had a <u>very serious illness?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2461-2462	2	<p>SC0840: (During -- last year of life,) did -- have any close friend or significant other die?</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2463-2464	2	<p>SC0841: During -- last year of life, did -- have a <u>pregnancy, a miscarriage, or give birth to a child?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2465-2466	2	<p>SC0842: During the last year of -- life, how often did -- have temper tantrums? Was it often, <u>sometimes, Rarely, or never?</u></p> <p>01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2467-2468	2	<p>SC0843: How often did -- make violent threats or <u>attempts?</u></p> <p>01 Often 02 Sometimes</p>

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File Location	Field size	Item and code outline
		03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2469-2470	2	<u>SC0844: (How often did --) destroy property?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2471-2472	2	<u>SC0845: (How often did --) cause complaints from the community?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2473-2474	2	<u>SC0846: (How often did --) engage in bizarre behavior?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2475-2476	2	<u>SC0847: (How often did --) cause complaints from -- family?</u> 01 Often 02 Sometimes

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File Location	Field size	Item and code outline
2475-2476	2	03 Rarely . 04 Never <u>SC0847: (How often did --) cause complaints from -- family? -- continued</u> 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2477-2478	2	<u>SC0848: During the last month of life, did -- seem Worried or apprehensive often, sometimes, rarely or never?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2479-2480	2	<u>SC0849: (How often did --) seem drowsy or sluggish?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2481-2482	2	<u>SC0850: (How often did --) seem unresponsive or withdrawn?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
2483-2484	2	<p><u>SC0851: (How often did --) seem impatient or annoyed?</u></p> <p>01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2485-2486	2	<p><u>SC0852: (How often did --) seem suspicious of others or not trust other people?</u></p> <p>01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2487-2488	2	<p><u>SC0853: (How often did --) have delusions or beliefs not in keeping with reality?</u></p> <p>01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2489-2490	2	<p><u>SC0854: (How often did --) have hallucinations, or see or hear things that weren't there?</u></p> <p>01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused</p>

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File Location	Field size	Item and code outline
		95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2491-2492	2	<u>SC0855: (How often did --) say things like "I'm no good," or "I'm worthless?"</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2493-2494	2	<u>SC0856: (How often did --) cry for long periods of time for no apparent reason?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2495-2496	2	<u>SC0857: (How often did --) have trouble sleeping, or did -- sleep more or less than usual?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2497-2498	2	<u>SC00858: During the last month of life, did -- eat more or less than usual so that -- weight changed?</u> 01 Yes 02 No 03 Don't know

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2499-2500	2	<u>SC0859: How often did -- eat more or less than usual? Was it often, sometimes, rarely, or never?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2501-2502	2	<u>SC0860: How often did -- have trouble concentrating or have difficulty in making decisions?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2503-2504	2	<u>SC0861: During the last month of life, did -- express a wish to die, or say that -- wished that death would come quickly?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2505-2506	2	<u>SC0862: How often did -- express a wish to die? Was it often, sometimes, rarely, or never?</u> 01 Often 02 Sometimes

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File Location	Field size	Item and code outline
		03 Rarely 04 Never 05 Don't know' 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2507-2508	2	<u>SC0863: At any time in the last month of life, did -- ever talk about taking -- own life?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2509-2510	2	<u>SC0864: How often did -- talk about taking -- own life? Was it often, sometimes, Rarely, or never?</u> 01 Often 02 Sometimes 03 Rarely 04 Never 05 Don't know 94 Refused 95 Don't know 98 Not applicable 98 Blank/out of range 99 Non-response
2511-2512	2	<u>SC0865: How wrong did -- think it was to give a fake excuse for missing work, not showing up for a meeting or cutting class? Did -- think it was -</u> 01 Not wrong? 02 A little bit wrong? 03 Wrong? 04 Very wrong? 94 Refused 95 Don't know 98 Not applicable 98 Blank/out of range 99 Non-response
2513-2514	2	<u>SC0866: How wrong did -- think it was to borrow money from someone without any intention of paying it back?</u> 01 Not wrong

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File Location	Field size	Item and code outline
		02 A little bit wrong 03 Wrong 04 Very wrong 94 Refused 95 Don't know 98 Not applicable 98 Blank/out of range 99 Non-response
2515-2516	2	<u>SC0887: How wrong did -- think it was to start a fight and hit someone because you don't like what the person said or did?</u> 01 Not wrong 02 A little bit wrong 03 Wrong 04 Very wrong 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2517-2518	2	<u>SC0868: How wrong did -- think it was to give false information in filling out an application for a job, or a loan, or something else like that?</u> 01 Not wrong 02 A little bit wrong 03 Wrong 04 Very wrong 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2519-2520	2	<u>SC0869: How wrong did -- think it was to take something of value from a store without paying for it? Did -- think it was -</u> 01 Not wrong? 02 A little bit wrong? 03 Wrong? 04 Very wrong? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2521-2522	2	<u>SC0870: How wrong did -- think it was to start an</u>

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File Location	Field size	Item and code outline
		<p><u>argument and use insulting language even though it isn't really called for?</u></p> <p>01 Not wrong 02 A little bit wrong 03 Wrong 04 Very wrong 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2523-2524	2	<p>SC0871: How wrong did -- think it was to deliberately damage something that belongs to someone else because you are angry with that person?</p> <p>01 Not wrong 02 A little bit wrong 03 Wrong 04 Very wrong 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2525-2526	2	<p>SC0872: During 1992, did -- (or (persons listed in Section A, SC0029-0040 who were related to decedent) receive any income from wages, salary, commissions, bonuses, or tips from any jobs, or any self-employment income from farm or non-farm business, including proprietorship and partnership, and including any earnings as a tenant farmer or sharecropper?</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2527-2528	2	<p>SC0873: During 1992, did -- (himself/herself) receive any income from wages, salary, commissions, bonuses, or tips from any jobs, or any self-employment income from farm or non-farm business, including proprietorship and partnership, and including any earnings as a tenant farmer or sharecropper?</p> <p>01 Yes</p>

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File Location	Field size	Item and code outline
		02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2529-2530	2	SC0874: During 1992, did -- (or (persons listed in Section A, SC0029-0040 who were related to decedent) receive any Social Security or Railroad Retirement? 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2531-2532	2	SC0875: During 1992, did -- (himself/herself) receive any Social Security or Railroad Retirement? 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2533-2534	2	SC0876: During 1992, did -- (or (persons listed in Section A,. SC0029-0040 who were related to decedent) receive any money from Supplemental Security income or SSI? 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2535-2536	2	SC0877: During 1992, did -- (himself/herself)

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File Location	Field size	Item and code outline
		<p><u>receive any money from Supplemental Security Income or SSI?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2537-2538	2	<p>SC0878: During 1992, did -- (or (persons listed in Section A, SC0029-0040 who were related to decedent) receive any money from any other retirement, survivor or disability pensions, NOT including Social Security, Railroad Retirement or Supplemental Security Income retirement or disability?</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2539-2540	2	<p>SC0879: During 1992, did -- (himself/herself) receive any money from any other retirement, survivor or disability pensions, NOT including Social Security, Railroad Retirement or Supplemental Security Income retirement or disability?</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2541-2542	2	<p>SC0880: During 1992, did -- (or (persons listed in Section A, SC029-0040 who were related to decedent) receive any money from the VA or Department of Veterans Affairs?</p> <p>01 Yes</p>

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File Location	Field size	Item and code outline
		02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2543-2544	2	<u>SC0881: During 1992, did -- (himself/herself) receive any money from the VA or Department of Veterans Affairs?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2545-2546	2	<u>SC0882: During 1992, did -- (or (persons listed in Section A, SC0029-0040 who were related to decedent) receive any money from any public assistance, or public welfare including Aid to Families with Dependent Children or AFDC?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2547-2548	2	<u>SC0883: During 1992, did -- (himself/herself) receive any money from Aid to Families with Dependent Children or AFDC or other public assistance or public welfare payments?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2549-2550	2	<u>SC0884: During 1992, did -- (or (persons listed in Section A, SC0029-0040 who were related to decedent) receive any money from interest, dividends, net rental income or royalty income, or income from estates and trusts, even if it was small amounts credited to an account?</u> 01 Yes

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2551-2552	2	SC0885: During 1992, did -- (himself/herself) receive any money from interest, dividends, net rental income or royalty income, or income from estates and trusts, even if it was small amounts <u>credited to an account?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2553-2554	2	SC0886: During 1992, did -- (or (persons <i>listed in Section A, SC0029-0040</i> who were related to decedent)) receive any other sources of income which were received regularly, such as unemployment compensation, child support, or alimony, NOT including any lump-sum payments such as money from an inheritance or the sale of a home? 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2555-2556	2	SC0887: During 1992, did -- (himself/herself) receive any other sources of income which were received regularly, such as unemployment compensation, child support, or alimony, NOT including any lump-sum payments such as money <u>from an inheritance or the sale of a home?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response SC0888-0889: Including money from all sources

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<p>that we have Just talked about, what was the TOTAL income of -- (and (persons listed in Section A, SC029-0040 who were related to decedent)) in 1992 BEFORE deductions. If you are unsure, please give an estimate.</p>
2557-2562	6	<p><u>SC0888:</u> 000000-999990 Dollar amount 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response</p>
2563-2564	2	<p><u>SC0889:</u> 01 Less than \$1,000 02 \$1,000 to \$1,999 03 \$2,000 to \$2,999 04 \$3,000 to \$3,999 05 \$4,000 to \$4,999 06 \$5,000 to \$5,999 07 \$6,000 to \$6,999 08 \$7,000 to \$8,999 09 \$9,000 to \$11,499</p> <p>SC0888-0889: Including money from all sources that we have Just talked about, what was the TOTAL Income of - (and (persons listed In Section A, SC029-0040 who were related to decedent)) In 1992 BEFORE deductions. If you are unsure, please give an estimate. – continued</p>
2563-2564	2	<p><u>SC0889: -- continued</u> 10 \$11,500 to \$13,999 11 \$14,000 to \$16,499 12 \$16,500 to \$18,999 13 \$19,000 to \$20,999 14 \$21,000 to \$23,499 15 \$23,500 to \$24,999 16 \$25,000 to \$49,999 17 \$50,000 to \$74,999 18 \$75,000 or more 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p> <p>SC0890-0900: Probe using specific number of related persons in household including decedent :</p>
2565-2566	2	<p><i>Household = 1 person:</i></p> <p>SC890: Was the total 1992 income less than \$7,000 or more than \$7,000?</p> <p>01 Less 02 More</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2567-2568	2	<i>Household = 2 persons:</i> <u>SC0891: Was the total 1992 income less than \$9,000 or more than \$9,000?</u> 01 Less 02 More 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2569-2570	2	<i>Household = 3 persons:</i> <u>SC0892: Was the total 1992 income less than \$11,500 or more than \$11,500?</u> 01 Less 02 More 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range <u>SC0890-0900: Probe using specific number of related persons in household including decedent : -- continued</u>
2569-2570	2	<i>Household = 3 persons:</i> <u>SC0892: Was the total 1992 income less than \$11,500 or more than \$11,500? -- continued</u> 99 Non-response
2571-2572	2	<i>Household = 4 persons:</i> <u>SC0893: Was the total 1992 income less than \$14,000 or more than \$14,000?</u> 01 Less 02 More 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2573-2574	2	<i>Household = 5 persons:</i> <u>SC0894: Was the total 1992 income less. than \$16,500 or more than \$16,500?</u> 01 Less 02 More 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		99 Non-response
2575-2576	2	<i>Household = 6 persons:</i>
		<u>SC0895: Was the total 1992 income less than \$19,000 or more than \$19,000?</u>
		01 Less
		02 More
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range
		99 Non-response
2577-2578	2	<i>Household = 7 persons:</i>
		<u>SC0895: Was the total 1992 income less than \$21,000 or more than \$21,000?</u>
		01 Less
		02 More
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range
		99 Non-response
2579-2580	2	<i>Household = 8 persons:</i>
		<u>SC0897: Was the total 1992 income less than \$23,500 or more than \$23,500?</u>
		01 Less
		02 More
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range
		99 Non-response
2581-2582	2	<i>Household = 9 persons:</i>
		<u>SC0898: Was the total 1992 income less than \$25,000 or more than \$25,000?</u>
		01 Less
		02 More
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range
		99 Non-response
2583-2584	2	<i>Household = 10 persons:</i>
		<u>SC0899: Was the total 1992 income less than \$50,000 or more than \$50,000?</u>
		01 Less
		02 More

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2585-2586	2	<i>Household = 11 or more persons:</i> <u>SC0900: Was the total 1992 income less than \$75,000 or more than \$75,000?</u> 01 Less 02 More 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0901-0902: The (answer to SC0888-0900) was for (persons listed in Section A, SC0029-0040 who were related to decedent) and -- Now I'd like to ask for just -- total individual income in 1992. What was -- total income in 1992?</u>
2587-2592	6	<u>SC0901:</u> 000000-999999 Dollar amount 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response <u>SC0901-0902: The (answer to SC0888-0900) was for (persons listed in Section A, SC0029-0040 who were related to decedent) and -- Now I'd like to ask for just -- total individual income in 1992. What was -- total income in 1992? -- continued</u>
2593-2594	2	<u>SC0902:</u> 01 Less than \$1,000 02 \$1,000 to \$1,999 03 \$2,000 to \$2,999 04 \$3,000 to \$3,999 05 \$4,000 to \$4,999 06 \$5,000 to \$5,999 07 \$6,000 to \$6,999 08 \$7,000 to \$8,999 09 \$9,000 to \$11,499 10 \$11,500 to \$13,999 11 \$14,000 to \$16,499 12 \$16,500 to \$18,999 13 \$19,000 to \$20,999 14 \$21,000 to \$23,499 15 \$23,500 to \$24,999 16 \$25,000 to \$49,999 17 \$50,000 to \$74,999 18 \$75,000 or more

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2595-2596	2	<u>SC0903: Was -- total 1992 income less than \$7,000 or more than \$7,000?</u> 01 Less 02 More 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2597-2598	2	<u>SC0904: Was - total 1992 income less than \$3,000 or more than \$3,000?</u> 01 Less 02 More 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2599-2600	2	<u>SC0905: DURING THE LAST YEAR OF LIFE, was -- a participant in AFDC, Aid to Families with Dependent children?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2601-2602	2	<u>SC0906: DURING THE LAST YEAR OF LIFE, was -- a participant in WIC, supplemental food for Women, infants and Children?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
2603-2604	2	<p>SC0907: DURING THE LAST YEAR OF LIFE, was -- a participant in the food stamp program?</p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2605-2606	2	<p>SC0908: At the time of death, what was the total value of things, including a home, If any, owned by -- and -- parents or legal guardians? Subtract any debts and mortgages. Include cash in bank accounts, stocks, bonds, cars, Jewelry, business interests and so forth. If unsure, please make <u>your best estimate.</u></p> <p>01 Zero net worth (or loss) 02 \$1 to \$999 03 \$1,000 to \$1,999 04 \$2,000 to \$2,999 05 \$3,000 to \$3,999 06 \$4,000 to \$4,999 07 \$5,000 to \$24,999 08 \$25,000 to \$49,999 09 \$50,000 to \$99,999 10 \$100,000 to \$249,999 11 \$250,000 to \$499,999 12 \$500,000 or more 13 \$1 to \$4,999 94 Refused</p>
2605-2606	2	<p>SC0908: At the time of death, what was the total value of things, including a home, If any, owned by -- and -- parents or legal guardians? Subtract any debts and mortgages. Include cash in bank accounts, stocks, bonds, cars, Jewelry, business interests and so forth. If unsure, please make <u>your best estimate. -- continued</u></p> <p>95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2607-2608	2	<p>SC0909: At the time of death, what was the total value of things, including a home, If any, owned by -- (and (if respondent is decedent's spouse : you)/ -- husband/ -- wife)? Subtract any debts and mortgages. Include cash in bank accounts, stocks, bonds, cars, Jewelry, business interests and so forth. If unsure, please make your best <u>estimate.</u></p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		01 Zero net worth (or loss) 02 \$1 to \$999 03 \$1,000 to \$1,999 04 \$2,000 to \$2,999 05 \$3,000 to \$3,999 06 \$4,000 to \$4,999 07 \$5,000 to \$24,999 08 \$25,000 to \$49,999 09 \$50,000 to \$99,999 10 \$100,000 to \$249,999 11 \$250,000 to \$499,999 12 \$500,000 or more 13 \$1 to \$4,999 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2609-2610	2	SC0810: At the time of death, what was the total value of things, including a home, if any, owned by -- ? Subtract any debts and mortgages. Include cash in bank accounts, stocks, bonds, cars, jewelry, business interests and so forth. If unsure, please make your best estimate.
		01 Zero net worth (or loss) 02 \$1 to \$999 03 \$1,000 to \$1,999 04 \$2,000 to \$2,999 05 \$3,000 to \$3,999 08 \$4,000 to \$4,999 07 \$5,000 to \$24,999 08 \$25,000 to \$49,999 09 \$50,000 to \$99,999
2609-2610	2	SC0810: At the time of death, what was the total value of things, including a home, if any, owned by -- ? Subtract any debts and mortgages. Include cash in bank accounts, stocks, bonds, cars, jewelry, business interests and so forth. If unsure, please make your best estimate. -- continued
		10 \$100,000 to \$249,999 11 \$250,000 to \$499,999 12 \$500,000 or more 13 \$1 to \$4,999 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2611-2612	2	SC0911: At the time of death, did -- or (you/ -- Husband/ -- wife) own a home?

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File Location	Field size	Item and code outline
		01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2613-2614	2	<u>SC0912: At the time of death, did -- own a home?</u> 01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
		<u>SC0913-0914: What was the approximate value of the home at the time of -- death?</u>
2615-2620	6	<u>SC0913:</u> 000000-999999 Dollar amount 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response
2621-2622	2	<u>SC0914:</u> 00 \$1 million or more 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2623-2624	2	<u>SC0915: Were there any mortgages or home equity loans on the home at the time of -- death?</u> 01 Yes 02 No 03 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2625-2630	6	<u>SC0916: At the time of death, what was the total amount of any mortgages or home equity loans on the home?</u> 000000-999990 Dollar amount

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response
2631-2641	11	Reserved
2642-2654	13	Reserved
2655-2657	3	<u>SC0923: What is your age?</u> 001-125 Age in Years 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
2658-2659	2	<u>SC0924: Gender</u> 01 Male 02 Female 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response <u>SC0925-0927: What is the highest grade or year of regular school you ever attended?</u>
2660-2661	2	<u>SC0925:</u> 00 Never attended or only kindergarten 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2662-2663	2	<u>SC0926:</u> 01-12 Elementary/secondary 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
2664-2665	2	<u>SC0927:</u> 01-06 College 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

**1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent,
and Medical Examiner/Coroner Data File Documentation**

File Location	Field size	Item and code outline
2666-2667	2	<p><u>SC0928: Did you finish the (number in SC0925-0927) (grade/year)?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2668-2669	2	<p><u>SC0929: In some cases, we may need to get some additional information about decedents from others who knew them well. Did -- have any (other) close relative about -- own age or a good friend who knew -- well? Someone who is at least 18 years old?</u></p> <p>01 Yes, friend 02 Yes, relative 03 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2670-2671	2	<p><u>SC0930: How was this person related to --?</u></p> <p>01 Decedent's step-parent 02 Decedent's sibling 03 Decedent's in-law 04 Other relative</p>
2670-2671	2	<p><u>SC0930: How was this person related to --?</u> <u>-- continued</u></p> <p>94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2672-2673	2	<p><u>SC1000: What is (name of person) telephone number?</u></p> <p>01 Refused 02 Don't know 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2674-2675	2	<p><u>SC1001: If we contact (name of person) may we</u></p>

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File Location	Field size	Item and code outline
		<p><u>Tell (him/her) that you gave us (his/her)name?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2676-2677	2	<p><u>SC1002: Do you agree with the authorization statement which just read?</u></p> <p>01 Yes 02 No 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2678-2679	2	<p><u>SC1003: Marie (X) whether authorization given or refused.</u></p> <p>01 Authorization given 02 Authorization refused 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
2680-2681	2	<p><u>Current Data Year</u></p> <p>93 1993 Blank Not matched</p>
2682	1	<p><u>Reporting Area</u></p> <p>The following codes used with the State of Occurrence codes, locations 3366-3367, identify separate reporting areas.</p> <p>1 Bronx borough, Bronx county 2 Brooklyn borough, Kings county 3 Manhattan borough, New York county 4 Queens borough, Queens county 5 Staten Island borough, Richmond county</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		6 Chicago 0 All other areas Blank Not matched
2683-2689	7	<u>Unique number</u> 0000000 Number Blank Not matched
2690	1	<u>Record Type</u> 1 RESIDENTS -- State and County of occurrence and residence are the same. 2 NONRESIDENTS -- State and/or County of occurrence and residence are different. Blank Not matched
2691	1	<u>Resident Status</u> 1 RESIDENTS -- State and County of occurrence and residence are the same. 2 INTRASTATE NONRESIDENTS -- State of occurrence and residence are the same, but County is different 3 INTERSTATE NONRESIDENTS -- State of occurrence and residence are different, but both are in the U.S. 4 FOREIGN RESIDENTS -- State of occurrence is one of the 50 States
2691	1	<u>Resident Status – continued</u> or the District of Columbia, but place of residence is outside of the U.S. Blank Not matched
2692-2693	2	<u>PLACE OF OCCURRENCE</u> <u>State of Occurrence</u> 01 Alabama 02 Alaska 03 Arizona 04 Arkansas 05 California 06 Colorado 07 Connecticut 08 Delaware 09 District of Columbia 10 Florida 11 Georgia 12 Hawaii 13 Idaho

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File Location	Field size	Item and code outline
		14 Illinois 15 Indiana 16 Iowa 17 Kansas 18 Kentucky 19 Louisiana 20 Maine 21 Maryland 22 Massachusetts 23 Michigan 24 Minnesota 25 Mississippi 26 Missouri 21 Montana 28 Nebraska 29 Nevada 30 New Hampshire 31 New Jersey 32 New Mexico 33 New York 34 North Carolina 35 North Dakota 36 Ohio 37 Oklahoma 38 Oregon 39 Pennsylvania 40 Rhode Island 41 South Carolina 42 South Dakota 43 Tennessee 44 Texas 45 Utah 46 Vermont 47 Virginia 48 Washington 49 West Virginia 50 Wisconsin 51 Wyoming Blank Not matched
2694-2696	3	<u>County of Occurrence</u> Counties and country equivalents (independent and Coextensive cities) are numbered alphabetically within each State. See <i>Public Use Data File Documentation, Mortality Detail, 1993 Data</i> for detailed codes. (Note: To uniquely identify a county, both the State and County codes must be used.) 000 Number Blank Not matched
2697	1	<u>Region</u> 1 Northeast 2 Midwest

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File Location	Field size	Item and code outline
		3 South 4 West Blank Not matched
2698-2699	2	Division and State of occurrence Subcode <u>(3312 is Division, 3313 is State)</u> <u>New England</u> 11 Maine 12 New Hampshire 13 Vermont 14 Massachusetts 15 Rhode Island 16 Connecticut <u>Middle Atlantic</u> 21 New York 22 New Jersey 23 Pennsylvania <u>East North Central</u> 31 Ohio 32 Indiana 33 Illinois 34 Michigan 35 Wisconsin <u>West North Central</u> 41 Minnesota 42 Iowa 43 Missouri 44 North Dakota 45 South Dakota <u>PLACE OF OCCURRENCE – continued</u>
2698-2699	2	Division and State of occurrence Subcode <u>(3312 is Division, 3313 is State) -- continued</u> <u>West North Central -- continued</u> 46 Nebraska 47 Kansas <u>South Atlantic</u> 51 Delaware 52 Maryland 53 District of Columbia 54 Virginia 55 West Virginia 56 North Carolina 51 South Carolina 58 Georgia 59 Florida <u>East South Central</u> 61 Kentucky

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File Location	Field size	Item and code outline
		62 Tennessee 63 Alabama 64 Mississippi 71 Arkansas 72 Louisiana 73 Oklahoma 74 Texas <u>Mountain</u> 81 Montana 82 Idaho 83 Wyoming 84 Colorado 85 New Mexico 86 Arizona 87 Utah 88 Nevada <u>Pacific</u> 91 Washington 92 Oregon 93 California 94 Alaska 95 Hawaii Blank Not matched
2700-2701	2	<u>Expanded State of Occurrence Code</u> 01 Alabama 02 Alaska 03 Arizona 04 Arkansas 05 California 06 Colorado 07 Connecticut 08 Delaware 09 District of Columbia. 10 Florida 11 Georgia 12 Hawaii 13 Idaho 14 Illinois 15 Indiana 16 Iowa 17 Kansas 18 Kentucky 19 Louisiana 20 Maine 21 Maryland 22 Massachusetts 23 Michigan 24 Minnesota 25 Mississippi 26 Missouri 27 Montana 28 Nebraska

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File Location	Field size	Item and code outline
		29 Nevada
		30 New Hampshire
		31 New Jersey
		32 New Mexico
		33 New York
		34 New York City
		35 North Carolina
		36 North Dakota
		37 Ohio
		38 Oklahoma
		39 Oregon
		40 Pennsylvania
		41 Rhode Island
		42 South Carolina
		43 South Dakota
		44 Tennessee
		45 Texas
		46 Utah
		47 Vermont
		48 Virginia
		49 Washington
		50 West Virginia
		51 Wisconsin
		52 Wyoming
		Blank Not matched

PLACE OF RESIDENCE

2702-2703	2	<u>State of Residence</u> 01 Alabama 02 Alaska 03 Arizona 04 Arkansas 05 California 06 Colorado 07 Connecticut 08 Delaware 09 District of Columbia 10 Florida 11 Georgia 12 Hawaii 13 Idaho 14 Illinois 15 Indiana 16 Iowa 17 Kansas 18 Kentucky 19 Louisiana 20 Maine 21 Maryland 22 Massachusetts 23 Michigan 24 Minnesota 25 Mississippi 26 Missouri
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File Location	Field size	Item and code outline
		27 Montana 28 Nebraska 29 Nevada 30 New Hampshire 31 New Jersey 32 New Mexico 33 New York 34 North Carolina 35 North Dakota 36 Ohio 37 Oklahoma 38 Oregon 39 Pennsylvania 40 Rhode Island 41 South Carolina 42 South Dakota 43 Tennessee 44 Texas 45 Utah 46 Vermont 47 Virginia 48 Washington 49 West Virginia 50 Wisconsin 51 Wyoming 52 Puerto Rico 53 Virgin Islands 54 Guam 55 Canada 56 Cuba 57 Mexico 59 Remainder of the world Blank Not matched <u>PLACE OF RESIDENCE -- continued</u>
2704-2706	3	<u>County of Residence</u> Counties and county equivalents (independent and coextensive cities) are numbered alphabetically within each State. See <i>Public Use Data File Documentation, Mortality Detail, 1993 Data</i> for detailed codes. (Note: To uniquely identify a county, both the State and county codes must be used.) 000 Number zzz Foreign residents Blank Not matched
2707-2709	3	<u>City of Residence</u> Cities are numbered alphabetically within each State and identify each city with a population of 10,000 or more in 1980. See <i>Public Use Data File Documentation, Mortality Detail, 1993 Data</i> for detailed codes. (Note: To uniquely identify a city, both the State and city

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File Location	Field size	Item and code outline
		<p>codes must be used. State, county and city codes may also be used.)</p> <p>999 Balance of county zzz Foreign residents Blank Not matched</p>
2710	1	<p><u>Population Size of City of Residence</u> (Based on the results of the 1980 Census)</p> <p>0 Place of 1,000,000 or more 1 Place of 500,000 to 1,000,000 2 Place of 250,000 to 500,000 3 Place of 100,000 to 250,000 4 Place of 50,000 to 100,000 5 Place of 25,000 to 50,000 6 Place of 10,000 to 25,000 9 All other areas in Z Foreign residents Blank Not matched</p>
2711	1	<p><u>Metropolitan -- Nonmetropolitan County of residence</u></p> <p>1 Metropolitan county 2 Nonmetropolitan county z Foreign residents Blank Not matched</p>
2712	1	<p><u>Region</u></p> <p>1 Northeast 2 Midwest 3 South 4 West Blank Not matched</p>
		<p><u>PLACE OF RESIDENCE -- continued</u></p>
2713-2714	2	<p>Division and State of residence subcode (<u>3387 is Division. 3388 is State</u>)</p> <p>00 Foreign residents</p> <p><u>New England</u></p> <p>11 Maine 12 New Hampshire 13 Vermont 14 Massachusetts 15 Rhode Island 16 Connecticut</p> <p><u>Middle Atlantic</u></p> <p>21 New York 22 New Jersey 23 Pennsylvania</p>

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File Location	Field size	Item and code outline
		<u>East North Central</u> 31 Ohio 32 Indiana 33 Illinois 34 Michigan 35 Wisconsin
		<u>West North Central</u> 41 Minnesota 42 Iowa 43 Missouri 44 North Dakota 45 South Dakota 46 Nebraska 47 Kansas
		<u>South Atlantic</u> 51 Delaware 52 Maryland 53 District of Columbia 54 Virginia 55 West Virginia 56 North Carolina 57 South Carolina 58 Georgia 59 Florida 61 Kentucky 62 Tennessee 63 Alabama 64 Mississippi
		<u>West South Central</u> 71 Arkansas 72 Louisiana 73 Oklahoma 74 Texas
		<u>PLACE OF RESIDENCE -- continued</u>
2713-2714	2	Division and State of residence subcode <u>(3387 is Division, 3388 is State) -- continued</u>
		<u>Mountain</u> 81 Montana 82 Idaho 83 Wyoming 84 Colorado 85 New Mexico 86 Arizona 87 Utah 88 Nevada
		<u>Pacific</u> 91 Washington 92 Oregon

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File Location	Field size	Item and code outline
		93 California
		94 Alaska
		95 Hawaii
		Blank Not matched
2715-2716	2	<u>Expanded State of Residence Code</u>
		01 Alabama
		02 Alaska
		03 Arizona
		04 Arkansas
		05 California
		06 Colorado
		07 Connecticut
		08 Delaware
		09 District of Columbia
		10 Florida
		11 Georgia
		12 Hawaii
		13 Idaho
		14 Illinois
		15 Indiana
		16 Iowa
		17 Kansas
		18 Kentucky
		19 Louisiana
		20 Maine
		21 Maryland
		22 Massachusetts
		23 Michigan
		24 Minnesota
		25 Mississippi
		26 Missouri
		27 Montana
		28 Nebraska
		29 Nevada
		30 New Hampshire
		31 New Jersey
		32 New Mexico
		33 New York
		34 New York City
		35 North Carolina
		36 North Dakota
		37 Ohio
		38 Oklahoma
		39 Oregon
		40 Pennsylvania
		41 Rhode island
		42 South Carolina
		43 South Dakota
		44 Tennessee
		45 Texas
		46 Utah
		47 Vermont
		48 Virginia
		49 Washington

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		50 West Virginia 51 Wisconsin 52 Wyoming 53 Puerto Rico 54 Virgin Islands 55 Guam 56 Canada 57 Cuba 58 Mexico 60 Remainder of the world Blank Not matched
2717-2719	3	<p><u>NCHS PSMA/MSA of Residence</u></p> <p>Primary Metropolitan Statistical Areas and Metropolitan Statistical Areas are those defined by the U.S. Office of Management and Budget (OMB) as of June 30, 1990. For New England, the New England County Metropolitan Areas (NECMA) are used. See <i>Public Use Data File Documentation, Mortality Detail, 1993 Data</i> for detailed codes.</p> 000 Nonmetropolitan counties 001-320 Number zzz Foreign residents 999 Unknown Blank Not matched
2720	1	<p><u>Population size of County of Occurrence</u> (Based on the results of the 1980 Census)</p> 0 County of 1,000,000 or more 1 County of 500,000 to 1,000,000 2 County of 250,000 to 500,000 3 County of 100,000 to 250,000 4 County of 50,000 to 100,000 5 County of 25,000 to 50,000 6 County of less than 25,000 Blank Not matched
2721	1	<p><u>Population Size of County of Residence</u> (Based on the results of the 1980 Census)</p> 0 County of 1,000,000 or more 1 County of 500,000 to 1,000,000 2 County of 250,000 to 500,000 3 County of 100,000 to 250,000 4 County of 150,000 to 100,000 5 County of 25,000 to 50,000 6 County of less than 25,000 Z Foreign residents Blank Not matched
2722	1	<p><u>PSMA/MSA Population Size</u></p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		(Based on 1990 Census county population counts)
		1 Area of 250,000 or more 2 Area of 100,000 to 250,000 3 Area of Less than 100,000 9 Non metropolitan area Z Foreign resident Blank Not matched
2723-2724	2	<u>Education</u> 00 No formal education 01-08 Years of elementary school 09 1 year of high school 10 2 years of high school 11 3 years of high school 12 4 years of high school 13 1 year of college 14 2 years of college 15 3 years of college 16 4 years of college 17 5 or more years of college 99 Not stated Blank Not matched
2725	1	<u>Education Recode</u> 1 0 - 8 years 2 9 -11 years 3 12 years 4 13 -15 years 5 16 years or more 6 Not stated Blank Not stated
2726-2727	2	<u>DATE OF DEATH</u> <u>Month</u> 01 January 02 February 03 March 04 April 05 May 06 June 07 July 08 August 09 September 10 October 11 November 12 December Blank Not matched
2728-2729	2	<u>Day</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		01-31 Day 99 Not stated day of death Blank Not matched
2730	1	<u>SEX</u> 1 Male 2 Female Blank Not matched
		<u>RACE</u>
2731-2732	2	<u>Detail race</u> 01 White 02 Black 03 American Indian (includes Aleuts and Eskimos) 04 Chinese 05 Japanese 06 Hawaiian (includes Part-Hawaiian) 07 Filipino 18 Asian Indian 28 Korean 38 Samoan 48 Vietnamese 58 Guamanian 68 Other Asian or Pacific Islander in areas reporting codes 78 Combined other Asian or Pacific Islander, includes codes for areas that do not report them separately Blank Not matched
2733	1	<u>Race Recode 3</u> 1 White 2 Races other than White or Black 3 Black Blank Not matched
		<u>RACE -- continued</u>
2734	1	<u>Race recode 2</u> 1 White 2 All other races Blank Not matched
		<u>Reported age</u>
2735-2737	3	<u>Detail Age</u> 015-140 Age 999 Age not stated Blank Not matched
2738-2739	2	<u>Age Recode 52</u> 29 15 - 19 years

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		30 20 - 24 years
		31 25 - 29 years
		32 30 - 34 years
		33 35 - 39 years
		34 40 - 44 years
		35 45 - 49 years
		36 50 - 54 years
		37 55 - 59 years
		38 60 - 64 years
		39 65 - 69 years
		40 70 - 74 years
		41 75 - 79 years
		42 80 - 84 years
		43 85 - 89 years
		44 90 - 94 years
		45 95 - 99 years
		46 100 - 104 years
		47 105 - 109 years
		48 110 - 114 years
		49 115 - 119 years
		50 120 - 124 years
		51 125 years and over
		52 Age not stated
		Blank Not matched
2740-2741	2	<u>Age Recode 27</u>
		09 15 - 19 years
		10 20 - 24 years
		11 25 - 29 years
		12 30 - 34 years
		13 35 - 39 years
		14 40 - 44 years
		15 45 - 49 years
		16 50 - 54 years
		17 55 - 59 years
		18 60 - 64 years
		19 65 - 69 years
		20 70 - 74 years
		21 75 - 79 years
		22 80 - 84 years
		23 85 - 89 years
		24 90 - 94 years
		25 95 - 99 years
		26 100 years and over
		27 Age not stated
		Blank Not matched
2742-2743	2	<u>Age Recode 12</u>
		04 15 - 24 years
		05 25 - 34 years
		06 35 - 44 years
		07 45 - 54 years
		08 55 - 64 years
		09 65 - 74 years
		10 75 - 84 years

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		11 85 years and over 12 Age not stated Blank Not matched
2744	1	<u>Place of Death and Decedent's Status</u> 1 Hospital, Clinic or Medical Center - Inpatient 2 Hospital, Clinic or Medical Center - Outpatient or admitted to Emergency Room 3 Hospital, Clinic or Medical Center - Dead on Arrival 4 Hospital, Clinic or Medical Center - Patient status unknown 5 Nursing home 6 Residence 7 Other 9 Place of death unknown Blank Not matched
2745	1	<u>Reserved Position</u>
2746	1	<u>Marital Status</u> 1 Never married, single 2 Married 3 Widowed 4 Divorced 8 Marital Status not on certificate 9 Marital Status not stated Blank Not matched
2747-2748	2	<u>State of Birth</u> 01 Alabama 02 Alaska 03 Arizona 04 Arkansas 05 California 06 Colorado 07 Connecticut 08 Delaware 09 District of Columbia 10 Florida 11 Georgia 12 Hawaii 13 Idaho 14 Illinois 15 Indiana

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		16 Iowa 17 Kansas 18 Kentucky 19 Louisiana 20 Maine 21 Maryland 22 Massachusetts 23 Michigan 24 Minnesota 25 Mississippi 26 Missouri 27 Montana 28 Nebraska 29 Nevada 30 New Hampshire 31 New Jersey 32 New Mexico 33 New York 34 North Carolina 35 North Dakota 36 Ohio 37 Oklahoma 38 Oregon 39 Pennsylvania 40 Rhode Island 41 South Carolina 42 South Dakota 43 Tennessee 44 Texas 45 Utah 46 Vermont 47 Virginia 48 Washington 49 West Virginia 50 Wisconsin 51 Wyoming 52 Puerto Rico 53 Virgin Islands 54 Guam 55 Canada
2747-2748	2	<u>State of Birth -- continued</u> 56 Cuba 57 Mexico 59 Remainder of the world 99 State of birth unknown Blank Not matched
2749-2750	2	<u>Hispanic Origin</u> 00 Non - Hispanic 01 Mexican 02 Puerto Rican 03 Cuban 04 Central or South American

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		05 Other or unknown Hispanic 99 Unknown Blank Not matched
2751	1	<u>Hispanic Origin/Race Recode</u> 1 Mexican 2 Puerto Rican 3 Cuban 4 Central or South American 5 Other or unknown Hispanic 6 Non - Hispanic white 7 Non - Hispanic black 8 Non - Hispanic other races 9 Hispanic origin unknown Blank Not matched
2752	1	<u>Day of Week of Death</u> 1 Sunday 2 Monday 3 Tuesday 4 Wednesday 5 Thursday 6 Friday 7 Saturday 9 Unknown Blank Not matched
2753	1	<u>Autopsy Performed</u> 1 Yes 2 No 8 Autopsy performed not on certificate 9 Autopsy performed not stated Blank Not matched
2754-2756	3	<u>Kind of Business or Industry</u> 000 See locations 2840-2842 for detailed codes Blank Not matched
2757-2759	3	<u>Usual Occupation</u> 000 See locations 2753-2755 for detailed codes Blank Not matched
2760-2762	3	<u>52 Cause Recode</u> 010 Tuberculosis, including late effects (010-018, 137) 020 Septicemia (038) <u>Malignant neoplasms, including neoplasms of</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<u>lymphatic and hematopoietic tissues (140-208)</u>
		040 Malignant neoplasms of lip, oral cavity, and pharynx (140-149)
		050 Malignant neoplasm of esophagus (150)
		060 Malignant neoplasm of stomach (151)
		070 Malignant neoplasm of colon (153)
		080 Malignant neoplasms of rectum, rectosigmoid junction, and anus (154)
		090 Malignant neoplasms of liver and intrahepatic bile ducts (155)
		100 Malignant neoplasm of gallbladder and extrahepatic bile ducts (156)
		110 Malignant neoplasm of pancreas (157)
		120 Malignant neoplasm of larynx (161)
		130 Malignant neoplasms of trachea, bronchus, and lung (162)
		140 Malignant neoplasm of pleura (163)
		150 Malignant neoplasms of bone and articular cartilage (170)
		160 Malignant neoplasms of connective and other soft tissue (171)
		170 Malignant neoplasm of skin (172)
		180 Malignant neoplasm of female breast (174)
		190 Malignant neoplasm of cervix uteri (180)
		200 Malignant neoplasm of body of uterus (182)
		210 Malignant neoplasms of ovary and other uterine adnexa (183)
		220 Malignant neoplasm of prostate (185)
		230 Malignant neoplasm of testis (186)
		240 Malignant neoplasm of bladder (188)
		250 Malignant neoplasms of kidney and other and unspecified urinary organs (189)

2760-2762 3

52 Cause Recode – continued

Malignant neoplasms, including neoplasms of Lymphatic and hematopoietic tissues (140-208) -- continued

260	Malignant neoplasms of brain and other and unspecified parts of nervous system (191-192)
270	Hodgkin's disease (201)
280	Malignant lymphoma other than

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		Hodgkin's disease (200, 202)
	290	Multiple myeloma and immunoproliferative neoplasms (203)
	300	Leukemia (204-208)
	310	All other malignant neoplasms, including neoplasms of lymphatic and hematopoietic tissues (152, 158-160, 164-165, 173, 175, 179, 181, 184, 187, 190, 193-199)
	320	Diabetes mellitus (250)
	330	Aplastic anemia (284)
		<u>Diseases of heart (390-398, 402, 404-429)</u>
	350	Hypertensive heart disease (402)
		<u>Ischemic heart disease (410-414)</u>
	380	Acute myocardial infarction (410)
	390	All other ischemic heart disease (411-414)
	400	All other diseases of heart (390-398, 415-429)
	410	Hypertension with or without renal disease (401, 403)
	420	Cerebrovascular diseases (430-438)
	430	Atherosclerosis (440)
	440	Pneumonia and influenza (480-487)
	450	Chronic obstructive pulmonary diseases and allied conditions (490-496)
	460	Pneumoconioses and pneumopathy due to inhalation of other dust (500-505)
	470	Ulcer of stomach and duodenum (531-533)
	480	Chronic liver disease and cirrhosis (571)
	490	Nephritis, nephritic syndrome, and nephrosis (580-589)
2760-2762	3	<u>52 Cause Recode – continued</u>
		<u>Accidents and adverse affects (E800-E949)</u>
	510	Motor vehicle accidents (E810-E825)
	520	Accidents mainly of industrial type (E846, E881-E882, E916-E919, E921, E923-E926)

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		530 Other accidents and adverse effects (E800-E807, E826-E845, E847-E880, E883-E915, E920, E922, E927-E949)
		540 Suicide (E950-E959)
		550 Homicide and legal intervention (E960-E978)
		560 All other diseases and external causes (residual)
		Blank Not matched
		<u>DATE OF BIRTH</u>
2763-2764	2	<u>Month</u> 01 January 02 February 03 March 04 April 05 May 06 June 07 July 08 August 09 September 10 October 11 November 12 December 99 Unknown
2765-2766	2	<u>Day</u> 01-31 Day 99 Unknown day of birth Blank Not matched
2767-2770	4	<u>Year</u> 1858- 1978 Year 9999 Unknown Blank Not matched
		<u>DATE OF DATA RECEIPT</u>
2771-2772	2	<u>Month</u> 01 January 02 February 03 March 04 April 05 May 06 June 07 July 08 August 09 September 10 October 11 November 12 December

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File Location	Field size	Item and code outline
		Blank Not matched
2773-2774	2	<u>Day</u> 01-31 Day Blank Not matched
2775	1	<u>Year</u> 3 1993 4 1994 Blank Not matched
FEDERAL INFORMATION PROCESSING STANDARDS (FIPS) GEOGRAPHIC CODES For an explanation of FIPS codes, reference should be made to various National Bureau of Standards (NBS) publications.		
2776-2777	2	<u>State of Occurrence</u> 01 Alabama 02 Alaska 04 Arizona 05 Arkansas 06 California 08 Colorado 09 Connecticut 10 Delaware 11 District of Columbia 12 Florida 13 Georgia 15 Hawaii 16 Idaho 17 Illinois 18 Indiana 19 Iowa 20 Kansas 21 Kentucky 22 Louisiana 23 Maine 24 Maryland 25 Massachusetts 26 Michigan 27 Minnesota FEDERAL INFORMATION PROCESSING STANDARDS (FIPS) GEOGRAPHIC CODES -- continued For an explanation of FIPS codes, reference should be made to various National Bureau of Standards (NBS) publications.
2776-2777	2	<u>State of Occurrence -- continued</u> 28 Mississippi 29 Missouri 30 Montana

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File Location	Field size	Item and code outline
		31 Nebraska 32 Nevada 33 New Hampshire. 34 New Jersey 35 New Mexico 36 New York 37 North Carolina 38 North Dakota 39 Ohio 40 Oklahoma 41 Oregon 42 Pennsylvania 44 Rhode Island 45 South Carolina 46 South Dakota 47 Tennessee 48 Texas 49 Utah 50 Vermont 51 Virginia 53 Washington 54 West Virginia 55 Wisconsin 56 Wyoming Blank Not matched
2778-2780	3	<u>County of Occurrence</u> See <i>Public Use Data File Documentation, Mortality Detail, 1993 Data</i> for detailed codes. 000 Number Blank Not matched
2781-2782	2	<u>State of Residence</u> 00 Foreign residents 01 Alabama 02 Alaska 04 Arizona 05 Arkansas. 06 California 08 Colorado 09 Connecticut 10 Delaware 11 District of Columbia 12 Florida 13 Georgia FEDERAL INFORMATION PROCESSING STANDARDS (FIPS) GEOGRAPHIC CODES -- continued For an explanation of FIPS codes, reference should be made to various National Bureau of Standards (NBS) publications.
2781-2782	2	<u>State of Residence – continued</u> 15 Hawaii

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		16 Idaho 17 Illinois 18 Indiana 19 Iowa 20 Kansas 21 Kentucky 22 Louisiana 23 Maine 24 Maryland 25 Massachusetts 26 Michigan 27 Minnesota 28 Mississippi 29 Missouri 30 Montana 31 Nebraska 32 Nevada 33 New Hampshire 34 New Jersey 35 New Mexico 36 New York 37 North Carolina 38 North Dakota 39 Ohio 40 Oklahoma 41 Oregon 42 Pennsylvania 44 Rhode Island 45 South Carolina 46 South Dakota 47 Tennessee 48 Texas 49 Utah 50 Vermont 51 Virginia 53 Washington 54 West Virginia 55 Wisconsin 56 Wyoming Blank Not matched
2783-2785	3	<u>County of Residence</u> See <i>Public Use Data File Documentation, Mortality Detail, 1993 Data</i> for detailed codes. 000 Foreign residents 001- Number Blank Not matched FEDERAL INFORMATION PROCESSING STANDARDS (FIPS) GEOGRAPHIC CODES -- continued For an explanation of FIPS codes, reference should be made to various National Bureau of Standards (NBS) publications.

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
2786-2789	4	<p><u>PMSA/MSA of Residence</u> Primary Metropolitan Statistical Areas and Metropolitan Statistical Areas are those defined by the U.S. Office of Management and Budget (OMB) as of June 30, 1990. For New England, the New England County Metropolitan Areas (NECMA) are used. See <i>Public Use Data File Documentation, Mortality Detail, 1993 Data</i> for detailed codes.</p> <p>0000 Nonmetropolitan counties or foreign residents 0040-9360 Number Blank Not matched</p>
2790	1	<p><u>Reserved Position</u></p>
2791-2792	2	<p><u>CMSA of Residence</u> Consolidated Metropolitan Statistical Areas are groupings of certain Primary Metropolitan Statistical Areas and are defined by the U.S. Office of Management and Budget (OMB) as of June 30, 1990.</p> <p>00 Not a CMSA 07 Boston Lawrence-Salem, MA-NH 10 Buffalo Niagara Falls, NY 14 Chicago - Gary-Lake County, IL-IN WI 21 Cincinnati - Hamilton, OH-KY-IN 28 Cleveland - Akron-Lorain, OH 31 Dallas – Fort Worth, TX 34 Denver - Boulder, CO 35 Detroit - Ann Arbor, MI 41 Hartford - New Britain-Middletown, CT 42 Houston - Galveston-Brazoria, TX 49 Los Angeles - Anaheim-Riverside, CA 56 Miami - Fort Lauderdale, FL 63 Milwaukee - Racine, WI 70 New York - Northern New Jersey-Long Island, NY-NI-CT 77 Philadelphia - Wilmington-Trenton, PA-NJ-DE-MD 78 Pittsburg - Beaver Valley, PA 79 Portland - Vancouver, OR-WA 80 Providence - Pawtucket-Fall River, RI-MA</p>
2791-2792	2	<p><u>CMSA of Residence – continued</u> Consolidated Metropolitan Statistical Areas are groupings of certain Primary Metropolitan Statistical Areas and are defined by the U.S. Office of Management and Budget (OMB) as</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		of June 30, 1990.
		84 San Francisco -Oakland-San Jose, CA
		91 Seattle - Tacoma, WA
		Blank Not matched
2793	1	<u>Injury at Work</u>
		1 Yes
		2 No
		9 Unknown
		Blank Not matched
2794	1	<u>Place of Accident for Causes E850-E869 and E880-E928</u>
		Blank Causes other than E850-E869 and E880-E928, and not matched
		0 Home
		1 Farm
		2 Mine and Quarry
		3 Industrial Place and Premises
		4 Place for Recreation and Sport
		5 Street and Highway
		6 Public Building
		7 Resident Institution
		8 Other Specified Places
		9 Place of Accident not specified
		<u>UNDERLYING CAUSE OF DEATH</u>
2795-2798	4	<u>Underlying Cause of Death</u>
		<u>ICD-9 cause</u> Numeric, one decimal implied See the " <i>International Classification of Diseases</i> ," 1975 Revision, Volume 1. For injuries and poisoning, the external cause is coded (E800-E999). These positions do not include the letter E for the external cause of injury. For those causes that do not have a 4th digit, location 901 is blank.
2799-2803	5	<u>282 Cause recode</u> ICD-9 cause codes given in parentheses after cause description
		<u>Infectious and parasitic diseases(001-139)</u>
		<u>Intestinal Infectious diseases</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<p style="text-align: center;"><u>(001-009)</u></p> <p>00300 Cholera and typhoid and paratyphoid fevers (001-002)</p> <p>00400 Shigellosis (004)</p> <p>00500 Other salmonella infections and other food poisoning (bacterial) (003, 005)</p> <p>00600 Amebiasis (006)</p> <p>00700 Intestinal infections due to other specified organisms (007-008)</p> <p>800 Ill-defined intestinal infections (009)</p> <p style="text-align: center;"><u>Tuberculosis (010-018)</u></p> <p>01000 Tuberculosis of respiratory system (010-012)</p> <p>01100 Other tuberculosis (013-018)</p> <p style="text-align: center;"><u>Zoonotic and other bacterial diseases (020-041)</u></p> <p>01300 Brucellosis (023)</p> <p>01400 Diphtheria (032)</p> <p>01500 Whooping cough (033)</p> <p>01600 Streptococcal sore throat, scarlatina, and erysipelas (034-035)</p> <p>01700 Meningococcal infection (036)</p> <p>01800 Tetanus (037)</p> <p>01900 Septicemia (038)</p> <p>02000 All other bacterial diseases (020-022, 024-031, 039-041)</p> <p style="text-align: center;"><u>Viral diseases (*042-*044.045-079)</u></p> <p>02200 Acute poliomyelitis (045)</p> <p>02300 Smallpox (050)</p> <p>02400 Measles (055)</p> <p>02500 Rubella (056)</p> <p style="text-align: center;"><u>UNDERLYING CAUSE OF DEATH -- continued</u></p> <p style="text-align: center;"><u>282 Cause recode – continued</u></p> <p>02600 Arthropod-borne encephalitis (062-064)</p> <p>02700 Viral hepatitis (070)</p> <p>02800 Other viral diseases (*042-*044, 046-049, 051-054, 057-061, 065-066, 071-079)</p> <p style="text-align: center;"><u>Rickettsioses and other arthropod-borne diseases (080-088)</u></p> <p>03000 Typhus and other rickettsioses (080-083)</p> <p>03100 Malaria (084)</p> <p>03200 All other arthropod-borne diseases (085-088)</p>
2799-2803	5	

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<u>Syphilis and other venereal diseases (090-099)</u> <u>Syphilis (090-097)</u> 03500 Cardiovascular syphilis (093) 03600 Neurosyphilis (094) 03700 All other syphilis (090-091, 095-097) 03800 Gonococcal infections (098) 03900 Other venereal diseases (099) <u>Other infectious and parasitic diseases and late effects of infectious and parasitic diseases (100-139)</u> 04100 Mycoses (110-118) 04200 Helminthiasis (120-129) 04300 Late effects of tuberculosis (137) 04400 Late effects of acute poliomyelitis (138) 04500 All other infectious and parasitic diseases and late effects of other infectious and parasitic diseases (100-104, 130-136, 139) <u>Neoplasms (140-239)</u> <u>Malignant neoplasms, including neoplasms of lymphatic and hematopoietic tissues (140-208)</u> <u>Malignant neoplasms of lip, oral cavity, and pharynx (140-149)</u> 04900 Of lip (140) 05000 Of tongue (141) 05100 Of pharynx (146-149.0)
		<p style="text-align: center;"><u>UNDERLYING CAUSE OF DEATH -- continued</u></p> <p><u>282 Cause recode -- continued</u></p> <p style="text-align: center;"><u>Neoplasms (140-239) - continued</u></p> <p style="text-align: center;"><u>Malignant neoplasms, including neoplasms of lymphatic and hematopoietic tissues (140-208) -- continued</u></p> <p style="text-align: center;"><u>Malignant neoplasms of lip, oral cavity, and pharynx (140-149) -- continued</u></p> 05200 Of other and ill-defined sites within the lip, oral cavity, and pharynx (142-145, 149.1-149.9) <u>Malignant neoplasms of digestive</u>
2799-2803	5	

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<u>organs and peritoneum (150-159)</u> 05400 Of esophagus (150) 05500 Of stomach (151) 05600 Of small intestine, including duodenum (152)
		<u>Of colon (153)</u> 05800 Hepatic and splenic flexures and transverse colon (153.0-153.1, 153.7) 05900 Descending colon (153.2) 06000 Sigmoid colon (153.3) 06100 Cecum, appendix, and ascending colon (153.4-153.6) 06200 Other and colon, unspecified (153.8-153.9) 06300 Of rectum, rectosigmoid junction, and anus (154)
		<u>Of liver and intrahepatic bile ducts (155)</u> 06500 Liver, primary (155.0) 06600 Intrahepatic bile ducts (155.1) 06700 Liver, not specified as primary or secondary (155.2) 06800 Of gallbladder and extrahepatic bile ducts (156) 06900 Of pancreas (157) 07000 Of retro peritoneum, peritoneum, and other and ill-defined sites within the digestive organs and peritoneum (158-159)
		<u>Malignant neoplasms of respiratory and intrathoracic organs (160-165)</u> 07200 Of larynx (161) 07300 Of trachea, bronchus, and lung (162)
		<u>UNDERLYING CAUSE OF DEATH -- continued</u>
2799-2803	5	<u>282 Cause recode – continued</u> <u>Malignant neoplasms of respiratory and intrathoracic organs (160-165) -- continued</u> 07400 Of all other and ill-defined sites within the respiratory system and intrathoracic organs (160, 163-165)
		<u>Malignant neoplasms of bone, connective tissue. Skin, and breast (170-175)</u> 07600 Of bone and articular cartilage (170) 07700 Of connective and other soft tissue

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
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(171)
 07800 Melanoma of skin (172)
 07900 Other malignant neoplasms of skin
 (173)
 08000 Of female breast (174)
 08100 Of male breast (175)

Malignant neoplasms of genital
organs (179-187)
 08300 Of cervix uteri (180)
 08400 Of other parts of uterus (179,
 181-182)
 08500 Of ovary and other uterine adnexa
 (183)
 08600 Of other and unspecified female
 genital organs (184)
 08700 Of prostate (185)
 08800 Of testis (186)
 08900 Of penis and other male genital
 organs (187)

Malignant neoplasms of urinary
organs (188-189)
 09100 Of bladder (188)
 09200 Of kidney and other and unspecified
 Urinary organs (189)

Malignant neoplasms of other and
unspecified sites (190-199)
 09400 Of eye (190)
 09500 Of brain(191)
 09600 Of other and unspecified parts of
 nervous system (192)
 09700 Of thyroid gland and other endocrine
 glands and related structures
 (193-194)
 09800 Of all other and unspecified sites
 (195-199)

UNDERLYING CAUSE OF DEATH -- continued

2799-2803 5

282 Cause recode – continued

Malignant neoplasms of lymphatic
and hematopoietic tissues (200-208)
 10000 Lymphosarcoma and
 reticulosarcoma (200)
 10100 Hodgkin's disease (201)
 10200 Other malignant neoplasms of
 Lymphoid and histiocytic tissue (202)
 10300 Multiple myeloma and
 Immunoproliferative neoplasms (203)

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		<u>Leukemia (204-208)</u>
		10500 Lymphoid leukemia (204)
		10600 Myeloid leukemia (205)
		10700 Monocytic leukemia (206)
		10800 Other and unspecified leukemia (207-208)
		<u>Benign neoplasms, carcinoma in situ, and neoplasms of uncertain behavior and of unspecified nature (210-239)</u>
		<u>Benign neoplasms (210-229)</u>
		11100 Of female genital organs (218-221)
		11200 Of eye, brain, and other parts of nervous system(224-225)
		11300 Of all other and unspecified sites (210-217, 222-223, 226-229)
		Carcinoma in situ (230-234)
		11500 Of breast and genitourinary system (233)
		11600 Of all other and unspecified sites (230-232, 234)
		11700 Neoplasms of uncertain behavior (235-238)
		11800 Neoplasms of unspecified nature (239)
		<u>Endocrine, nutritional, and metabolic diseases and immunity disorders (240-279)</u>
		<u>Endocrine and metabolic diseases and immunity disorders (240-259, 270-279)</u>
		12100 Disorders of thyroid gland (240-246)
		12200 Diabetes mellitus (250)
		12300 Disorders of the pituitary gland and its hypothalamic control (253)
		12400 Diseases of thymus gland (254)
		12500 Disorders of adrenal glands (255)
		12600 Cystic fibrosis (277.0)
		12700 Obesity (278.0)
		<u>UNDERLYING CAUSE OF DEATH -- continued</u>
2799-2803	5	<u>282 Cause recode – continued</u>
		<u>Endocrine, nutritional, and metabolic diseases and immunity disorders (240-279) -- continued</u>
		<u>Endocrine and metabolic diseases and immunity disorders (240-259, 270-279) -- continued</u>
		12800 All other endocrine and metabolic

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File Location	Field size	Item and code outline
		diseases and immunity disorders (251-252, 256-259, 270-276, 277.1-277.9, 278.1-279)
		<u>Nutritional deficiencies (260-269)</u>
		13000 Nutritional marasmus (261)
		13100 Other protein-calorie malnutrition (262-263)
		13200 All other nutritional deficiencies (260, 264-269)
		<u>Diseases of blood and blood-forming organs (280-289)</u>
		<u>Anemias (280-285)</u>
		13500 Deficiency anemias (280-281)
		13600 Hemolytic anemias (282-283)
		13700 Aplastic anemia (284)
		13800 Other and unspecified anemias (285)
		13900 Purpura and other hemorrhagic conditions (287)
		14000 All other diseases of blood and blood-forming organs (286, 288-289)
		<u>Mental disorders (290-319)</u>
		14200 Senile and presenile organic psychotic conditions (290)
		14300 Alcoholic psychoses (291)
		14400 All other psychoses (292-299)
		14500 Alcohol dependence syndrome (303)
		14600 Drug dependence (304)
		14700 Other neurotic, personality, and nonpsychotic mental disorders (300-302,305-316)
		14800 Mental retardation (317-19)
		<u>UNDERLYING CAUSE OF DEATH -- continued</u>
2799-2803	5	<u>282 Cause recode – continued</u>
		<u>Diseases of the nervous system and sense organs (320-389)</u>
		<u>Diseases of the nervous system (320-359)</u>
		15100 Meningitis (320-322)
		15200 Parkinson's disease (332)
		15300 Other hereditary and degenerative

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File Location	Field size	Item and code outline
		diseases of the central nervous system (330-331, 333-337)
		15400 Multiple sclerosis (340)
		15500 Infantile cerebral palsy (343)
		15600 Epilepsy (345)
		15700 Other diseases of the nervous system (323-326, 341-342,344, 346-359)
		15800 Disorders of the eye and adnexa (360-379)
		15900 Diseases of the ear and mastoid process (380-389)
		<u>Diseases of the circulatory system (390-459)</u>
		<u>Rheumatic fever and rheumatic heart disease (390-398)</u>
		16200 Acute rheumatic fever (390-392)
		<u>Chronic rheumatic heart disease (393-398)</u>
		16400 Diseases of mitral valve (394)
		16500 Diseases of aortic valve (395)
		16600 Diseases of mitral and aortic valves (396)
		16700 All other chronic rheumatic heart disease (393, 397-398)
		<u>Hypertensive disease (401-404)</u>
		16900 Essential hypertension (401)
		17000 Hypertensive heart disease (402)
		17100 Hypertensive renal disease (403)
		17200 Hypertensive heart and renal disease (404)
		<u>Ischemic heart disease (410-414)</u>
		17400 Acute myocardial infarction (410)
		17500 Other acute and subacute forms of ischemic heart disease (411)
		17600 Angina pectoris (413)
		17700 Old myocardial infarction and other forms of chronic ischemic heart disease (412, 414)
		17800 Diseases of pulmonary circulation (415-417)
		<u>UNDERLYING CAUSE OF DEATH -- continued</u>
2799-2803	5	<u>282 Cause recode – continued</u>
		<u>Diseases of the circulatory system(390-459) continued</u>
		<u>Other forms of heart disease (420-429)</u>
		18000 Acute and subacute endocarditis

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File Location	Field size	Item and code outline
		(421)
		18100 Acute pericarditis, acute myocarditis, and other diseases of pericardium (420, 422-423)
		<u>Other diseases of endocardium</u> <u>(424)</u>
		18300 Mitral valve disorders (424.0)
		18400 Aortic valve disorders (424.1)
		18500 All other diseases of endocardium (424.2-424.9)
		18600 Heart failure (428)
		18700 Myocarditis, unspecified and myocardial degeneration (429.0-429.1)
		18800 All other and ill-defined forms of heart disease (425-427, 429.2-429.9)
		<u>Cerebrovascular diseases (430-438)</u>
		19000 Subarachnoid hemorrhage (430)
		19100 Intracerebral and other intracranial hemorrhage (431-432)
		19200 Occlusion and stenosis of precerebral arteries (433)
		19300 Cerebral thrombosis and unspecified occlusion of cerebral arteries (434.0, 434.9)
		19400 Cerebral embolism (434.1)
		19500 Acute but ill-defined cerebrovascular disease (436)
		19600 Other and late effects of cerebrovascular diseases (435, 437-438)
		<u>Diseases of arteries, arterioles, and capillaries (440-448)</u>
		19800 Atherosclerosis (440)
		19900 Aortic aneurysm (441)
		20000 All other diseases of arteries, arterioles, and capillaries (442-448)
		<u>UNDERLYING CAUSE OF DEATH -- continued</u>
2799-2803	5	<u>282 Cause recode – continued</u>
		<u>Diseases of the circulatory system (390-459)</u> <u>continued</u>
		<u>Diseases of veins and lymyhatics,</u> <u>and other disease of circulatory</u> <u>system (451-459)</u>
		20200 Phlebitis, thrombophlebitis, and venous embolism and thrombosis

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File Location	Field size	Item and code outline
		(451-453)
		20300 Other diseases of veins and lymphatics and all other diseases of circulatory system (454-459)
		<u>Diseases of the respiratory system (460-519)</u>
		<u>Diseases of the upper respiratory tract (460-465, 470-478)</u>
		20600 Acute upper respiratory infections (460-465)
		20700 Other diseases of upper respiratory tract (470-478)
		<u>Other diseases of the respiratory system(466, 480-519)</u>
		20900 Acute bronchitis and bronchiolitis (466)
		<u>Pneumonia (480-486)</u>
		21100 Viral pneumonia (480)
		21200 Pneumococcal and other bacterial pneumonia (481-482)
		21300 Bronchopneumonia, organism Unspecified (485)
		21400 Pneumonia due to other and unspecified organism (483, 486)
		21500 Influenza (487)
		<u>Chronic obstructive pulmonary diseases and allied conditions (490-496)</u>
		<u>Bronchitis, chronic and unspecified, emphysema and asthma (490-493)</u>
		21800 Bronchitis, not specified as acute or chronic (490)
		21900 Chronic bronchitis (491)
		22000 Emphysema (492)
		22100 Asthma (493)
		22200 Bronchiectasis and extrinsic allergic alveolitis (494-495)
		22300 Chronic airways obstruction, not elsewhere classified (496)
		<u>UNDERLYING CAUSE OF DEATH -- continued</u>
2799-2803	5	<u>282 Cause recode – continued</u>
		<u>Chronic obstructive pulmonary diseases and allied conditions (490-496) -- continued</u>
		<u>Bronchitis, chronic and unspecified, emphysema and asthma (490-493)</u>

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File Location	Field size	Item and code outline
		-- continued
		22400 Pneumoconioses and other lung diseases due to external agents (500-508)
		22500 Emphysema and abscess of lung and mediastinum (510, 513)
		22600 Pleurisy (511)
		22700 All other diseases of respiratory system (512, 514-519)
		<u>Diseases of the digestive system (520-579)</u>
		22900 Diseases of oral cavity, salivary glands, and jaws (520-529)
		<u>Diseases of other parts of the digestive system (530-579)</u>
		<u>Ulcer of stomach and duodenum (531-533)</u>
		23200 Gastric ulcer (531)
		23300 Duodenal ulcer (532)
		23400 Peptic ulcer, site unspecified (533)
		23500 Gastritis and duodenitis (535)
		23600 Appendicitis (540-543)
		23700 Hernia of abdominal cavity and intestinal obstruction without mention of hernia (550-553, 560)
		23800 Regional enteritis and idiopathic Proctocolitis (555-556)
		23900 All other noninfective gastroenteritis and colitis (557-558)
		24000 Diverticula of intestine (562)
		<u>Chronic liver disease and cirrhosis (571)</u>
		24200 Chronic liver disease and cirrhosis, specified as alcoholic (571.0-571.3)
		24300 Chronic hepatitis and biliary cirrhosis (571.4,571.6)
		24400 Cirrhosis of liver and other and unspecified chronic liver disease without mention of alcohol (571.5, 571.8-571.9)
		24500 Cholelithiasis and other disorders of gall bladder (574-575)
		<u>UNDERLYING CAUSE OF DEATH -- continued</u>
2799-2803	5	<u>282 Cause recode – continued</u>
		<u>Diseases of the digestive system (520-579) -- continued</u>
		<u>Chronic liver disease and cirrhosis (571) -- continued</u>

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File Location	Field size	Item and code outline
		24600 All other diseases of digestive system (530, 534, 536-537, 564-570, 572-573, 576-579)
		<u>Diseases of the genitourinary system (580-629)</u>
		<u>Diseases of urinary system (580-599)</u>
		<u>Nephritis, nephrotic syndrome, and (580-589)</u>
		25000 Acute glomerulonephritis (580)
		25100 Nephrotic syndrome (581)
		25200 Chronic glomerulonephritis, nephritis and nephropathy, not specified as acute or chronic, and renal sclerosis, unspecified (582-583, 587)
		25300 Renal failure, disorders resulting from impaired renal function, and small kidney of unknown cause (584-586, 588-589)
		25400 Infections of kidney (590)
		25500 Urinary calculus (592, 594)
		25600 All other diseases of urinary system (591, 593, 595-599)
		<u>Diseases of male genital organs (600-608)</u>
		25800 Hyperplasia of prostate (600)
		25900 Other diseases of male genital organs (601-608)
		26000 Disorders of breast (610-611)
		26100 Diseases of female genital organs except breast (614-629)
		<u>Complications of pregnancy, childbirth, and the puerperium (630-676)</u>
		<u>Pregnancy with abortive outcome (630-638)</u>
		26400 Ectopic pregnancy (633)
		26500 Spontaneous abortion (634)
		26600 Legally induced abortion (635)
		26700 Illegally induced abortion (636)
		26800 Other pregnancy with abortive outcome (630-632, 637-638)
		<u>UNDERLYING CAUSE OF DEATH -- continued</u>
2799-2803	5	<u>282 Cause recode -- continued</u>
		<u>Complications of pregnancy, childbirth, and the puerperium (630-676) -- continued</u>

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File Location	Field size	Item and code outline
		<u>Direct obstetric causes (640-646, 651-676)</u>
		27000 Hemorrhage of pregnancy and childbirth (640-641, 666)
		27100 Toxemia of pregnancy (642.4-642.9, 643)
		27200 Obstructed labor (660)
		27300 Complications of the puerperium (670-676)
		27400 Other direct obstetric causes (642.0-642.3, 644-646, 651-659, 661-665, 667-669)
		27500 Indirect obstetric causes (647-648)
		27600 Delivery in a completely normal case (650)
		<u>Diseases of the skin and subcutaneous tissue (680-709)</u>
		27800 Infections of skin and subcutaneous tissue (680-686)
		27900 All other diseases of skin and subcutaneous tissue (690-709)
		<u>Diseases of the musculoskeletal system and connective tissue (710-739)</u>
		28100 Rheumatoid arthritis and other inflammatory polyarthropathies (714)
		28200 Other arthropathies and related disorders (710-712, 715-719)
		28300 Dorsopathies (720-724)
		28400 Rheumatism, excluding the back (725-729)
		28500 Osteopathies, chondropathies, and acquired musculoskeletal deformities (730-739)
		<u>Congenital anomalies (740-759)</u>
		28700 Spina bifida (741)
		28800 All other congenital anomalies of nervous system (740, 742)
		28900 Congenital anomalies of heart (745-746)
		29000 Other congenital anomalies of circulatory system (747)
		29100 All other congenital anomalies (743-744, 748-759)
		<u>UNDERLYING CAUSE OF DEATH -- continued</u>
2799-2803	5	<u>282 Cause recode – continued</u>

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File Location	Field size	Item and code outline
		<u>Certain conditions originating in the perinatal period (760-779)</u>
		29300 Birth trauma (767)
		29400 Intrauterine hypoxia, birth asphyxia, and respiratory distress syndrome (768-769)
		29500 Other conditions originating in the perinatal period (760-766, 770-779)
		<u>Symptoms, signs, and ill-defined conditions (780-799)</u>
		29700 Senility without mention of psychosis (797)
		29800 Symptoms, signs, and other ill-defined conditions (780-796, 798-799)
		<u>Supplementary classification of external causes of injury and poisoning (E800-E999)</u>
		<u>Accidents and adverse effects (E800-E949)</u>
		<u>Transport accidents (E800-E848)</u>
		30200 Railway accidents (E800-E807)
		<u>Motor vehicle accidents (E810-E825)</u>
		<u>Motor vehicle traffic accidents (E810-E819)</u>
		30500 Involving collision with train (E810)
		30600 Involving collision with another motor Vehicle (E811-E812)
		30700 Involving collision with pedestrian (E814)
		30800 Involving collision with other vehicle or object (E813, E815)
		30900 Not involving collision on highway (E816-E818)
		31000 Motor vehicle traffic accident of unspecified nature (E819)
		31100 Motor vehicle no traffic accidents (E820-E825)
		31200 Other road vehicle accidents (E826-E829)
		31300 Water transport accidents (E830-E838)
		31400 Air and space transport accidents (E840-Eti45)
		31500 Vehicle accidents not elsewhere classifiable (E846-E848)
		<u>UNDERLYING CAUSE OF DEATH -- continued</u>

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File Location	Field size	Item and code outline
2799-2803	5	<p><u>282 Cause recode – continued</u></p> <p><u>Supplementary classification of external causes of injury and poisoning (E800-E999) -- continued</u></p> <p><u>Accidental poisoning (E850-E869)</u></p> <p>31700 Accidental poisoning by drugs, medicaments, and biologicals (E850-E858)</p> <p>31800 Accidental poisoning by other solid or liquid substances (E860-E866)</p> <p>31900 Accidental poisoning by gases and vapors (E867-E869)</p> <p>32000 Misadventures during medical care, abnormal reactions, and late complications (E870-E879)</p> <p><u>Accidental falls (E880-E888)</u></p> <p>32200 Fall from one level to another (E880-E884)</p> <p>32300 Fall on same level (E885-E886)</p> <p>32400 Fracture, cause unspecified, and other and unspecified falls (E887-E888)</p> <p>32500 Accidents caused by fire and flames (E890-E899)</p> <p><u>Other accidents, including late effects (E900-E929)</u></p> <p>32700 Lightning (E907)</p> <p>32800 Accidental drowning and submersion (E910)</p> <p>32900 Inhalation and ingestion of food or other object causing obstruction of respiratory tract or suffocation (E911-E912)</p> <p>33000 Accident caused by handgun (E922.0)</p> <p>33100 Accidents caused by all other and unspecified firearms (E922.1-E922.9)</p> <p>33200 Accident caused by explosive material (E923)</p> <p>33300 Accident caused by hot substance or object, caustic or corrosive material, steam, and exposure to radiation (E924, E926)</p> <p>33400 Accident caused by electric current (E925)</p> <p>33500 All other accidents and late effects of accidental injury (E900-E906, E908-E909, E913-E921, E927-E929)</p>

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File Location	Field size	Item and code outline
		<u>UNDERLYING CAUSE OF DEATH -- continued</u>
2799-2803	5	<p><u>282 Cause recode – continued</u></p> <p><u>Supplementary classification of external causes of injury and poisoning (E800-E999) -- continued</u></p> <p>33600 Drugs, medicaments, and biological substances causing adverse effects in therapeutic use (E930-E949)</p> <p style="padding-left: 40px;"><u>Suicide (E950-E959)</u></p> <p>33800 Suicide by drugs, medicaments, and Biologicals (E950.0-E950.5)</p> <p>33900 Suicide by other solid or liquid substances (E950.6-E950.9)</p> <p>34000 Suicide by gases and vapors (E951-E952)</p> <p>34100 Suicide by hanging, strangulation, and suffocation (E953)</p> <p>34200 Suicide by handgun (E955.0)</p> <p>34300 Suicide by all other and unspecified firearms (E955.1-E955.4)</p> <p>34400 Suicide by all other means and late effects of self-inflicted injury (E954, E955.5-E959)</p> <p style="padding-left: 40px;"><u>Homicide and legal intervention (E960-E978)</u></p> <p>34600 Assault by handgun (E965.0)</p> <p>34700 Assault by all other and unspecified firearms (E965.1-E965.4)</p> <p>34800 Assault by cutting and piercing instrument (E966)</p> <p>34900 Assault by all other means and late effects of injury purposely inflicted by other person (E960-E964, E965.5-E965.9, E967-E969)</p> <p>35000 Legal execution (E978)</p> <p>35100 Other legal intervention and late effects of injury due to legal intervention (E970-E977)</p> <p style="padding-left: 40px;"><u>Injury undetermined whether accidentally or purposely inflicted (E980-E989)</u></p> <p>35300 From poisoning by drugs, medicaments, and biologicals (E980.0-E980.5)</p> <p>35400 From poisoning by other solid or liquid substances (E980.6-E980.9)</p> <p>35500 From injury by handgun (E985.0)</p> <p>35600 From injury by all other and unspecified firearms</p>

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File Location	Field size	Item and code outline
		(E985.1-E985.4)
		<u>UNDERLYING CAUSE OF DEATH -- continued</u>
2799-2803	5	<u>282 Cause recode – continued</u> <u>Supplementary classification of external causes of injury and poisoning (E800-E999) -- continued</u> <u>Injury undetermined whether accidentally or purposely inflicted (E980-E989) -- continued</u> 35700 From Injury by all other means and late effects of injury, undetermined whether accidentally or purposely inflicted (E981-E984, E985.5-E989) 35800 Injury resulting from operations of war (E990-E999) Blank Not matched
2804-2806	3	<u>72 Cause Recode</u> See locations 309-312 for detailed codes 000 Number Blank Not matched
2807-2809	3	<u>61 Infant Cause Recode</u> 680 All other cause Blank Not matched
2810-2812	3	<u>34 Cause Recode</u>
		<u>MULTIPLECONDITONS</u>
2813-2814	2	00 Number of Entity-Axis Conditions , Blank Not matched
2815- 2954	140	<u>ENTITY - AXIS CONDITIONS</u> Space has been provided for a maximum of 20 conflatons. Each condition is reported in a seven (7) digit field. Records which do not have 20 conditions contain a blank in the corresponding fields. Position 1 reports the part and line number on the certificate as follows: 1 Part I, line 1(a) 2 Part I, line 2(b) 3 Part I, line 3(c) 4 Part I, line 4(d)

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File Location	Field size	Item and code outline
		5 Part I, line 5(e) 6 Part II
		<u>MULTIPLE CONDITONS -- continued</u>
2815- 2954	140	<u>ENTITY - AXIS CONDITIONS – continued</u> <u>Position 2</u> reports the sequence of the Condition within a part/line 1-6 Position number Blank Not matched Position 3-6 reports the ICD-9 condition code. See the <i>International Classification of Diseases, 1975 Revision, Volume 1</i> . For those conditions that do not have a 4th digit, this location is blank. 0010-9999 ICD codes, numeric, one decimal implied (not inclusive) Blank Not matched Position 7 reports the nature of injury flag. 1 Condition codes is a nature of injury code 0 All other codes Blank Not matched
2815-2821	7	0000000 1st condition
2822-2828	7	0000000 2nd condition
2829-2835	7	0000000 3rd condition
2836-2842	7	0000000 4th condition
2843-2849	7	0000000 5th condition
2850-2856	7	0000000 6th condition
2857-2863	7	0000000 7th condition
2864-2870	7	0000000 8th condition
2871-2877	7	0000000 9th condition
2878-2884	7	0000000 10th condition
2885-2891	7	0000000 11th condition
2892-2898	7	0000000 12th condition
2899-2905	7	0000000 13th condition
2906-2912	7	0000000 14th condition
2913-2919	7	0000000 15th condition
2920-2926	7	0000000 16th condition
2927-2933	7	0000000 17th condition
2934-2940	7	0000000 18th condition
2941-2947	7	0000000 19th condition
2948-2954	7	0000000 20th condition
2955-2961	7	<u>Reserved positions</u>

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File Location	Field size	Item and code outline
2962	1	<p><u>NMFS Race Recode</u></p> <p>1 Black 2 Nonblack</p>
2963	1	<p><u>SEX</u></p> <p>1 Male 2 Female</p>
2964	1	<p><u>NMFS Age Recode</u></p> <p>0 Less than 15 years 1 15-24 years 2 25-34 years 3 35-99 years 4 100 years and over 9 Age not stated</p>
2965	1	<p><u>NMFS Age Recode 9</u></p> <p>0 Less than 15 years 1 15-24 years 2 25-34 years 3 35-49 years 4 50-64 years 5 65-79 years 6 80-99 years 7 100 years and over 9 Age not stated</p>
2966-2967	2	<p><u>NMFS STRATA</u></p> <p>00 Unable to assign 01-12 Certainty strata 13-50 Non-certainty strata</p>
2968-2969	2	<p><u>NMFS Cause Recode</u></p> <p>01 Suicide (E950-E959) 02 Homicide (E960-E978) 03 Motor vehicle traffic accidents (E810-E819)(.0, .2, .7) 04 Motor vehicle traffic accidents (E810-E819)(.1, .3-.6, .8, .9) 05 All other accidents and adverse effects (E800-E807, E826-E949) 06 Alcohol abuse 07 Drug abuse</p>

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File Location	Field size	Item and code outline
		08 HIV infection (042-044) 09 Neoplasm (140-208) 10 Chronic obstructive Pulmonary disease (490-496) 11 Diseases of the heart (390-398, 402, 404-429) 12 Residual (all other causes)
		<u>MULTIPLE CONDITONS – continued</u>
2970-2971	2	<u>Number of Record-Axis Conditions</u> 00-20 Number of conditions Blank Not matched
2972	1	<u>Reserved position</u> <u>Record-Axis Conditions</u> Space has been provided for a maximum of 20 conditions. Each condition is reported in a five(5) digit field. Records which do not have 20 conditions contain a blank in the corresponding fields. <u>Position 1-4</u> reports the ICD-9 condition code. See the <i>International Classification of Diseases, 1975 Revision, Volume 1</i> . For those conditions that do not have a 4th digit, this location is blank. 0010-9999 ICD codes, numeric, one decimal implied (not inclusive) Blank Not matched <u>Position 5</u> reports the nature of injury flag. 1 Condition code is a nature of injury code 0 All other codes Blank Not matched
2973-2977	5	1st Condition
2978-2982	5	2nd Condition
2983-2987	5	3rd Condition
2988-2992	5	4th Condition
2993-2997	5	5th Condition
2998-3002	5	6th Condition
3003-3007	5	7th Condition
3008-3012	5	8th Condition
3013-3017	5	9th Condition
3018-3022	5	10th Condition
3023-3027	5	11th Condition
3028-3032	5	12th Condition

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File Location	Field size	Item and code outline
3033-3037	5	13th Condition
3038-3042	5	14th Condition
3043-3047	5	15th Condition

RECODED DATA FROM CMS, RESPONDENT, AND FINAL MORTALITY FILE

3048-3052	5	<p><u>Rcd29 Julian CMS Date of death</u></p> <p>93056-93365 Date 99999 Non response/could not calculate</p>
3053-3060	8	<p><u>Rcd18 Adjustment factor (non-response * post Stratification) recode</u></p> <p>00000000 Number</p>
3061-3062	2	<p><u>Rcd46 CMS age recode A</u></p> <p>29 15 to 19 years 30 20 to 24 years 31 25 to 29 years 32 30 to 34 years 33 35 to 39 years 34 40 to 44 years 35 45 to 49 years 36 50 to 54 years 37 55 to 59 years 38 60 to 64 years 39 65 to 69 years 40 70 to 74 years 41 75 to 79 years 42 80 to 84 years 43 85 to 89 years 44 90 to 94 years 45 95 to 99 years 46 100 to 104 years 47 105 to 109 years 48 110 to 114 years 49 115 to 119 years 50 120 to 124 years 51 125 years and over 52 Not stated</p>
3063-3064	2	<p><u>Rcd46 CMS age recode B</u></p> <p>09 15 to 19 years 10 20 to 24 years 11 25 to 29 years 12 30 to 34 years</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		13 35 to 39 years 14 40 to 44 years 15 45 to 49 years 16 50 to 54 years 17 55 to 59 years 18 60 to 64 years 19 65 to 69 years 20 70 to 74 years 21 75 to 79 years 22 80 to 84 years 23 85 to 89 years
3063-3064	2	<u>Rcd46 CMS age recode B -- continued</u> 24 90 to 94 years 25 95 to 99 years 26 100 years and over 27 Not stated
		<u>Rcd49 Julian CMS date of birth</u>
3065-3068	4	1862-1978 Years 999 Non response
3069-3071	3	001-366 Days 999 Non response
3072	1	<u>Rcd77 CMS region of birth recode</u> 1 Northeast 2 Midwest 3 South 4 West 8 Foreign country 9 Unknown/not stated
3073	1	<u>Rcd226 CMS detailed Hispanic recode</u> 0 Non-Hispanic 1 Mexican 2 Puerto Rican 3 Cuban 4 Central or South American 8 Other Hispanic 9 Unknown/not stated
3074-3075	2	<u>Rcd269 CMS race recode #3</u> 00 Other races 01 White 02 Black 03 American Indian, Eskimo, Aleut 04 Chinese 05 Japanese 06 Hawaiian 07 Filipino

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File Location	Field size	Item and code outline
		08 Other Asian and Pacific Islanders 09 Not classified 98 Blank/not stated
		<u>Rcd277 Julia CMS date of injury</u>
3076-3079	4	1903-1933 Year 9999 Not applicable/not stated
3080-3082	3	007-366 Day 999 Not applicable/not stated
3083-3084	2	<u>Rcd360 Check-in recode for proxy interview</u>
		01 Complete interview 02 Partial interview 03 Refused 04 Could not contact 09 Could not locate 10 Other non-interview 11 Washington assigned non-interview 98 Jeffersonville auto check-in code 99 Initialization code/no response
3085-3089	5	<u>ROO387 Julian NMF-1 receipt date</u>
3085-3086	2	95 Year 99 Not reported/could not calculate
3087-3089	3	001-216 Day 999 Not reported/could not calculate
3090-3094	5	<u>Rcd399 Julian ME/C receipt date</u>
3090-3091	2	95-96 Year 99 Not reported/could not calculate
3092-3094	3	010-352 Day 999 Not reported/could not calculate
3095-3096	2	<u>Recode SC0004: Final Status for Original or Alternate Interview</u>
		01 Complete Interview 02 Partial Interview 03 Refused 04 Could not contact 09 Could not locate, and no alternate respondent located 10 Other noninterview 98 Not reported 99 Non response
3097-3101	5	<u>Rcd477 Julian Interview date</u>

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File Location	Field size	Item and code outline
3097-3098	2	94-95 Year 99 Non response
3099-3101	3	010-352 Day 999 Non response
3102-3104	3	<u>Rcd483 length of interview recode</u> 001-827 Minutes 999 Non response
3105-3108	4	<u>Rcd483a Beginning time (military) of interview</u> 0000 Hour/minute (military time) 9999 Non response
3109-3112	4	<u>Rcd483b Ending time (military) of interview</u> 0000 Hour/minute (military time) 9999 Non response
3113-3114	2	<u>Recode SC0010: How as -- related to you?</u> 01 Relative 02 Non-relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3115-3116	2	<u>SC0011: How old was -at the time of Death?</u> 29 15 to 19 years 30 20 to 24 years 31 25 to 29 years 32 30 to 34 years 33 35 to 39 years 34 40 to 44 years 35 45 to 49 years 36 50 to 54 years 37 55 to 59 years 38 60 to 64 years 39 65 to 69 years 40 70 to 74 years 41 75 to 79 years 42 80 to 84 years 43 85 to 89 years 44 90 to 94 years 45 95 to 99 years 46 100 to 104 years

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File Location	Field size	Item and code outline
		47 105 to 109 years 48 110to 114 years 49 115 to 119 years 50 120 to 124 years 51 125 years and over 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3117-3118	2	<u>Recode 2 SC0011: How old was -- at the time of Death?</u> 04 15 to 24 years 05 25 to 34 years 06 35 to 44 years 07 45 to 54 years 08 55 to 64 years 09 65 to 74 years 10 75 to 84 years 11 85 years and over 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3119-3120	2	<u>Recode 1 SC0029a Relationships of all persons living with or at decedents home.</u> 01 Spouse 02 Parent 03 Step-parent 04 Child 05 Sibling 06 In-law 07 Other relative 08 Friend 09 Other person 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3121-3122	2	<u>Recode 2 SC0029b Relationships of all persons living with or at decedents home.</u> 01 Relative 02 Non-relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range

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File Location	Field size	Item and code outline
		99 Non response
3123-3124	2	<u>Recode 1 SC0030a Relationship of all persons living with or at decedents home.</u>
		01 Spouse
		02 Parent
		04 Child
		03 Step-parent
		05 Sibling
		06 In-law
		07 Other relative
3123-3124	2	<u>Recode 1 SC0030a Relationship of all persons living with or at decedents home. -- continued</u>
		08 Friend
		09 Other person
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range
		99 Non response
3125-3126	2	<u>Recode 2 SC0030b Relationships of all persons living with or at decedents home.</u>
		01 Relative
		02 Non-relative
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range
		99 Non response
3127-3128	2	<u>Recode 1 SC0031a Relationships of all persons living with or at decedents home.</u>
		01 Spouse
		02 Parent
		03 Step-parent
		04 Child
		05 Sibling
		06 In-law
		07 Other relative
		08 Friend
		09 Other person
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range
		99 Non response

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File Location	Field size	Item and code outline
3129-3130	2	<p><u>Recode 2 SC0031b Relationships of all persons living with or at decedents home.</u></p> <p>01 Relative 02 Non-relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response</p>
3131-3132	2	<p><u>Recode 1 SC0032a Relationships of all persons living with or at decedents home.</u></p> <p>01 Spouse 02 Parent 03 Step-parent 04 Child 05 Sibling 06 In-law 07 Other relative 08 Friend 09 Other person 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response</p>
3133-3134	2	<p><u>Recode 2 SC0032b Relationships of all persons living with or at decedents home.</u></p> <p>01 Relative 02 Non-relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response</p>
3135-3136	2	<p><u>Recode 1 SC0033a Relationships of all persons living with or at decedents home.</u></p> <p>01 Spouse 02 Parent 03 Step-parent 04 Child 05 Sibling</p>

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File Location	Field size	Item and code outline
		06 In-law 07 Other relative 08 Friend 09 Other person 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3137-3138	2	<u>Recode 2 SC0033b Relationships of all persons living with or at decedents home.</u> 01 Relative 02 Non-relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3139-3140	2	<u>Recode 1 SC0034a Relationships of all persons living with or at decedents home.</u> 01 Spouse 02 Parent 03 Step-parent 04 Child 05 Sibling 06 In-law 07 Other relative 08 Friend 09 Other person 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3141-3142	2	<u>Recode 2 SC0034b Relationships of all persons living with or at decedents home.</u> 01 Relative 02 Non-relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3143-3144	2	<u>Recode 1 SC0035a Relationships of all persons living with or at decedents home.</u> 01 Spouse 02 Parent 03 Step-parent

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File Location	Field size	Item and code outline
		04 Child 05 Sibling 06 In-law 07 Other relative 08 Friend 09 Other person 94 Refused 95 Don't know 96 Not applicable. 98 Blank/out of range 99 Non response
3145-3146	2	<u>Recode 2 SC0035b Relationships of all persons living with or at decedents home.</u> 01 Relative 02 Non-relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3147-3148	2	<u>Recode 1 SC0036a Relationships of all persons living with or at decedents home.</u> 01 Spouse 02 Parent 03 Step-parent 04 Child 05 Sibling 06 In-law 07 Other relative 08 Friend 09 Other person 94 'Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3149-3150	2	<u>Recode 2 SC0036b Relationships of all persons living with or at decedents home.</u> 01 Relative 02 Non-relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3151-3152	2	<u>Recode 1 SC0037a Relationships of all persons living with or at decedents home.</u>

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File Location	Field size	Item and code outline
		01 Spouse 02 Parent 03 Step-parent 04 Child 05 Sibling 06 In-law 07 Other relative 08 Friend 09 Other person 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3153-3154	2	<u>Recode 2 SC0037b Relationships of all persons living with or at decedents home.</u> 01 Relative 02 Non-relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3155-3156	2	<u>Recode 1 SC0038a Relationships of all persons living with or at decedents home.</u> 01 Spouse 02 Parent 03 Step-parent 04 Child 05 Sibling 06 In-law 07 Other relative 08 Friend 09 Other person 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3157-3158	2	<u>Recode2 SC0038b Relationships of all persons living with or at decedents home.</u> 01 Relative 02 Non-relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response

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File Location	Field size	Item and code outline
3159-3160	2	<p><u>Recode1 SC0039a Relationships of all persons living with or at decedents home.</u></p> <ul style="list-style-type: none"> 01 Spouse 02 Parent 03 Step-parent 04 Child 05 Sibling 06 In-law 07 Other relative 08 Friend 09 Other person 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3161-3162	2	<p><u>Recode 2 SC0039b Relationships of all persons living with or at decedents home.</u></p> <ul style="list-style-type: none"> 01 Relative 02 Non-relative 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3163-3164	2	<p><u>Recode 1 SC0040a Relationships of all persons living with or at decedents home.</u></p> <ul style="list-style-type: none"> 01 Spouse 02 Parent 03 Step-parent 04 Child 05 Sibling 06 In-law 07 Other relative 08 Friend 09 Other person' 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3165-3166	2	<p><u>Recode 2 SC0040b Relationships of all persons living with or at decedents home.</u></p> <ul style="list-style-type: none"> 01 Relative 02 Non-relative 94 Refused 95 Don't know 96 Not applicable

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File Location	Field size	Item and code outline
		98 Blank/out of range 99 Non response
3167-3168	2	<u>Recode 3 SC0040c Total persons living with or at decedents home.</u> 00-12 Number of persons 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3169-3170	2	<u>Recode SC0075: How many nights did -- stay in (facility #1) during -- last year of life?</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3171-3172	2	<u>Recode SC0077: How many nights did -- stay in (facility #2) during -- last year of life?</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3173-3174	2	<u>Recode SC0079: How many nights did -- stay in (facility #3) during -- last year of life?</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year?

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3175-3176	2	<u>Recode SC0081: How many nights did -- stay in (facility #4) during -- last year of life?</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 09 Don't know 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3177-3178	2	<u>Recode SC0083: How many nights did -- stay in (facility #5) during -- last year of life?</u> 01 less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 94 Refused 95 Don't know
3177-3178	2	<u>Recode SC0083: How many nights did -- stay in (facility #5) during - last year of life? -- continued</u> 96 Not applicable 98 Blank/out of range 99 Non response
3179-3180	2	<u>Recode SC0085: How many nights did -- stay in (facility #6) during -- last year of life?</u> 01 less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response

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File Location	Field size	Item and code outline
3181-3182	2	<p><u>Recode SC0087: How many nights did -- stay in (facility #7) during -- last year of life?</u></p> <p>01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response</p>
3183-3184	2	<p><u>Recode SC0089: How many nights did -- stay in (facility #8) during -- last year of life?</u></p> <p>01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response</p>
3185-3186	2	<p><u>Recode SCO091: How many nights did -- stay in (facility #9) during -- last year of life?</u></p> <p>01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response</p>
3187-3188	2	<p><u>Recode SCO093: How many nights did -- stay in (facility #10) during -- last year of life?</u></p> <p>01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year?</p>

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File Location	Field size	Item and code outline
		94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3189-3190	2	<u>Recode SC0095: How many nights did -- stay in (facility #11) during -- last year of life?</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3191-3192	2	<u>Recode SC0097: How many nights did -- stay in (facility #12) during -- last year of life?</u> 01 Less than 1 week? 02 One week to less than 1 month? 03 One month to less than 2 months? 04 Two months to less than 6 months? 05 Six months to less than 9 months? 06 Nine months to one year? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non response
3193-3194	2	<u>Recode SC0673: What Was -- race?</u> 00 Other race 01 White 02 Black 03 American Indian, Eskimo, Aleut 04 Chinese 05 Japanese 06 Hawaiian 07 Filipino 08 Asian and Pacific Islander 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
3195-3196	2	<u>Recode SC0674: Which of those groups; that is (entries in SC0587, SC0588, SC0673) would you say BEST represents -- race?</u>

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File Location	Field size	Item and code outline
		00 Other race 01 White 02 Black 03 American Indian, Eskimo, Aleut 04 Chinese 05 Japanese 06 Hawaiian 07 Filipino 08 Asian and Pacific Islander 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
3197-3198	2	<u>Recode SC0675: Which of these groups BEST represents -- race? Was -- race?</u> 01 White 02 Black 03 American Indian, Eskimo, Aleut 04 Asian and Pacific Islander 16 Other race 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
3199-3200	2	<u>Recode SC0684-0686 What was the highest grade or year of regular school -- ever attended?</u> 00 Never attended or only kindergarten 01-08 Years in elementary school 09 1 year high school 10 2 years high school 11 3 years high school 12 4 years high school 13 1 year college 14 2 years college 15 3 years college 16 4 years college 17 5 years college 18 6 years college 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
3201-3202	2	SC888-0889: Including money from all sources that we have just talked about, what was the TOTAL income of -- (and (persons listed in Section A, SC009-0040 who were related to decedent)) in

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File Location	Field size	Item and code outline
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1992 BEFORE deductions. If you are unsure, please give an estimate.

Recode SC0888:

- 01 Less than \$1,000
- 02 \$1,000 to \$1,999
- 03 \$2,000 to \$2,999
- 04 \$3,000 to \$3,999
- 05 \$4,000 to \$4,999
- 06 \$5,000 to \$5,999
- 07 \$6,000 to \$6,999
- 08 \$7,000 to \$8,999
- 09 \$9,000 to \$11,499
- 10 \$11,500 to \$13,999
- 11 \$14,000 to \$16,499
- 12 \$16,500 to \$18,999
- 13 \$19,000 to \$20,999
- 14 \$21,000 to \$23,499
- 15 \$23,500 to \$24,999
- 16 \$25,000 to \$49,999
- 17 \$50,000 to \$74,999
- 18 \$75,000 or more
- 94 Refused
- 95 Don't know
- 96 Not applicable
- 98 Blank/out of range
- 99 Non-response

3203-3204 2

SC0901-0902: The (answer to SC0888-0900) was for (persons listed in Section A, SC0029-0040 who were related to decedent) and -- Now I'd like to ask for just -- total individual income in 1992. What was -- total income in 1992?

Recode SC0901:

- 01 Less than \$1,000
- 02 \$1,000 to \$1,999
- 03 \$2,000 to \$2,999
- 04 \$3,000 to \$3,999
- 05 \$4,000 to \$4,999
- 06 \$5,000 to \$5,999
- 07 \$6,000 to \$6,999
- 08 \$7,000 to \$8,999
- 09 \$9,000 to \$11,499
- 10 \$11,500 to \$13,999
- 11 \$14,000 to \$16,499
- 12 \$16,500 to \$18,999
- 13 \$19,000 to \$20,999

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File Location	Field size	Item and code outline
		14 \$21,000 to \$23,499 15 \$23,500 to \$24,999 16 \$25,000 to \$49,999 17 \$50,000 to \$74,999 18 \$75,000 or more 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
3205-3206	2	<p>Recode SC0908-0910: At the time of death, what was the total value of things, including a home, if any, owned by -- and -- parents or legal guardians? Subtract any debts and mortgages. Include cash in bank accounts, stocks, bonds, cars, Jewelry, business interests and so forth. If unsure, please <u>make your best estimate.</u></p> 01 Zero net worth (or loss) 02 \$1 to \$999 03 \$1,000 to \$1,999 04 \$2,000 to \$2,999 05 \$3,000 to \$3,999 06 \$4,000 to \$4,999 07 \$5,000 to \$24,999 08 \$25,000 to \$49,999 09 \$50,000 to \$99,999 10 \$100,000 to \$249,999 11 \$250,000 to \$499,999 12 \$500,000 or more 13 \$1 to \$4,999 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
3207-3208	2	<p>Recode SC0913-0914: What was the approximate value of the home at the time of -- death?</p> 01 Less than \$10,000 02 \$10,000 to \$24,999 03 \$25,000 to \$49,999 04 \$50,000 to \$74,999 05 \$75,000 to \$124,999 06 \$125,000 to \$149,999 07 \$150,000 to \$174,999 08 \$175,000 to \$249,999 09 \$250,000 or more 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response

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File Location	Field size	Item and code outline
3209-3210	2	<p><u>Recode SC0916: At the time of death, what was the total amount of any mortgages or home equity loans on the home?</u></p> <p>01 less than \$25,000 02 \$25,000 to \$49,999 03 \$50,000 or more 94 Refused . 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
3211-3212	2	<p><u>Recode SC0923: What is your age?</u></p> <p>29 15 to 19 years 30 20 to 24 years 31 25 to 29 years 32 30 to 34 years 33 35 to 39 years 34 40 to 44 years 35 45 to 49 years 36 50 to 54 years 37 55 to 59 years 38 60 to 64 years 39 65 to 69 years 40 70 to 74 years 41 75 to 79 years 42 80 to 84 years 43 85 to 89 years 44 90 to 94 years 45 95 to 99 years 46 100 to 104 years 47 105 to 109 years 48 110 to 114 years 49 115 to 119 years 50 120 to 124 years 51 125 years and over 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response</p>
3213-3214	2	<p><u>Recode SC0925-0927: What is the highest grade or year of regular school you ever attended?</u></p> <p>00 Never attended or only kindergarten 01-08 Years in elementary school 09 1 year high school 10 2 years high school 11 3 years high school 12 4 years high school 13 1 year college</p>

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File Location	Field size	Item and code outline
		14 2 years college 15 3 years college 16 4 years college 17 5 years college 18 6 years college 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-response
3215	1	<u>Rcdn39 FMF City of residence size recode -- 1980 Census</u> 0 1,000,000 or more 1 500,000 to 999,999 2 250,000 to 499,999 3 100,000 to 249,999 4 50,000 to 99,999 5 25,000 to 49,999 6 10,000 to 24,999 7 Less than 10,000 9 Foreign residence Blank Not matched
3216	1	<u>Rcdn40 FMF Metro residence recode -1980 Census</u> 1 Metropolitan county 2 Non-metropolitan county 9 Foreign residence Blank Not matched
3217	1	<u>Rcdn50 FMF recode county of residence size -- 1980 Census</u> 0 1,000,000 or more 1 500,000 to 999,999 2 250,000 to 499,999 3 100,000 to 249,999 4 50,000 to 99,999 5 25,000 to 49,999 6 Less than 25,000 9 Foreign residence Blank Not matched
3218	1	<u>Rcdn51 FMF recode Metro residence size -- 1980 Census</u> 1 250,000 or more 2 100,000 to 249,999 3 Less than 100,000 4 Non-metropolitan area 9 Foreign residence

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File Location	Field size	Item and code outline
		Blank Not matched
3219-3223	5	<u>Rcdn55 Julian FMF date or death recode</u> 93001-93365 Julian date 99999 Not reported Blank Not matched
3224-3225	2	<u>Rcdn60 FMF race recode A</u> 01 White 02 Black 03 American Indian, Eskimo, Aleut 04 Asian and Pacific Islander in reporting areas 78 Other races (including Asian and Pacific Islanders in non-reporting areas) Blank Not matched
3226-3227	2	<u>Rcdn78 FMF region of birth recode</u> 01 Northeast 02 Midwest 03 South 04 West 05 Outlying territories 06 Foreign country 99 Unknown Blank Not matched
3228-3231	4	<u>Rcdn102 Julian FMF date of death</u> 1993 Year 9999 Not reported Blank Not matched
		<u>Rcdn102 Julian FMF date of death -- continued</u>
3232-3234	3	001-365 Days 999 Not reported Blank Not matched
3235-3236	2	<u>Rcdn142 FMF cancer cause recode A</u> 00-17 See locations 313-314 for specific codes. Blank Not matched
3237-3238	2	<u>Rcdn142 FMF AIDS cause recode B</u> 02-15 See locations 315-316 for specific codes. Blank Not matched
3239-3244	6	<u>Recode SC0145-SC0149: When was the high blood pressure or hypertension first noticed?</u>

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File Location	Field size	Item and code outline
		000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3245-3250	6	<u>Recode SC0152-SC0156: When did -- have the FIRST heart attack?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3251-3256	6	<u>Recode SC0158-SC0162: When did -- have -- MOST RECENT heart attack?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3257-3262	6	<u>Recode SC0164-SC0168: When were the chest pains or angina pectoris first noticed?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3263-3268	6	<u>Recode SC0170-SC0174: When did -- have FIRST stroke in which there were resulting conditions lasting at least one day?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response
3269-3274	6	<u>Recode SC0176-SC0180: When did -- have the MOST RECENT Stroke in which there were resulting conditions lasting at least one day?</u> 000000-999990 Days before death 999994 Refused

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3275-3280	6	<u>Recode SC0182-SC0186: When was the diagnoses first made [Alzheimer's disease]?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/Could not calculate
3281-3286	6	<u>Recode SC0188-SC0192: When was the diagnoses first made [organic brain syndrome]?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/Could not calculate
3287-3292	6	<u>Recode SC0194-SC0198: When was the (other) mental health, nervous, or emotional problem first noticed?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response
3293-3298	6	<u>Recode SC0201-SC0205: When was the diabetes first noticed? (NUMERIC RIGHT ADJUSTMENT)</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/Could not calculate
3299-3304	6	<u>Recode SC0208-0212: When was the cancer, except skin cancer, diabetes, first noticed?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		999998 Blank/out of range 999999 Non-response/Could not calculate
3305-3310	6	<u>Recode SC0214-0218: When was the asthma first noticed?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/Could not calculate
3311-3316	6	<u>Recode SC0221-0225: When was the lung condition first noticed?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/Could not calculate
3317-3322	6	<u>Recode SC0228-0232: When was the Cirrhosis condition first noticed?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/Could not calculate
3323-3328	6	<u>Recode SC0234-0238: When was the arthritic condition first noticed?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable
3323-3328	6	<u>Recode SC0234-0238: When was the arthritic condition first noticed? -- continued</u> 999998 Blank/out of range 999999 Non-response/could not calculate
3329-3334	6	<u>Recode SC0248-0249: Now thinking about -- ENTIRE LIFE, during -- how long did -- have difficulty in lifting and carrying something as heavy as 10 lbs?</u> 000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable .

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		999998 Blank/out of range . 999999 Non-response/could not calculate
3335-3340	6	<p><u>Recode SC0251-0253: Now thinking about -- ENTIRE LIFE, how long did -- have difficulty climbing a flight of stairs without resting?</u></p> <p>000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate</p>
3341-3346	6	<p><u>Recode SC0255-0257: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty walking a quarter of a mile about 3 city blocks?</u></p> <p>000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate</p>
3347-3352	6	<p><u>Recode SC0259-0261: Now thinking about -- ENTIRE LIFE, during -- entire life, have difficulty in doing heavy work around the house such as scrubbing floors or washing windows?</u></p> <p>000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate</p>
3353-3358	6	<p><u>Recode SC0263-0265: Now thinking about -- ENTIRE LIFE, during -- entire life, have difficulty in shopping for personal items, such as food or medication?</u></p> <p>000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
3359-3364	6	<p>Recode SC0267-0269: Now thinking about -- ENTIRE LIFE, during -- entire life, have difficulty in going outside the home alone, such as to shop or visit a doctor's office?</p> <p>000000-999990 Total days 999994 Refused . 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate</p>
3365-3370	6	<p>Recode SC0271-0273: Now thinking about -- ENTIRE LIFE, during -- entire life, have difficulty in doing light work around the house, such as washing dishes or light yard work?</p> <p>000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response</p>
3371-3376	6	<p>Recode SC0275-0277: Now thinking about -- ENTIRE LIFE, during -- entire life, have difficulty in preparing -- meals?</p> <p>000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response</p>
3377-3382	6	<p>Recode SC0279-0281: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in managing -- money, such as keeping track of expenses of paying bills?</p> <p>000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate</p>
3383-3388	6	<p>Recode SC0283-0285: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in using a telephone?</p> <p>000000-999990 Total days 999994 Refused 999995 Don't know</p>

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File Location	Field size	Item and code outline
		999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3389-3394	6	<u>Recode SC0287-0289: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in getting around inside the home?</u> 000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3395-3400	6	<u>Recode SC0291-0293: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in walking?</u> 000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3401-3406	6	<u>Recode SC0295-0297: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in getting in and out of chairs?</u> 000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3407-3412	6	<u>Recode SC0299-0301: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in getting in and out of chairs?</u> 000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3413-3418	6	<u>Recode SC0303-0305: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in using toilet, including getting to and from the toilet?</u> 000000-999990 Total days 999994 Refused

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3419-3424	6	<u>Recode SC0307-0309: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in bathing or showering?</u> 000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3425-3430	6	<u>Recode SC0311-0313: Now thinking about -- ENTIRE LIFE, during -- entire life, how long did -- have difficulty in dressing?</u> 000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3431-3436	6	<u>Recode SC0328-0330: During the last year of life, for how long did -- receive any paid help at home?</u> 000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 No,;-response/could not calculate
3437-3442	6	<u>Recode SC0331-0332: (including both paid and unpaid), during -- ENTIRE LIFE, how long did -- receive help AT HOME in (all activities with 'Yes' marked in SC0246 - SC310)?</u> 000000-999990 Total days 999994 Refused 999995 Don't know 999996 Not applicable 999999 Non-response
3443-3448	6	<u>Recode SC0526-0530: When did -- stop smoking?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable

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File Location	Field size	Item and code outline
		999998 Blank/out of range 999999 Non-response
3449-3454	6	<u>Recode SC0689: When did -- stop going to school?</u> 000000-999990 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/Could not calculate
3455-3460	6	<u>Recode SC0703-0707: When did -- last work even for a few days?</u> 000000-999992 Days before death 999994 Refused 999995 Don't know 999996 Not applicable 999998 Blank/out of range 999999 Non-response/could not calculate
3461-3468	8	<u>Non-response adjustment factor</u> (six implied decimal places) 00000000 Number
3469-3480	12	<u>Weight -1/p * non-response adjustment</u> (seven implied decimal places) 000000000000 Number
3481-3483	3	<u>Recode SC0019-8C0021: During the last year of life, how long did -- live in any type of health care facility, hospice, or any type of institution?</u> 000-365 Number of days 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non response/could not calculate
3484-3486	3	<u>Recode SC0022-SC0024: During the last year of life, how long did -- live in the (type of health care facility, or institution in SC0013) or any (other) type of health care facility, or any type of institution?</u> 000-365 Number of days 994 Refused 995 Don't know 996 Not applicable

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File Location	Field size	Item and code outline
		998 Blank/out of range 999 Non response/could not calculate
3487-3491	5	<u>Recode SC0043-SC0046: Altogether, during -- entire life, how long did you and -- live in the same house together?</u> 00001-99990 Number of days 99994 Refused 99995 Don't know 99996 Not applicable 99998 Blank/out of range 99999 Non response/could not calculate
3492-3496	5	<u>Recode SC0047-SC0048: Altogether, how long did you know --?</u> 00001-99990 Number of days 99994 Refused 99995 Don't know 99996 Not applicable 99998 Blank/out of range . 99999 Non response/could not calculate
3497-3500	4	<u>Recode FMF Time of injury</u> 0000 Hours/minutes (military time) Blank Not matched
3501-3505	5	<u>Recode non-response adjustment factor</u> (one implied decimal place) 00000 Number
3506-3508	3	<u>Recode SC0672: In what country was -- born?</u> 101 Eastern Africa 102 Middle Africa 103 Northern Africa 104 Southern Africa 105 Western Africa 106 Other Africa, country not specified 201 Eastern Asia 202 South Central Asia 203 South Eastern Asia 204 Western Asia 205 Other Asia, country not specified 301 Eastern Europe 302 Northern Europe 303 Southern Europe 304 Western Europe

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		305 Other Europe, country not specified 401 Caribbean 402 Central America 403 South America 404 Other Latin America/Caribbean, country not specified 501 North America, excluding United States 601 Australia/New Zealand 602 Melanesia 603 Micronesia 604 Polynesia. 605 Other Oceania/Antarctic, country not specified 701 At sea/abroad, country not specified 994 Refused 995 Don't know 996 Not applicable 998 Blank/out of range 999 Non-response
3509	1	<u>Reserved</u>
3510-3515	6	<u>New ID Number</u> 000000 Number
3516-3523	8	<u>Post stratification factor</u> (6 implied decimal places) 00000000 Number
3524-3528	5	<u>Recoded post stratification factor</u> (1 implied decimal place) 00000 Number
3529-3540	12	<u>Final weight -- selection factor * non-response adjustment factor * post stratification factor</u> (7 implied decimal points) 000000000000 Number
3541-3548	8	<u>Recoded Final weight - selection factor * non-Response adjustment factor * post stratification factor</u> (1 implied decimal point) 00000000 Number
3549	1	<u>Recode ICD: Manner of death from file cause of death codes</u> 1 Natural 2 Accident 3 Suicide 4 Homicide

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		5 Other 6 Undetermined Blank Could not match
3550-3551	2	<u>Recode ICD: Mechanism of injury for all E-coded Causes</u> 01 Cut/pierce 02 Drown/submersion 03 Falls 04 Fire/flames 05 Firearms 06 Motor vehicle driver 07 Motor vehicle occupant 08 Motor vehicle motorcyclist 09 Motor vehicle pedelcyclist 10 Motor vehicle pedestrian 11 Motor vehicle other 12 Poisonings 13 Struck by/against 14 Suffocation 15 Other/unspecified Blank Could not match
3552	1	<u>Recode ICD: Intent of injury for all E-coded causes</u> 1 Unintentional 2 Self-inflicted 3 Assault 4 Other/unspecified Blank Could not match <u>Recoded Facility #1 data</u>
3553	1	<u>RCD0620/SC0640: Facility #1 type</u> 1 Hospital 2 Alcohol, chemical dependency, psychiatric treatment facility 3 Nursing home 4 Hospice 9 Non-respondent Blank Unknown/no facility reported
3554-3555	2	<u>RCD0622: Facility #1 regional location</u> 01 Northeast 02 Midwest 03 South 04 West 99 Non-respondent Blank Unknown/no facility reported
3556-3557	2	<u>RCD4314: Facility #1 organization</u>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		01 Government, nonfederal 02 Nongovernment, not-for-profit 03 Investor-owned, for-profit 04 Government, federal 05 Other 99 Non-respondent Blank Unknown/no facility reported
3558-3562	5	Recoded facility #2 data
3563-3567	5	Recoded facility #3 data
3568-3572	5	Recoded facility #4 data
3573-3577	5	Recoded facility #5 data
3578-3582	5	Recoded facility #6 data
3583-3587	5	Recoded facility #7 data
3588-3592	5	Recoded facility #8 data
3593-3597	5	Recoded facility #9 data
3598-3602	5	Recoded facility #10 data
3603-3607	5	Recoded facility #11 data
3608-3612	5	Recoded facility #12 data
		<u>Facility #1 location data</u>
3613	1	<u>Regional location</u> 1 Northeast 2 Midwest 3 South 4 West 8 Unknown 9 Non-respondent Blank No facility reported
3614-3615	2	<u>State location</u> 01 Alabama 02 Alaska 03 Arizona 04 Arkansas 05 California 06 Colorado 07 Connecticut 08 Delaware 09 District of Columbia 10 Florida.

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		11 Georgia 12 Hawaii 13 Idaho 14 Illinois 15 Indiana 16 Iowa 17 Kansas 18 Kentucky 19 Louisiana 20 Maine 21 Maryland 22 Massachusetts 23 Michigan 24 Minnesota 25 Mississippi 26 Missouri 27 Montana 28 Nebraska 29 Nevada 30 New Hampshire 31 New Jersey 32 New Mexico 33 New York 34 North Carolina 35 North Dakota 36 Ohio 37 Oklahoma 38 Oregon 39 Pennsylvania 40 Rhode Island 41 South Carolina 42 South Dakota 43 Tennessee 44 Texas 45 Utah 46 Vermont 47 Virginia 48 Washington 49 West Virginia 50 Wisconsin 51 Wyoming 88 Unknown 99 Non-respondent Blank No facility reported
3616-3618	3	<p><u>1980 Census County/county equivalents location</u> NOTE: to uniquely identify a county, both state and county codes must be used. See <i>Public Use Data File Documentation: Mortality Detail, 1993 Data</i> for detailed description.</p> <p>000-nnn County code 888 Unknown 999 Non-respondent Blank No facility reported</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
3619-3621	3	<p><u>1990 Census Metropolitan statistical area location</u> See <i>Public Use Data File Documentation: Mortality Detail, 1993 Data</i> for detailed description.</p> <p>000-nnn MSA code 888 Unknown 999 Non-respondent Blank No facility reported</p>
3622	1	<p><u>1980 Census Metropolitan/non-metropolitan county location</u></p> <p>1 Metropolitan county 2 Non-metropolitan county 8 Unknown 9 Non-respondent Blank No facility reported</p>
3623-3625	3	<p><u>1980 Census Cities of 10,000+ location</u> NOTE: to uniquely identify a city, both state and city codes must be used. See <i>Public Use Data File Documentation: Mortality Detail, 1993 Data</i> for detailed description.</p> <p>000-nnn City code 888 Unknown 999 Non-respondent/not a city of 10,000+ Blank No facility reported</p>
3626	1	<p><u>1980 Population size of place</u></p> <p>0 1,000,000 or more 1 500,000 to 1,000,000 2 250,000 to 500,000 3 100,000 to 250,000 4 50,000 to 100,000 5 25,000 to 50,000 6 10,000 to 25,000 8 Unknown 9 Non-respondent/place of <10,000 Blank No facility reported</p>
3627-3640	14	Facility #2 location data
3641-3654	14	Facility #3 location data
3655-3668	14	Facility #4 location data
3669-3682	14	Facility #5 location data
3683-3696	14	Facility #6 location data
3697-3710	14	Facility #7 location data

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File Location	Field size	Item and code outline
3711-3724	14	Facility #8 location data
3725-3738	14	Facility #9 location data
3739-3752	14	Facility #10 location data
3753-3766	14	Facility #11 location data
3767-3780	14	Facility #12 location data
3781	1	<p><u>Recode Facility #1: Regional difference between location of facility #1 and residence</u></p> <p>0 Foreign residence 1 Facility and residence in same region 2 Facility and residence in different region 7 No facility reported 8 Facility location unknown 9 Non-respondent</p>
3782	1	<p><u>Recode Facility #1: State difference between location of facility #1 and residence</u></p> <p>0 Foreign residence 1 Facility and residence in same state 2 Facility and residence in different state 7 No facility reported 8 Facility location unknown 9 Non-respondent</p>
3783	1	<p><u>Recode Facility #1: County difference between location of facility #1 and residence</u></p> <p>0 Foreign residence 1 Facility and residence in same county 2 Facility and residence in different county 7 No facility reported 8 Facility location unknown 9 Non-respondent</p>
3784-3786	3	Recode Facility #2: Location differences
3787-3789	3	Recode Facility #3: Location differences
3790-3792	3	Recode Facility #4: Location differences
3793-3795	3	Recode Facility #5: Location differences
3796-3798	3	Recode Facility #6: Location differences
3799-3801	3	Recode Facility #7: Location differences
3802-3804	3	Recode Facility #8: Location differences

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File Location	Field size	Item and code outline
3805-3807	3	Recode Facility #9: Location differences
3808-3810	3	Recode Facility #10: Location differences
3811-3813	3	Recode Facility #11: Location differences
3814-3816	3	Recode Facility #12: Location differences
3817-3821	5	<p><u>Recode SC0015-SC0017: How long did -- live in (city or county) and state in SC0014?</u></p> <p>00001-40543 Number of days range 99994 Refused 99995 Don't know 99996 Not applicable 99998 Blank/out of range 99999 Non-respondent/could not calculate</p>
3822-3823	2	<p><u>Recode SC0054-SC0056 What was the total amount of time -- spent in a nursing home over -- entire lifetime?</u></p> <p>01 Less than 3 months? 02 3 months to less than 1 year? 03 1 year to less than 5 years? 04 5 years or more? 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent/could not calculate</p>
3824-3825	2	<p><u>Recode SC0541-0542: About how old was -- during the period when -- drank the most?</u></p> <p>01 Younger than 20 years old 02 20 to 29 years old 03 30 to 39 years old 04 40 to 49 years old 05 50 to 59 years old 06 60 to 69 years old 07 70 years or older 94 Refused 95 Don't know 96 Not applicable 98 Blank/out of range 99 Non-respondent/could not calculate</p>
3826-3827	2	<p><u>Recode SC0545-0547: For how many years did -- drink about (number in SC0544) drink(s) (frequency in SC0543)?</u></p> <p>00-90 Years range</p>

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File Location	Field size	Item and code outline
		94 Refused
		95 Don't know
		96 Not applicable
		98 Blank/out of range
		99 Non-respondent

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
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MEDICAL EXAMINER/CORONER RECORD DATA

3828	1	ME/C qualified sample decedents
3829	1	Permit received from next-of-kin 0 No 1 Yes
3830	1	Certification of death (from PRELIMINARY death certificate file) 1 Certified by medical examiner/coroner
3831	1	ME/C certified death due to external cause or reported as pending determination (from PRELIMINARY death certificate file) 1 External or pending/undetermined cause of death
3832-3836	5	ME/C Non-authorization adjustment factor -- three decimal points Values vary by record
3837-3838	2	ME/C Non-authorization adjustment factor -- one implied decimal point Values vary by record
3839-3846	8	ME/C final weight (survey final weight – positions 24-31 X ME/C non-authorization adjustment factor X ME/C non-response adjustment factor) -- three decimal points. NOTE: this weight is to be used for any analysis which includes medical examiner/coroner data. <u>Do not use final survey weights given earlier in positions 24-31.</u> Values vary by record
3847	1	index for inhouse file
3848	1	index for me/c file
3849	1	index for injury file
3850	1	index for toxicology file
3851-3854	4	Reserved

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
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Section A -- Decedent information

3855--3857	3	<p><u>MEC012: Age at death</u></p> <p>015-102 Age in years 993 Out-of-scope 996 Stated as unknown 999 Non-respondent</p>
3858-3859	2	<p><u>Recode 1 MEC012: Age at death</u></p> <p>29 15 to 19 years 30 20 to 24 years 31 25 to 29 years 32 30 to 34 years 33 35 to 39 years 34 40 to 44 years 35 45 to 49 years 36 50 to 54 years 37 55 to 59 years 38 60 to 64 years 39 65 to 69 years 40 70 to 74 years 41 75 to 79 years 42 80 to 84 years 43 85 to 89 years 44 90 to 94 years 45 95 to 99 years 46 100 to 104 years 93 Out of scope 96 Stated as unknown 99 Non-respondent</p>
3860-3861	2	<p><u>Recode 2 MEC012: Age at death</u></p> <p>04 15 to 24 years 05 25 to 34 years 06 35 to 44 years 07 45 to 54 years 08 55 to 64 years 09 65 to 74 years 10 75 to 84 years 11 85 years and over 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent</p>
3862-3863	2	<p><u>MEC013: Gender</u></p> <p>01 Male</p>

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File Location	Field size	Item and code outline
		02 Female 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3864-3865	2	<u>MEC014: Race</u> 01 White 02 Black 03 Indian (American) 04 Eskimo 05 Aleut 06 Chinese 07 Filipino 08 Hawaiian 09 Korean 10 Vietnamese 11 Japanese 12 Asian Indian 13 Samoan 14 Guamanian 15 Other Asian/Pacific Islander 16 Other Race 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3866-3867	2	<u>Recode1 MEC014: Race</u> 01 White 02 Black 03 American Indian, Eskimo, Aleut 04 Chinese 05 Japanese 06 Hawaiian 07 Filipino 08 Other Asian and Pacific Islander 09 Other race 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3868-3869	2	<u>Recode2 MEC014: Race</u> 01 White 02 Black 03 American Indian, Eskimo, Aleut 04 Asian and Pacific Islander 05 Other race 88 Not stated 93 Out of scope 96 Stated as unknown

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File Location	Field size	Item and code outline
		99 Non-respondent
3870-3871	2	<u>MEC015: Hispanic Origin</u> 01 Of Hispanic origin 02 Not of Hispanic origin 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3872-3873	2	<u>MEC016: Hispanic national origin/ancestry</u> 01 Puerto Rican 02 Cuban 03 Mexican/Mexicano 04 Mexican American 05 Chicano 06 Other Latin American 07 Other Spanish 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
3874-3875	2	<u>MEC017: Marital status</u> 01 Married 02 Widowed 03 Divorced 04 Separated 05 Never married 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent

Section B -- Time and Location of events surrounding death/fatal injury

		<u>MEC018: Date last seen alive</u>
3876-3877	2	<u>Month</u> 01-12 Month 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3878-3879	2	<u>Day</u> 01-31 Day 88 Not stated 93 Out of scope

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		96 Stated as unknown 99 Non-respondent
3880-3883	4	<u>Year</u> 1992-1993 Year 8888 Not stated 9993 Out of scope 9996 Stated as unknown 9999 Non-respondent
		<u>MEC019: Time last seen alive</u>
3884-3885	2	<u>Hour</u> 00-23 Hour 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3886-3887	2	<u>Minute</u> 00-59 Minute 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3888-3893	6	<u>Recode MEC018-019: Elapsed time between – and last seen alive</u> 000000-034506 Minutes 999993 Out of scope 999996 Unknown/could not calculate 999999 Non-respondent
3894-3895	2	<u>MEC022: Location last seen alive</u> 01 Access road 02 Air space 03 Airport 04 Drug treatment center 05 Alley 06 Bathroom 07 Beach including foreshore 08 Bedroom 09 Bus station 10 Camping site 11 Cinema, concert hall, theater 12 Construction site 13 Correctional facility 14 Driveway 15 DOA 16 Emergency vehicle 17 Factory, shipyard 18 Farm, agricultural area

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		19 Garage, workshop, residential
		20 Hospice
		21 Hospital, ER
		22 Hospital, inpatient
		23 Hotel, motel, boarding house
		24 Nursing home
		25 Interstate highway
		26 Kitchen
		27 Lake, pond
		28 Living room
		29 Military installation
		30 Nightclub, discotheque
		31 Office building
		32 Offshore installation
		33 Health care facility, specified
		34 Other indoors residence
		35 Other outdoors residence
		36 Parking lot
		37 Park
		38 Playground, amusement park
		39 Public building
		40 Public works
		41 Residence, inside specified
		42 Residence, outside specified
		43 Residence, unspecified
		44 Bar, cafeteria, restaurant
		45 Retail/wholesale store, shopping mall
		46 River, stream
		47 Road, unspecified
		48 College, school, university
		49 Bay, inlet
		49 Ocean, sea
		50 Arena, gym, sports stadium
		51 Stairs, indoors residential
		52 Street
		53 Swimming pool
		54 Train station
		55 Forest, mountains, uncultivated land
		56 Boat, ship, vessel
		57 Garden/yard, residential
		58 Alcohol treatment center
		59 Basement
		60 Ditch
		61 Woods
		62 Unspecified place
		63 Railroad tracks
		88 Not Stated
		89 Other place specified
		93 Out of scope
		96 Stated as unknown
		99 Non-respondent
3896-3897	2	<u>Recode MEC022: Location last seen alive</u>
		01 Transport area

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		02 Residential area 03 Production and workshop area 04 Retail, commercial, and service area 05 Health care facility premises 06 School, public premises 07 Sport area 08 Amusement, entertainment, park area 09 Open countryside 10 Sea, lake, river 88 Not stated 89 Other place specified 93 Out of scope 96 Stated as unknown 99 Non-respondent
		<u>MEC023-026: Occurrence of fatal injury</u>
		<u>MEC023: Date of fatal injury</u>
3898-3899	2	<u>Month</u> 01-12 Month 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3900-3901	2	<u>Day</u> 01-31 Day 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3902-3905	4	<u>Year</u> 1971-1993 Year 8888 Not stated 9993 Out of scope 9996 Stated as unknown 9999 Non-respondent
		<u>MEC024: Time of fatal injury</u>
3906-3907	2	<u>Hour</u> 00-23 Hour 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3908-3909	2	<u>Minute</u> 00-59 Minute 88 Not stated

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		93 Out of scope 96 Stated as unknown 99 Non-respondent
3910-3915	6	<u>Recode MEC023-024: Elapsed time between ____ and fatal injury</u> 000000-698997 Minutes 999993 Out of scope 999996 Unknown/could not calculate 999999 Non-respondent
3916-3917	2	<u>MEC026: Location where fatal injury occurred</u> 01 Access road 02 Air space 03 Airport 04 Drug treatment center 05 Alley 06 Bathroom 07 Beach including foreshore 08 Bedroom 09 Bus station 10 Camping site 11 Cinema, concert hall, theater 12 Construction site 13 Correctional facility 14 Driveway 15 DOA 16 Emergency vehicle 17 Factory, shipyard 18 Farm, agricultural area 19 Garage, workshop, residential 20 Hospice 21 Hospital, ER 22 Hospital, inpatient 23 Hotel, motel, boarding house 24 Nursing home 25 Interstate highway 26 Kitchen 27 Lake, pond 28 Living room 29 Military installation 30 Nightclub, discotheque 31 Office building 32 Offshore installation 33 Health care facility, specified 34 Other indoors residence 35 Other outdoors residence 36 Parking lot 37 Park 38 Playground, amusement park 39 Public building 40 Public works 41 Residence, inside specified

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		42 Residence, outside specified
		43 Residence, unspecified
		44 Bar, cafeteria, restaurant
		45 Retail/wholesale store, shopping mall
		46 River, stream
		47 Road, unspecified
		48 College, school, university
		49 Bay, inlet
		49 Ocean, sea
		50 Arena, gym, sports stadium
		51 Stairs, indoors residential
		52 Street
		53 Swimming pool
		54 Train station
		55 Forest, mountains, uncultivated land
		56 Boat, ship, vessel
		57 Garden/yard, residential
		58 Alcohol treatment center
		59 Basement
		60 Ditch
		61 Woods
		62 Unspecified place
		63 Railroad tracks
		88 Not Stated
		89 Other place specified
		93 Out of scope
		96 Stated as unknown
		99 Non-respondent

MEC023-026: Occurrence of fatal injury – continued

3918-3919 2

Recode MEC026: Location where fatal injury Occurred

01	Transport area
02	Residential area
03	Production and workshop area
04	Retail, commercial, and service area
05	Health care facility premises
06	School, public premises
07	Sport area
08	Amusement, entertainment, park area
09	Open countryside
10	Sea, lake, river
88	Not stated
89	Other place specified
93	Out of scope
96	Stated as unknown
99	Non-respondent

MEC027-030: Discovery of body

MEC027: Date of discovery

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
3920-3921	2	<u>Month</u> 01-12 Month 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3922-3923	2	<u>Day</u> 01-31 Day 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3924-3927	4	<u>Year</u> 1993-1994 Year 8888 Not stated 9993 Out of scope 9996 Stated as unknown 9999 Non-respondent
<u>MEC028: Time of discovery</u>		
3928-3929	2	<u>Hour</u> 00-23 Hour 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3930-3931	2	<u>Minute</u> 00-59 Minutes 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3932-3937	6	<u>Recode MEC027-028: Elapsed time between _____ and the discovery of the body</u> 000000-024240 Minutes 999993 Out of scope 999996 Unknown/could not calculate 999999 Non-respondent
3938-3939	2	<u>MEC030: Location where body discovered</u> 01 Access road 02 Air space 03 Airport 04 Drug treatment center 05 Alley 06 Bathroom 07 Beach including foreshore

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		08 Bedroom
		09 Bus station
		10 Camping site
		11 Cinema, concert hall, theater
		12 Construction site
		13 Correctional facility
		14 Driveway
		15 DOA
		16 Emergency vehicle
		17 Factory, shipyard
		18 Farm, agricultural area
		19 Garage, workshop, residential
		20 Hospice
		21 Hospital, ER
		22 Hospital, inpatient
		23 Hotel, motel, boarding house
		24 Nursing home
		25 Interstate highway
		26 Kitchen
		27 Lake, pond
		28 Living room
		29 Military installation
		30 Nightclub, discotheque
		31 Office building
		32 Offshore installation
		33 Health care facility, specified
		34 Other indoors residence
		35 Other outdoors residence
		36 Parking lot
		37 Park
		38 Playground, amusement park
		39 Public building
		40 Public works
		41 Residence, inside specified
		42 Residence, outside specified
		43 Residence, unspecified
		44 Bar, cafeteria, restaurant
		45 Retail/wholesale store, shopping mall
		46 River, stream
		47 Road, unspecified
		48 College, school, university
		49 Bay, inlet
		49 Ocean, sea
		50 Arena, gym, sports stadium
		51 Stairs, indoors residential
		52 Street
		53 Swimming pool
		54 Train station
		55 Forest, mountains, uncultivated land
		56 Boat, ship, vessel
		57 Garden/yard, residential
		58 Alcohol treatment center
		59 Basement
		60 Ditch
		61 Woods

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		62 Unspecified place 63 Railroad tracks 88 Not stated 89 Other place specified 93 Out of scope 96 Stated as unknown 99 Non-respondent
3940-3941	2	<u>Recode MEC030: Location where body discovered</u> 01 Transport area 02 Residential area 03 Production and workshop area 04 Retail, commercial, and service area 05 Health care facility premises 06 School, public premises 07 Sport area 08 Amusement, entertainment, park area 09 Open countryside 10 Sea, lake, river 88 Not stated 89 Other place specified 93 Out of scope 96 Stated as unknown 99 Non-respondent <u>MEC031-034: Occurrence of death</u> <u>MEC031: Date death occurred</u> <u>Month</u> 01-12 Month 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent <u>Day</u> 01-31 Day 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent <u>Year</u> 1993 Year 8888 Not stated 9993 Out of scope 9996 Stated as unknown 9999 Non-respondent <u>MEC032: Time death occurred</u> <u>Hour</u> 00-23 Hour
3942-3943	2	
3944-3945	2	
3946-3949	4	
3950-3951	2	

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3952-3953	2	<u>Minute</u> 00-59 Minute 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3954-3955	2	<u>MEC034: Location where death occurred</u> 01 Access road 02 Air space 03 Airport 04 Drug treatment center 05 Alley 06 Bathroom 07 Beach including foreshore 08 Bedroom 09 Bus station 10 Camping site 11 Cinema, concert hall, theater 12 Construction site 13 Correctional facility 14 Driveway 15 DOA 16 Emergency vehicle 17 Factory, shipyard 18 Farm, agricultural area 19 Garage, workshop, residential 20 Hospice 21 Hospital, ER 22 Hospital, inpatient 23 Hotel, motel, boarding house 24 Nursing home 25 Interstate highway 26 Kitchen 27 Lake, pond 28 Living room 29 Military installation 30 Nightclub, discotheque 31 Office building 32 Offshore installation 33 Health care facility, specified 34 Other indoors residence 35 Other outdoors residence 36 Parking lot 37 Park 38 Playground, amusement park 39 Public building 40 Public works 41 Residence, inside specified

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		42 Residence, outside specified 43 Residence, unspecified 44 Bar, cafeteria, restaurant 45 Retail/wholesale store, shopping mall 46 River, stream 47 Road, unspecified 48 College, school, university 49 Bay, inlet 49 Ocean, sea 50 Arena, gym, sports stadium 51 Stairs, indoors residential 52 Street 53 Swimming pool 54 Train station 55 Forest, mountains, uncultivated land 56 Boat, ship, vessel 57 Garden/yard, residential 58 Alcohol treatment center 59 Basement 60 Ditch 61 Woods 62 Unspecified place 63 Railroad tracks 88 Not stated 89 Other place specified 93 Out of scope 96 Stated as unknown 99 Non-respondent
		<u>MEC031-034: Occurrence of death -- continued</u>
3956-3957	2	Recode MEC034: Location where death occurred 01 Transport area 02 Residential area 03 Production and workshop area 04 Retail, commercial, and service area 05 Health care facility premises 06 School, public premises 07 Sport area 08 Amusement, entertainment, park area 09 Open countryside 10 Sea, lake, river 88 Not stated 89 Other place specified 93 Out of scope 96 Stated as unknown 99 Non-respondent
		<u>MEC031A-034A: Pronouncement of death</u>
		<u>MEC031A: Date death was pronounced</u>
3958-3959	2	<u>Month</u> 01-12 Month

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3960-3961	2	<u>Day</u> 01-31 Day 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3962-3965	4	<u>Year</u> 1993-1994 Year 8888 Not stated 9993 Out of scope 9996 Stated as unknown 9999 Non-respondent MEC032A: Time death was pronounced
3966-3967	2	<u>Hour</u> 00-23 Hour 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent <u>MEC031A-034A: Pronouncement of death</u> <u>-- continued</u> MEC032A: Time death was pronounced
3968-3969	2	<u>Minute</u> 00-59 Minute 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3970-3975	6	<u>Recode031A-032A: Elapsed time between ____ and pronouncement of death</u> 000000-023090 Minutes 999993 Out of scope 999996 Unknown/could not calculate 999999 Non-respondent
3976-3977	2	<u>MEC034A: Location where death was pronounced</u> 01 Access road 02 Air space 03 Airport 04 Drug treatment center

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		05 Alley
		06 Bathroom
		07 Beach including foreshore
		08 Bedroom
		09 Bus station
		10 Camping site
		11 Cinema, concert hall, theater
		12 Construction site
		13 Correctional facility
		14 Driveway
		15 DOA
		16 Emergency vehicle
		17 Factory, shipyard
		18 Farm, agricultural area
		19 Garage, workshop, residential
		20 Hospice
		21 Hospital, ER
		22 Hospital, inpatient
		23 Hotel, motel, boarding house
		24 Nursing home
		25 Interstate highway
		26 Kitchen
		27 Lake, pond
		28 Living room
		29 Military installation
		30 Nightclub, discotheque
		31 Office building
		32 Offshore installation
		33 Health care facility, specified
		34 Other indoors residence
3976-3977	2	MEC034A: Location where death was pronounced -- continued
		35 Other outdoors residence
		36 Parking lot
		37 Park
		38 Playground, amusement park
		39 Public building
		40 Public works
		41 Residence, inside specified
		42 Residence, outside specified
		43 Residence, unspecified
		44 Bar, cafeteria, restaurant
		45 Retail/wholesale store, shopping mall
		46 River, stream
		47 Road, unspecified
		48 College, school, university
		49 Bay, inlet
		49 Ocean, sea
		50 Arena, gym, sports stadium
		51 Stairs, indoors residential
		52 Street

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		53 Swimming pool 54 Train station 55 Forest, mountains, uncultivated land 56 Boat, ship, vessel 57 Garden/yard, residential 58 Alcohol treatment center 59 Basement 60 Ditch 61 Woods 62 Unspecified place 63 Railroad tracks 88 Not stated 89 Other place specified 93 Out of scope 96 Stated as unknown 99 Non-respondent
3978-3979	2	<u>Recode MEC034A: Location where death was pronounced</u> 01 Transport area 02 Residential area 03 Production and workshop area 04 Retail, commercial, and service area 05 Health care facility premises 06 School, public premises 07 Sport area 08 Amusement, entertainment, park area 09 Open countryside 10 Sea, lake, river 88 Not stated 89 Other place specified 93 Out of scope 96 Stated as unknown 99 Non-respondent
3980-3981	2	<u>MEC035: Number of deaths resulting from fatal event</u> 01 Decedent only 02-06 Number 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
<u>Section C -- Decedent's Activity and Impairments</u>		
3982-3983	2	<u>MEC036: Decedent's activity at time of death/fatal injury</u> 01 Alleged criminal activity 02 Athletics, sports, exercise 03 Cleaning/household chores

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File Location	Field size	Item and code outline
		04 Health related 05 Paid work 06 Play/leisure activity 07 Preparing meals 08 Property maintenance, inside 09 Property maintenance, outside 10 Running errand 11 School/education 12 Unpaid/volunteer work 13 Other 14 Eating 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
3984-3985	2	<u>MEC037: Decedent's pattern of movement</u> 01 Conveyance by motor vehicle 02 Conveyance by non-motor vehicle 03 Getting up, sitting down 04 Handling tools, machinery, materials, objects 05 Lifting, carrying, pulling, pushing 06 Standing, sitting, lying 07 Swimming, diving 08 Walking, running, jumping 09 Other movement 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent <u>Recode MEC038-056: Decedent's impairment(s) at time of death/fatal injury</u>
3986-3987	2	<u>MEC038:</u> 01 Physical disability present 88 Not stated 93 Out of scope 98 Blank 96 Stated as unknown 99 Non-respondent
3988-3989	2	<u>MEC039:</u> 02 Mental disability present 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
3990-3991	2	<u>MEC040:</u> 03 Presence of alcohol

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File Location	Field size	Item and code outline
		88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
3992-3993	2	<u>MEC041:</u> 04 Presence of drugs 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
3994-3995	2	<u>MEC042:</u> 05 Presence of intoxication from other substance 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
3996-3997	2	<u>MEC043:</u> 06 Alzheimer's condition 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
		<u>Recode MEC038-056: Decedent's impairment(s) at time of death/fatal injury -- continued</u>
3998-3999	2	<u>MEC044:</u> 07 Arthritic condition 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4000-4001	2	<u>MEC045:</u> 08 Cancer 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4002-4003	2	<u>MEC046:</u> 09 COPD 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank

**1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent,
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File Location	Field size	Item and code outline
4004-4005	2	99 Non-respondent <u>MEC047:</u> 10 Diabetes 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4006-4007	2	<u>MEC048:</u> 11 Heart disease 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4008-4009	2	<u>MEC049:</u> 12 HIV/AIDS 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4010-4011	2	<u>MEC050:</u> 13 Hypertension 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent <u>Recode MEC038-056: Decedent's impairment(s) at time of death/fatal injury – continued</u>
4012-4013	2	<u>MEC051:</u> 14 Organic brain syndrome, dementia, senility 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4014-4015	2	<u>MEC052:</u> 15 Osteoporoses 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4016-4017	2	<u>MEC053:</u> 16 Stroke 88 Not stated

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4018-4019	2	<u>MEC054:</u> 17 Other health condition 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4020-4021	2	<u>MEC055:</u> 18 Unknown 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4022-4023	2	<u>MEC056:</u> 19 Not stated 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
 <u>Section D -- Firearm related death/fatal injury</u>		
4024-4025	2	<u>MEC057: Fatal event resulted from discharge of firearm</u> 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4026-4027	2	<u>MEC058: Type of firearm</u> 01 Revolver 02 Pistol 03 Handgun, unspecified 04 Shotgun 05 Rifle 06 Machine gun

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		07 Other 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4028-4033	6	<u>MEC059: Caliber</u> 22-357;5mm-7.62mm Caliber 888888 Not stated 999993 Out of scope 999994 Not applicable 999996 Stated as unknown 999999 Non-respondent
4034-4037	4	<u>MEC060: Gauge</u> 0010-3030 Gauge 8888 Not stated 9993 Out of scope 9994 Not applicable 9996 Stated as unknown 9999 Non-respondent
4038-4039	2	<u>MEC061: Relationship of decedent to person discharging firearm</u> 01 Self (decedent) 02 Present spouse 03 Former spouse 04 Present companion 05 Former companion 06 Father/step father 07 Mother/step mother 08 Son/step son
4038-4039	2	<u>MEC061: Relationship of decedent to person discharging firearm – continued</u> 09 Daughter/step daughter 10 Brother/step brother 11 Sister/step sister 12 Other relative 13 Friend 14 Co-worker/colleague 15 Law enforcement official 16 Other 17 Roommate 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
4040-4041	2	<p><u>Recode MEC061: Relationship of decedent to person discharging firearm</u></p> <p>01 Self 02 Relative 03 Law enforcement official 04 Other non-relative 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent</p> <p><u>Recode MEC062-080: Circumstances related to firearm discharge</u></p>
4042-4043	2	<p><u>MEC062:</u></p> <p>01 Abduction 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent</p>
4044-4045	2	<p><u>MEC063:</u></p> <p>02 Sexual assault 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent</p>
4046-4047	2	<p><u>MEC064:</u></p> <p>03 Other type of assault 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent</p> <p><u>Recode MEC062-080: Circumstances related to firearm Discharge – continued</u></p>
4048-4049	2	<p><u>MEC065:</u></p> <p>04 Cleaning/working on firearm 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent</p>
4050-4051	2	<p><u>MEC066:</u></p> <p>05 Domestic dispute 88 Not stated 93 Out of scope 94 Not applicable</p>

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File Location	Field size	Item and code outline
		98 Blank 99 Non-respondent
4052-4053	2	<u>MEC067:</u> 06 Non-domestic dispute 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent
4054-4055	2	<u>MEC068:</u> 07 Drive-by shooting 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent
4056-4057	2	<u>MEC069:</u> 08 Drug activity 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent
4058-4059	2	<u>MEC070:</u> 09 Gang activity 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent
4060-4061	2	<u>MEC071:</u> 10 Homicide 88 Not stated 93 Out of scope Recode MEC062-080: Circumstances related to firearm Discharge – continued
4060-4061	2	<u>MEC071: -- continued</u> 94 Not applicable 98 Blank 99 Non-respondent
4062-4063	2	<u>MEC072:</u> 11 Hunting incident 88 Not stated 93 Out of scope 94 Not applicable 98 Blank

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		99 Non-respondent
4064-4065	2	<u>MEC073:</u> 12 Legal intervention 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent
4066-4067	2	<u>MEC074:</u> 13 Playing with firearm 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent
4068-4069	2	<u>MEC075:</u> 14 Random shooting 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent
4070-4071	2	<u>MEC076:</u> 15 Robbery 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent
4072-4073	2	<u>MEC077:</u> 16 Suicide 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent
		<u>Recode MEC062-080: Circumstances related to firearm Discharge – continued</u>
4074-4075	2	<u>MEC078:</u> 17 Other circumstance 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent
4076-4077	2	<u>MEC079:</u>

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File Location	Field size	Item and code outline
		18 Unknown 88 Not stated 93 Out of scope 94 Not applicable 98 Blank 99 Non-respondent
4078-4079	2	<u>MEC080:</u> 19 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
<u>Section E -- Manner of death</u>		
4080-4081	2	<u>MEC081: Manner of death</u> 01 Transport accident 02 Non-transport accident 03 Homicide 04 Suicide 05 Undetermined 93 Out of scope 99 Non-respondent
<u>Section F -- Transport accident</u>		
4082-4083	2	<u>MEC082: Number of vehicles involved</u> 00 -05 Number 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
		<u>Recode MEC083-MEC095: Type of vehicle(s) involved</u>
4084-4085	2	<u>MEC083:</u> 01 Airplane 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		99 Non-respondent
4086-4087	2	<u>MEC084:</u> 02 Bicycle 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4088-4089	2	<u>MEC085:</u> 03 Boat 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4090-4091	2	<u>MEC086:</u> 04 Bus 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4092-4093	2	<u>MEC087:</u> 05 Farm equipment 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4094-4095	2	<u>MEC088:</u> 06 Motorcycle, motor scooter 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
		<u>Recode MEC083-MEC095: Type of vehicle(s) Involved -- continued</u>
4096-4097	2	<u>MEC089:</u> 07 Passenger car 88 Not stated 93 Out of scope 94 Not applicable

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		96 Stated as unknown 98 Blank 99 Non-respondent
4098-4099	2	<u>MEC090:</u> 08 Train 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4100-4101	2	<u>MEC091:</u> 09 Truck, heavy (semi, tractor-trailer/cargo) 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4102-4103	2	<u>MEC092:</u> 10 Truck, light (van, pickup, multipurpose) 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4104-4105	2	<u>MEC093:</u> 11 Other type of vehicle 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4106-4107	2	<u>MEC094:</u> 12 Unknown 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
		Recode MEC083-MEC095: Type of vehicle(s) Involved -- continued
4108-4109	2	<u>MEC095:</u> 13 Not stated 88 Not stated

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4110-4111	2	<u>MEC096: Decedent's role in fatal event</u> 01 Driver/pilot, sole occupant 02 Driver/pilot, occupants present 03 Passenger, front 04 Passenger, rear 05 Passenger, unspecified 06 Pedestrian 07 Other 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent <u>Recode MEC097-MEC101A: Safety equipment used/worn by decedent</u>
4112-4113	2	<u>MEC097:</u> 01 Helmet 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4114-4115	2	<u>MEC098:</u> 02 Seat belt 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4116-4117	2	<u>MEC099:</u> 03 Other safety equipment 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent <u>Recode MEC097-MEC101A: Safety equipment used/worn by decedent -- continued</u>
4118-4119	2	<u>MEC101A:</u>

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File Location	Field size	Item and code outline
		04 None 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4120-4121	2	<u>MEC100:</u> 05 Unknown 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4122-4123	2	<u>MEC101:</u> 06 Not stated 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
		<u>Recode MEC102-MEC108: Safety equipment on decedent's vehicle</u>
4124-4125	2	<u>MEC102:</u> 01 Driver seat belt 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4126-4127	2	<u>MEC103:</u> 02 Passenger seat belt(s) 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4128-4129	2	<u>MEC104:</u> 03 Driver air bag 88 Not stated 93 Out of scope 94 Not applicable
4128-4129	2	<u>MEC104: -- continued</u> 96 Stated as unknown

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File Location	Field size	Item and code outline
		98 Blank 99 Non-respondent
4130-4131	2	<u>MEC105:</u> 04 Passenger air bag 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4132-4133	2	<u>MEC106:</u> 05 Other safety equipment 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4134-4135	2	<u>MEC107:</u> 06 Unknown 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4136-4137	2	<u>MEC108:</u> 07 Not stated 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4138-4139	2	<u>MEC109 Roadway</u> 01 On roadway 02 Shoulder 03 Median 04 Roadside 05 Off roadway 06 Other

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File Location	Field size	Item and code outline
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Section G -- Non-transport accident

4140-4141	2	<p><u>MEC110: Manner of fatal injury</u></p> <ul style="list-style-type: none"> 01 Drowning 02 Fall 03 Fire/flames 04 Natural/environmental 05 Poisoning 06 Other 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4142-4143	2	<p><u>MEC111: Water source</u></p> <ul style="list-style-type: none"> 01 Bathtub or shower 02 Bay or estuary 03 Harbor or marina 04 Lake/pond 05 Ocean 06 River <p style="text-align: center;"><u>Swimming pool</u></p> <ul style="list-style-type: none"> 07 Public, in-ground 08 Public, above ground 09 Private, in-ground 10 Private, above ground 11 Unspecified as to public or private 12 Unspecified 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4144-4145	2	<p><u>MEC112: Cause of fall</u></p> <ul style="list-style-type: none"> 01 Collision with person/animal 02 Collision with moving object 03 Collision with static object 04 Fall on/down escalator 05 Fall on/down stairs/steps 06 Fall/jump/dive from height 07 Slipping/tripping on same level 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent

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File Location	Field size	Item and code outline
4146-4147	2	<p><u>MEC113: Fall:</u></p> <p style="padding-left: 40px;"><u>From:</u></p> <p>01 Building 02 Chair or bed 03 Cliff 04 Ladder 05 Playground equipment 06 Same level 07 Scaffolding 08 Vehicle 09 Other</p> <p style="padding-left: 40px;"><u>Into:</u></p> <p>10 Storm drain or manhole 11 Swimming pool 12 Well 13 Other hole or opening in surface 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent</p>
4148-4149	2	<p><u>MEC114: Type of fire/flame fatal injury</u></p> <p>01 Burns from ignition of clothing 02 Burns from ignition of inflammable material 03 Burns from household/building fire 04 Burns, source other/unspecified 05 Inhalation, polvinylchloride (PVC) 06 Inhalation, other smoke/fumes 07 Inhalation, unspecified source 08 Other 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent</p>
4150-4151	2	<p><u>MEC115: Fire resulted from:</u></p> <p>01 Arson 02 Cooking 03 Electrical problem 04 Explosion 05 Heating 06 Smoking 07 Other 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown</p>

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File Location	Field size	Item and code outline
		99 Non-respondent
4152-4153	2	<p><u>MEC116: Fatal injury resulted from:</u></p> <ul style="list-style-type: none"> 01 Earth surface movement/eruptions 02 Excessive heat 03 Excessive cold 04 Neglect, hunger, thirst, exposure 05 Lightning 06 Storm/flood 07 Other 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4154-4155	2	<p><u>MEC117: Method of poisoning</u></p> <ul style="list-style-type: none"> 01 Exposure 02 Ingestion 03 Inhalation 04 Injection 05 Other 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4156-4157	2	<p><u>MEC118: Form of poisoning agent</u></p> <ul style="list-style-type: none"> 01 Gas 02 Liquid 03 Solid 04 Other 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4158-4159	2	<p><u>MEC120: Poisoning agent</u></p> <ul style="list-style-type: none"> 01 Agricultural/horticultural chemicals 02 Alcoholic beverages 03 Alcohol, other 04 Cleansing and polishing agents 05 Disinfectants 06 Foodstuffs/poisonous plants 07 Motor vehicle exhaust 08 Paints/varnishes 09 Petroleum products, <i>excluding paint</i>

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File Location	Field size	Item and code outline
		10 Other 11 Drugs 12 Drugs and alcohol 88 Not stated 93 Out of scope
4158-4159	2	<u>MEC120: Poisoning agent – continued</u> 94 Not applicable 96 Stated as unknown 99 Non-respondent
<u>Section H -- Homicide</u>		
4160-4161	2	<u>MEC121: Method of homicide</u> 01 Asphyxia 02 Beating 03 Burning 04 Firearm 06 Hit and run (vehicle) 07 Hurling against fixed object 08 Hurling into moving object 09 Poisoning 10 Pushed/thrown from height 11 Stabbing/cutting/piercing 12 Strangulation/smothering/hanging 13 Struck with blunt object 14 Submersion (drowning) 15 Other 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4162-4163	2	<u>MEC122: Number of alleged perpetrators</u> 01 - 05 Number 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4164-4165	2	<u>MEC123: Relationship of decedent to alleged Perpetrator</u> 01 Unknown by decedent 02 Present spouse 03 Former spouse 04 Present companion 05 Former companion

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File Location	Field size	Item and code outline
		06 Father/step father 07 Mother/step mother 08 Son/step son 09 Daughter/step daughter 10 Brother/step brother 11 Sister/step sister 12 Other family member 13 Friend
4164-4165	2	<u>MEC123: Relationship of decedent to alleged Perpetrator – continued</u> 14 Co-worker/colleague 15 Law enforcement official 16 Other 17 Roommate 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4166-4167	2	<u>Recode MEC123: Relationship of decedent to alleged perpetrator</u> 01 Spouse/companion 02 Parent 03 Child 04 Other relative 05 Law enforcement official 06 Other non-relative 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
 <u>Section I -- Suicide</u>		
4168-4169	2	<u>MEC124: Method of suicide</u> 01 Asphyxia <u>Carbon monoxide poisoning from:</u> 02 Motor vehicle exhaust 03 Other source 04 Source unspecified 05 Collision with vehicle 06 Drug/substance overdose 07 Firearm 08 Hanging 09 Jumping from height 10 Poisoning, other than carbon monoxide 11 Stabbing/cutting/piercing

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File Location	Field size	Item and code outline
		12 Submersion (drowning) 13 Vehicular collision 14 Other method 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4170-4171	2	<u>MEC125: Decedent made previous suicide threat(s)</u> 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4172-4173	2	<u>MEC126: Decedent made previous suicide attempt(s)</u> 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent <u>Recode MEC127-MEC137: Factors contributing to suicide</u>
4174-4175	2	<u>MEC127:</u> 01 Depression 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4176-4177	2	<u>MEC128:</u> 02 Financial problems 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4178-4179	2	<u>MEC129:</u> 03 Illness of decedent

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File Location	Field size	Item and code outline
		88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4180-4181	2	<u>MEC130:</u> 04 Legal problems 88 Not stated 93 Out of scope 94 Not applicable Recode MEC127-MEC137: Factors contributing to Suicide – continued
4180-4181	2	<u>MEC130: - continued</u> 96 Stated as unknown 98 Blank 99 Non-respondent
4182-4183	2	<u>MEC131:</u> 05 Loss/death of loved one 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4184-4185	2	<u>MEC132:</u> 06 Marital/relationship/family problems 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4186-4187	2	<u>MEC133:</u> 07 Mental/psychiatric illness other than depression 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4188-4189	2	<u>MEC134:</u> 08 Work related problems 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent

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File Location	Field size	Item and code outline
4190-4191	2	<u>MEC135:</u> 09 Other factor 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4192-4193	2	<u>MEC136:</u> 10 Unknown 88 Not stated 93 Out of scope
4192-4193	2	<u>MEC136: -- continued</u> 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4194-4195	2	<u>MEC137:</u> 11 Not stated 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4196-4197	2	<u>MEC138: Medical history of mental/emotional problems</u> 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
<u>Section J -- Undetermined Manner of Death</u>		
4198-4199	2	<u>MEC139: Statement which BEST describes the circumstances surrounding the undetermined manner of death:</u> 01 Asphyxiation 02 Exposure to elements 03 Ill-defined/unknown cause 04 Sudden death 05 Unattended death 06 Unspecified means of injury 07 Other

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File Location	Field size	Item and code outline
		08 Drug overdose 09 Alcohol overdose 10 Drug & alcohol overdose 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
<u>Section K -- Post mortem examination</u>		
4200-4201	2	<u>MEC140: Type of examination</u> 01 External examination only 02 Autopsy only 03 Autopsy and external exam 04 No autopsy or external exam 88 Not stated 93 Out of scope 96 Stated as unknown 98 Not applicable 99 Non-respondent <u>MEC141: Date of autopsy</u> <u>Month</u> 01-12 Month 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent <u>Day</u> 01-31 Day 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent <u>Year</u> 1993-1994 Year 8888 Not stated 9993 Out of scope 9996 Stated as unknown 9999 Non-respondent <u>MEC142: Time of autopsy</u> <u>Hour</u> 01-23 Hour 88 Not stated
4202-4203	2	
4204-4205	2	
4206-4209	4	
4210-4211	2	

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File Location	Field size	Item and code outline
		93 Out of scope 96 Stated as unknown 99 Non-respondent
4212-4213	2	<u>Minute</u> 01-59 Minute 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4214-4219	6	<u>Recode MEC0141-MEC0142: Elapsed time between and autopsy</u> 000000-525763 Minutes 888888 Not stated 999993 Out of scope 999996 Unknown/could not calculate 999999 Non-respondent
4220-4221	2	<u>Recode MEC141A: Type of autopsy</u> 01 Full 02 Partial 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4222-4223	2	<u>MEC189: Signs of drug use (needle tracks, eroded nasal septum, etc.)</u> 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
<u>Section L -- Organ and tissue donation</u>		
4224-4225	2	<u>MEC199: Decedent designated as an organ/tissue donor</u> 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4226-4227	2	<u>MEC200: Decedent actually donated an organ/tissue</u>

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File Location	Field size	Item and code outline
		01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
		<u>MEC201A-MEC201J Organ/tissue/bone donated</u>
4228-4229	2	<u>MEC201A</u> Bone 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4230-4231	2	<u>MEC201B</u> Cornea 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4232-4233	2	<u>MEC201C</u> Heart 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4234-4235	2	<u>MEC201D</u> Kidney 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4236-4237	2	<u>MEC201E</u> Liver 01 Yes 02 No

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File Location	Field size	Item and code outline
		88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4238-4239	2	<u>MEC201E</u> Brain 01 Yes 02 No 88 Not stated 93 Out of scope <u>MEC201A-MEC201J Organ/tissue/bone donated</u>
4238-4239	2	<u>MEC201F -- continued</u> Brain 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4240-4241	2	<u>MEC201G</u> Lung 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4242-4243	2	<u>MEC201H</u> Pancreas 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4244-4245	2	<u>MEC201I</u> Spleen 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4246-4247	2	<u>MEC201J</u> Other 01 Yes 02 No 88 Not stated 93 Out of scope

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File Location	Field size	Item and code outline
		94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4248-4249	2	<u>MEC207 Permission to donate given by:</u> 01 Decedent 02 Family 03 Other 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 98 Blank 99 Non-respondent
4248-4249	2	<u>MEC038-056: Decedent's impairment(s) at time of death/fatal injury</u> <u>MEC038:</u> Physical disability present 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4252-4253	2	<u>MEC039:</u> Mental disability present 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4254-4255	2	<u>MEC040:</u> Presence of alcohol 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4256-4257	2	<u>MEC041:</u> Presence of drugs 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4258-4259	2	<u>MEC042:</u> Presence of intoxication from other substance 01 Yes

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File Location	Field size	Item and code outline
		02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4260-4261	2	<u>MEC043:</u> Alzheimer's condition 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4262-4263	2	<u>MEC044:</u> Arthritic condition 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4264-4265	2	<u>MEC045:</u> Cancer 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
		<u>MEC038-056: Decedent's impairment(s) at time of death/fatal injury – continued</u>
4266-4267	2	<u>MEC046:</u> COPD 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4268-4269	2	<u>MEC047:</u> Diabetes 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4270-4271	2	<u>MEC048:</u> Heart disease 01 Yes 02 No 88 Not stated 93 Out of scope

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File Location	Field size	Item and code outline
		96 Stated as unknown 99 Non-respondent
4272-4273	2	<u>MEC049:</u> HIV/AIDS 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4274-4275	2	<u>MEC050:</u> Hypertension 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4276-4277	2	<u>MEC051:</u> Organic brain syndrome, dementia, senility 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4278-4279	2	<u>MEC052:</u> Osteoporoses 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4280-4281	2	<u>MEC053:</u> Stroke 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4282-4283	2	<u>MEC054:</u> Other health condition 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4284-4285	2	<u>MEC055:</u> Unknown 01 Yes 02 No

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File Location	Field size	Item and code outline
		88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4286-4287	2	<u>MEC056:</u> Not stated 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
		<u>MEC062-080: Circumstances related to firearm discharge</u>
4288-4289	2	<u>MEC062:</u> Abduction 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4290-4291	2	<u>MEC063:</u> Sexual assault 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4292-4293	2	<u>MEC064:</u> Other type of assault 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4294-4295	2	<u>MEC065:</u> Cleaning/working on firearm 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4296-4297	2	<u>MEC066:</u> Domestic dispute 01 Yes 02 No

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File Location	Field size	Item and code outline
		88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4298-4299	2	<u>MEC067:</u> Non-domestic dispute 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4300-4301	2	<u>MEC068:</u> Drive-by shooting 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4302-4303	2	<u>MEC069:</u> Drug activity 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4304-4305	2	<u>MEC070:</u> Gang activity 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4306-4307	2	<u>MEC071:</u> Homicide 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4308-4309	2	<u>MEC072:</u> Hunting incident

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File Location	Field size	Item and code outline
		01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4310-4311	2	<u>MEC073:</u> Legal intervention 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4312-4313	2	<u>MEC074:</u> Playing with firearm 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4314-4315	2	<u>MEC075:</u> Random shooting 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4316-4317	2	<u>MEC076:</u> Robbery 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4318-4319	2	<u>MEC077:</u> Suicide 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4320-4321	2	<u>MEC078:</u> Other circumstance

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File Location	Field size	Item and code outline
		01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4322-4323	2	<u>MEC079:</u> Unknown 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
4324-4325	2	<u>MEC080:</u> Not stated 01 Yes 02 No 88 Not stated 93 Out of scope 94 Not applicable 96 Stated as unknown 99 Non-respondent
<u>MEC083-MEC095: Type of vehicle(s) involved</u>		
4326-4327	2	<u>MEC083:</u> Airplane 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4328-4329	2	<u>MEC084:</u> Bicycle 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4330-4331	2	<u>MEC085:</u> Boat 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4332-4333	2	<u>MEC086:</u> Bus 01 Yes 02 No

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4334-4335	2	<u>MEC087:</u> Farm equipment 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4336-4337	2	<u>MEC088:</u> Motorcycle, motor scooter 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4338-4339	2	<u>MEC089:</u> Passenger car 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4340-4341	2	<u>MEC090:</u> Train 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4342-4343	2	<u>MEC091:</u> Truck, heavy (semi, tractor-trailer/cargo) 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4344-4345	2	<u>MEC092:</u> Truck, light (van, pickup, multipurpose) 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4346-4347	2	<u>MEC093:</u> Other type of vehicle

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4348-4349	2	<u>MEC094:</u> Unknown 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4350-4351	2	<u>MEC095:</u> Not stated 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
		<u>MEC097-MEC101A: Safety equipment used/worn by decedent</u>
4352-4353	2	<u>MEC097:</u> Helmet 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4354-4355	2	<u>MEC098:</u> Seat belt 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4356-4357	2	<u>MEC099:</u> Other safety equipment 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4358-4359	2	<u>MEC100:</u> Unknown 01 Yes 02 No 88 Not stated 93 Out of scope

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		96 Stated as unknown 99 Non-respondent
4360-4361	2	<u>MEC101:</u> Not stated 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4362-4363	2	<u>MEC101A:</u> None 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
		<u>MEC102-MEC108: Safety equipment on decedent's vehicle</u>
4364-4365	2	<u>MEC102:</u> Driver seat belt 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4366-4367	2	<u>MEC103:</u> Passenger seat belt(s) 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4368-4369	2	<u>MEC104:</u> Driver air bag 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4370-4371	2	<u>MEC105:</u> Passenger air bag 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
4372-4373	2	<u>MEC106:</u> Other safety equipment 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4374-4375	2	<u>MEC107:</u> Unknown 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
4376-4377	2	<u>MEC108:</u> Not stated 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 99 Non-respondent
<u>MEC127-MEC137: Factors contributing to suicide</u>		
4378-4379	2	<u>MEC127:</u> Depression 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4380-4381	2	<u>MEC128:</u> Financial problems 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4382-4383	2	<u>MEC129:</u> Illness of decedent 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4384-4385	2	<u>MEC130:</u> Legal problems

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4386-4387	2	<u>MEC131:</u> Loss/death of loved one 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4388-4389	2	<u>MEC132:</u> Marital/relationship/family problems 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4390-4391	2	<u>MEC133:</u> Mental/psychiatric illness other than depression 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4392-4393	2	<u>MEC134:</u> Work related problems 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4394-4395	2	<u>MEC135:</u> Other factor 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4396-4397	2	<u>MEC136:</u> Unknown

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4398-4399	2	MEC137: Not stated 01 Yes 02 No 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
4400-4401	2	MEC141A: Type of autopsy 01 Complete/Full Autopsy 02 Limited head exam 03 Limited neck exam 04 Limited chest exam 05 Limited abdomen exam 06 Other, Specify 07 Head/neck exam 08 Neck/chest exam 09 Chest/abdomen exam 88 Not stated 93 Out of scope 96 Stated as unknown 98 Blank 99 Non-respondent
<u>Section M -- Autopsy findings</u>		
4402-4403	2	INJ001: Number of injuries reported 00 Out of scope 01-56 Number 93 Out of scope 97 98 Not applicable 99 Non-respondent
4404-5411	1008	<u>Injury summaries</u> <p>Space has been provided for a maximum of 56 injury codes and associated ICD-9-CM codes. Each injury description and ICD-9-CM combination is reported in a thirteen (13) digit field. Records which do not have 56 injuries contain a zero (0) in each of the thirteen corresponding fields.</p>

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
4404-5411	1008	<p>The first 6 positions refer to injury codes and the 7th position refer to the AIS code. See <i>The Abbreviated Injury Scale: 1990 Revision</i>, Association for the Advancement of Automotive Medicine, Des Plaines, Illinois.</p> <p><u>Injury summaries -- continued</u></p> <p><u>Position 1</u> reports the body region of injury as follows:</p> <ul style="list-style-type: none"> 1 Head 2 Face 3 Neck 4 Thorax 5 Abdomen 6 Spine 7 Upper extremity 8 Lower extremity 9 Unspecified <p><u>Position 2</u> reports the type of anatomic structure as follows:</p> <ul style="list-style-type: none"> 1 Whole area 2 Vessels 3 Nerves 4 Organs, including muscles and ligaments 5 Skeletal, including joints 6 Head -- loss of consciousness 9 Unknown <p><u>Positions 3-4</u> report the specific anatomic structure or nature as follows:</p> <p>Whole area:</p> <ul style="list-style-type: none"> 02 Skin, abrasion 04 Skin, contusion 06 Skin, laceration 08 Skin, avulsion 10 Amputation 20 Burn 30 Crush 40 Degloving 50 Injury, no further specification 60 Penetrating 90 Trauma, other than mechanical <p>Head -- loss of consciousness (LOC):</p> <ul style="list-style-type: none"> 02 Length of LOC 04-08 Level of consciousness 10 Concussion <p>Spine</p> <ul style="list-style-type: none"> 02 Cervical 04 Thoracic

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline																												
		<p>06 Lumbar</p> <p>Vessels, nerves, organs, bones, joints are assigned consecutive two digit numbers beginning with 02.</p>																												
4404-5411	1008	<p><u>Injury summaries – continued</u></p> <p><u>Positions 5-6</u> report on level. Specific injuries are assigned consecutive two-digit numbers beginning with 02. To the extent possible 00 is assigned to an injury not fully specified as to severity or where only one injury is given in the dictionary for that anatomic structure, 99 is assigned to an injury not fully specified as to lesion or severity.</p> <p><u>Position 7</u> reports the AIS code as follows:</p> <table style="margin-left: 20px;"> <tr><td>1</td><td>Minor</td></tr> <tr><td>2</td><td>Moderate</td></tr> <tr><td>3</td><td>Serious</td></tr> <tr><td>4</td><td>Severe</td></tr> <tr><td>5</td><td>Critical</td></tr> <tr><td>6</td><td>Maximum</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table> <p><u>Positions 8-12</u> report the ICD-9-CM numeric condition code with two (2) implied decimals, generated from the injury codes given by the first seven (7) positions. See <i>International Classification of Diseases, 9th Revision, Clinical Modification, Volume 1</i>, 1989, U.S. Department of Health and Human Services, Washington, D.C.</p> <p><u>Position 13</u> reports the ISS body region code as follows:</p> <table style="margin-left: 20px;"> <tr><td>1</td><td>Head or neck</td></tr> <tr><td>2</td><td>Face</td></tr> <tr><td>3</td><td>Chest</td></tr> <tr><td>4</td><td>Abdominal or pelvic contents</td></tr> <tr><td>5</td><td>Extremities or pelvic girdle</td></tr> <tr><td>6</td><td>External</td></tr> <tr><td>9</td><td>Unknown</td></tr> </table>	1	Minor	2	Moderate	3	Serious	4	Severe	5	Critical	6	Maximum	9	Unknown	1	Head or neck	2	Face	3	Chest	4	Abdominal or pelvic contents	5	Extremities or pelvic girdle	6	External	9	Unknown
1	Minor																													
2	Moderate																													
3	Serious																													
4	Severe																													
5	Critical																													
6	Maximum																													
9	Unknown																													
1	Head or neck																													
2	Face																													
3	Chest																													
4	Abdominal or pelvic contents																													
5	Extremities or pelvic girdle																													
6	External																													
9	Unknown																													
4404-4421	18	1st injury																												
4422-4439	18	2nd injury																												
4440-4457	18	3rd injury																												
4458-4475	18	4th injury																												
4476-4493	18	5th injury																												
4494-4511	18	6th injury																												
4512-4529	18	7th injury																												
4530-4547	18	8th injury																												
4548-4565	18	9th injury																												

**1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent,
and Medical Examiner/Coroner Data File Documentation**

File Location	Field size	Item and code outline
4566-4583	18	10th injury
4584-4601	18	11th injury
4602-4619	18	12th injury
4620-4637	18	13th injury
4638-4655	18	14th injury
4656-4673	18	15th injury
4674-4691	18	16th injury
4692-4709	18	17th injury
4710-4727	18	18th injury
4728-4745	18	19th injury
4746-4763	18	20th injury
4764-4781	18	21st injury
4782-4799	18	22nd injury
4800-4817	18	23rd injury
4818-4835	18	24th injury
4836-4853	18	25th injury
4854-4871	18	26th injury
4872-4889	18	27th injury
4890-4907	18	28th injury
4908-4925	18	29th injury
4926-4943	18	30th injury
4944-4961	18	31st injury
4962-4979	18	32nd injury
4980-4997	18	33rd injury
4998-5015	18	34th injury
5016-5033	18	35th injury
5034-5051	18	36th injury
5052-5069	18	37th injury
5070-5087	18	38th injury
5088-5105	18	39th injury
5106-5123	18	40th injury
5124-5141	18	41st injury
5142-5159	18	42nd injury
5160-5177	18	43rd injury
5178-5195	18	44th injury
5196-5213	18	45th injury
5214-5231	18	46th injury
5232-5249	18	47th injury
5250-5267	18	48th injury
5268-5285	18	49th injury
5286-5303	18	50th injury
5304-5321	18	51st injury
5322-5339	18	52nd injury
5340-5357	18	53rd injury
5358-5375	18	54th injury
5376-5393	18	55th injury
5394-5411	18	56th injury

Section N -- Toxicological findings

5412-5414	3	<u>TOX001: Number of drugs/compounds included in all toxicology tests</u>
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1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		000 Out of scope 001-200 Number 998 Not applicable 999 Non-respondent
5415 - 5421	7	Reserved
5422-10209	4788	<p><u>Toxicological summaries</u></p> <p>Space has been provided for a maximum of 126 toxicology records. Each toxicology record is reported in a thirty-six (36) digit field. Records which do not have 126 toxicology tests contain a zero (0) in each of the 38 corresponding fields, excluding time pos. 20-23(8888) and amount pos. 25-36 (8888888.8888)</p> <p><u>Positions 1-3</u> report the drug/compound being tested as follows:</p> <ul style="list-style-type: none"> 001 Acetaldehyde 002 Acetaminophen (Tylenol) 003 Acetic Acid Ethylester 004 Acetone 005 Phenacetin (Acetophenetidin) 006 Adrenalin 007 Aldicarb (Temick) 008 Alhalai (Draino, Liquid Plummer) 009 Alhane 010 Alprazolam (Xanax) 011 Amantadine (Symmetrel) 012 Aminophylline 013 Amitriptyline (Elavil) 014 Ammonia 015 Amobarbital (Amytal) 016 Amoxapine (Asendin) 017 Amphetamine 018 Amylnitrite 019 Arsenic 020 Atenolol (Tenormin) 021 Barbitol 022 Barbiturates, Exc. Phenobarbital 023 Benzene 024 Benzodiazepines 025 Benzoylcegonine (Cocaine Metabolite) 026 Benztropine (Cogentin) 027 Brompheniramine 028 Bun 029 Butabarbital (Butisol) 030 Butalbital (Fiorinal) 031 Butanoic Acid Ethylester 032 C6-Hydrocarbon 033 Cadmium 034 Caffeine

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		035 Cannabinoids (Marijuana, THC)
		036 Carbamazepine (Tegretol)
		037 Carbon Dioxide
		038 Carbon Disulfide
		039 Carbon Monoxide
		040 Carisoprodol (Soma)
		041 Chloral Hydrate
		042 Chlorazepate metabolite
		043 Chlorazepate (Tranxene)
		044 Chlordiazepoxide (Librium)
		045 Chloride
		046 Chloroacetophenone
		047 Chloroform
		048 Chloroxazone
		049 Chlorpheniramine
		050 Chlorpromazine (Thorazine)
		051 Chlorpropamide (Diabinese)
		052 Cimetidine (Tagamet)
		053 Clamipramine
		054 Cocaine
		055 Codeine
		056 Cotinine
		057 Coumadin (Warfarin)
		058 Creatinine
		059 Cyanide
		060 Cyclic Monoterpenoid (Pine Sol)
		061 Cyclizine
		062 Cyclobenzaprine (Flexeril)
		063 Delta-9-THC
		064 Delta-9-THC-COOH
		065 Demoxepam
		066 Desalkylflurazepam
		067 Desipramine
		068 Desipramine (Norpramin)
		069 Desmethyldiazepam (Nordiazepam)
		070 Dextromethorphan
		071 Diazepam (Valium)
		072 Dichlorodifluoromethane (Fluro-ethyl)
		073 Dichloromethane
		074 Dicyclomine Hydrochloride (Bentyl)
		075 Diethylether
		076 Digitalis (Digoxin)
		077 Dimethyldisulfide
		078 Dioxin
		079 Diphenhydramine (Benadryl, Somnax)
		080 Diphenylhydantoin (Dilantin, Phenytoin)
		081 Disopyramide
		082 Doxepin (Adapin, Sinequan)
		083 Doxylamine (Unisom)
		084 Ecgonine (Cocaine Metabolite)
		085 Ephedrine
		086 Ethanol
		087 Ethchlorvynol (Placidyl)
		088 Ether
		089 Ethinamate (Valmid)

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		090 Ethyl Acetate
		091 Ethylene Glycol
		092 Femcamfamin
		093 Fentanyl (Sublimaze)
		094 Fluphenazine (Prolixin)
		095 Fluoxetine (Prozac)
		096 Dalmane (Flurazepam)
		097 Glucose
		098 Doridan (Glutethimide)
		099 Guifenesin
		100 Haldol (haloperidol)
		101 Heptane
		102 Heroin
		103 Hexane
		104 Hydrocarbon
		105 Hydrocodone
		106 Hydromorphone (Dilaudid)
		107 Hydroxytriazolan (Halcion, metabolite)
		108 Hydroxyzine (Vistaril)
		109 Ibuprofen (Motrin)
		110 Imipramine (Tofranil)
		111 Indapamide (Lozol)
		113 Iron
		114 Isopropanol
		115 Lead
		116 Levorphanol
		117 Lidocaine
		118 Lithium
		119 Lorazepam (Ativan)
		120 Loxapine (Loxatane)
		121 Lysergic Acid Diethylamide (LSD)
		122 Malathion
		123 Maprotiline (Ludiomil)
		124 Meclizine (Antivert)
		125 Meclofenamate (Meclomen)
		126 Meperidine (Demerol)
		127 Mephenytoin
		128 Mephobarbital
		129 Meprobamate (Miltown)
		130 Mercury
		131 Mescaline (Peyote)
		132 Mesoridazine (Serentil)
		133 Metaxylene
		134 Methadone
		135 Methadone metabolite
		136 Methamphetamine
		137 Methanethiol
		138 Methanol
		139 Methaqualone (Quaalude)
		140 Methocarbamol (Robaxin)
		141 Methoxyphenadrin (Methoxyphenamine)
		142 Methsuximide
		143 Methylcyclohexane
		144 Methylhexane
		145 Methyl Salicylate

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		146 Methyprylon (Noludar)
		147 Midazolam (Versed)
		148 Monoacetylmorphine
		149 Morphine &/or Metabolite
		150 N-acetylprocainamide
		151 Naltrexone (Trexan)
		152 Naprosyn (Naproxen)
		153 Nicotine
		154 Nitrous Oxide
		155 Norchlordiazepoxide
		156 Norcodeiner
		157 Nordiazepam (Chlorazepate)
		158 Nordiazepam (Diazepam Metabolite)
		159 Nordoxepin (Doxepin Metabolite)
		160 Fluoxetine metabolite (Norfluoxetine)
		161 Normeperidine (Meperidine metabolite)
		162 Nortriptyline (Aventyl, Pamelor)
		163 Nortriptyline (Amitriptyline Metabolite)
		164 Norpropoxyphene (Propoxyphene Metabolite)
		165 Norverapamit
		166 Octane
		167 Opiates
		168 Organophosphate (Diazinon)
		169 Orphenadrine (Norgesic)
		170 Oxazepam (Serax)
		171 Oxazepam (Diazepam Metabolite)
		172 Oxycodone (Percodan, Percocet)
		173 Papaverine (Pavabid)
		174 Parametrasone (Dilor)
		175 Paraxylene
		176 Pentane
		177 Pentazocine (Talwin)
		178 Pentobarbital (Nembutal)
		179 Pentoxifylline (Trental)
		180 Perphenazine (Triavil)
		181 Phencyclidine (PCP)
		182 Phendimetrazine (Bontril)
		183 Phenelzine (Nardil)
		184 Pheniramines
		185 Phenmetrazine (Preludin)
		186 Phenobarbital
		187 Phenothiazine
		189 Phensuximide
		190 Phentermine (Ionamin)
		191 Phenylalnine
		192 Phenylbutazone (Butazolidine)
		193 Phenylpropanolamine
		194 Phenyltoloxamine (Pholtex)
		195 Phenytoin
		196 Potassium
		197 Primidone (Mysoline)
		198 Procainamide (Pronestyl, Procan)
		199 Prochlorperazine (Compazine)
		200 Promethazine (Phenergan)
		201 Propane

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
		202 Propanoic Acid Ethylester
		203 Propanolol (Ideral)
		204 Propoxur
		205 Propoxyphene (Darvon, Darvocet)
		206 Pseudophedrine
		207 Psilocybin
		208 Quinidine
		209 Quinine
		210 Salicylate (Aspirin, Empirin)
		211 Secobarbital (Seconal, Tuinal)
		212 Siloxane
		213 Strychnine
		214 Styrene
		215 Succinylcholine (Anectine)
		216 Temazepam (Restoril)
		217 Terbutaline (Brethine, Bricanyl)
		218 Tetrachloroethene
		219 Theobromine
		220 Theophylline
		221 Thiaridazine
		222 Thiobismethane
		223 Thiopental (Pentothal)
		224 Thioridazine (Mellaril)
		225 Thiothixene (Navane)
		226 Thyphenidate (Ritalin)
		227 Toluene
		228 Tranlycypromine (Parnate)
		229 Trazodone (Desyrel)
		230 Triazolam (Halcion)
		231 Trichlorethene (Liquid paper)
		232 Trichloroethanol
		233 Tricyclic Group
		234 Trifluoperazine (Stelazine)
		235 Trimethobenzamide
		236 Trimethoprin (Bactrim)
		237 Trimipramine
		238 Tripelennamine
		239 Valproic Acid (Depakene)
		240 Verapamil (Calan)
		241 Volatile Hydrocarbon
		242 Xylene
		243 I-dichloroethane
		300 Alkaline Screen
		400 Drug Screen
		402 Alcohol
		501 Other drug, specified
		502 Other drug, unspecified

Positions 4-5 report the class or category recode for the drug/compound specified in positions 1-3 as follows:

- 01 No class/category recode
- 02 Alcohol
- 03 Volatile organic compound

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File Location	Field size	Item and code outline
		04 Analgesic
		05 Stimulant
		06 Endogenous compound
		07 Minor tranquilizer
		08 Anti-depressant
		09 Poison
		10 Barbiturate
		11 Major tranquilizer
		12 Narcotic
		13 Metal
		14 Cannabinoid
		15 Sedative
		16 Other class/category
		17 Anti-arrhythmic/anti-hypertensive
		18 Psycho-active
		19 Anti-convulsant
		20 Alkaline screen
		21 Drug screen
		<u>Positions 6-7</u> report the source of the specimen as follows:
		01 Blood - Heart
		02 Blood - Femoral
		03 Blood - Subdural
		04 Blood - Epidural
		05 Blood - Subclavian
		06 Blood - Peripheral
		08 Blood - Other, specified
		09 Blood - Unspecified
		10 Bile
		11 Brain
		12 Gastric contents
		13 Kidney
		14 Liver
		15 Ocular fluid, vitreous
		16 Urine
		17 Blood, serum
		88 Not stated
		98 Other, specified
		99 Unknown
		<u>Positions 8-9</u> report the type of toxicological test performed as follows:
		02 Chemical oxidation
		03 Colloidal metal immunoassay
		04 Color test
		06 Enzymatic (EIA)
		07 ELISA
		08 Emmit
		09 Enzymatic oxidation
		10 Fluorescence (FIA)
		11 Fluorescence Polarization (FPIA)
		12 Gas liquid chromatography (GLC)

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File Location	Field size	Item and code outline
		13 Gas chromatography (GC)
		14 Gas chromatography/mass spectrophotometry (GC/MS)
		15 High pressure liquid chromatography (HPLC)
		16 Immunoassay, unspecified
		17 Microparticle Immunoassay
		18 Nephelometric-precipitation
		19 Radio-immunoassay (RIA)
		20 Thin layer chromatography (TLC)
		21 Unique colorimetry
		22 Ultraviolet (UV)
		23 Western blot
		24 Spot test
		88 Not stated
		98 Other, specified
		99 Unknown

Positions 10-17 report the date of the test as follows:

01-12	Month
88	Not stated
01-31	Day
88	Not stated

Positions 10-17 report the date of the test as follows:

1993-1994	Year
8888	Not stated

Positions 18-21 report the time of the test as follows:

00-23	Hour
88	Not stated
00-59	Minute
88	Not stated

Position 22 reports any qualifier to the amount reported in positions 23-34, or only a generalized specification of the amount found. If a generalized specification of the amount is reported, positions 23-34 will report 0000000.0000

<	Less than
>	Greater than
^	Amount reported as trace
+	Tested positive
-	Tested negative
0	No qualifier reported

Positions 23-34 report the amount of drug/compound found in the specimen in the form of 0000000.0000. A decimal point is given in position 30.

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File Location	Field size	Item and code outline
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Positions 35-36 report the unit associated with the amounts reported in positions 23-34 as follows:

- 01 Percent (%)
- 02 % w/v
- 03 gm/%
- 04 gm/dl
- 05 gm/100ml
- 06 mg
- 07 mg/%
- 08 mg/l
- 09 mg/dl
- 10 mg/dc
- 11 mg/100ml
- 12 mg/125ml
- 13 mcg/l
- 14 mcg/ml
- 15 MEQ/l
- 16 ng/ml
- 17 ug/%
- 18 ug/g
- 19 ug/ml
- 20 uMOL/l
- 88 Not stated

5422-10209	4788	
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Toxicological summaries – continued

5422-5459	38	1st drug/compound
5460-5497	38	2nd drug/compound
5498-5535	38	3rd drug/compound
5536-5573	38	4th drug/compound
5574-5611	38	5th drug/compound
5612-5649	38	6th drug/compound
5650-5687	38	7th drug/compound
5688-5725	38	8th drug/compound
5726-5763	38	9th drug/compound
5764-5801	38	10th drug/compound
5802-5839	38	11th drug/compound
5840-5877	38	12th drug/compound
5878-5915	38	13th drug/compound
5916-5953	38	14th drug/compound
5954-5991	38	15th drug/compound
5992-6029	38	16th drug/compound
6030-6067	38	17th drug/compound
6068-6105	38	18th drug/compound
6106-6143	38	19th drug/compound
6144-6181	38	20th drug/compound
6182-6219	38	21st drug/compound
6220-6257	38	22nd drug/compound
6258-6295	38	23rd drug/compound
6296-6333	38	24th drug/compound
6334-6371	38	25th drug/compound
6372-6409	38	26th drug/compound

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File Location	Field size	Item and code outline
6410-6447	38	27th drug/compound
6448-6485	38	28th drug/compound
6486-6523	38	29th drug/compound
6524-6561	38	30th drug/compound
6562-6599	38	31st drug/compound
6600-6637	38	32nd drug/compound
6638-6675	38	33rd drug/compound
6676-6713	38	34th drug/compound
6714-6751	38	35th drug/compound
6752-6789	38	36th drug/compound
6790-6827	38	37th drug/compound
6828-6865	38	38th drug/compound
6866-6903	38	39th drug/compound
6904-6941	38	40th drug/compound
6942-6979	38	41st drug/compound
6980-7017	38	42nd drug/compound
7018-7055	38	43rd drug/compound
7056-7093	38	44th drug/compound
7094-7131	38	45th drug/compound
7132-7169	38	46th drug/compound
7170-7207	38	47th drug/compound
7208-7245	38	48th drug/compound
7246-7283	38	49th drug/compound
7284-7321	38	50th drug/compound
7322-7359	38	51st drug/compound
7360-7397	38	52nd drug/compound
7398-7435	38	53rd drug/compound
7436-7473	38	54th drug/compound
7474-7511	38	55th drug/compound
7512-7549	38	56th drug/compound
7550-7587	38	57th drug/compound
7588-7625	38	58th drug/compound
7626-7663	38	59th drug/compound
7664-7701	38	60th drug/compound
7702-7739	38	61st drug/compound
7740-7777	38	62nd drug/compound
7778-7815	38	63rd drug/compound
7816-7853	38	64th drug/compound
7854-7891	38	65th drug/compound
7892-7929	38	66th drug/compound
7930-7967	38	67th drug/compound
7968-8005	38	68th drug/compound
8006-8043	38	69th drug/compound
8044-8081	38	70th drug/compound
8082-8119	38	71st drug/compound
8120-8157	38	72nd drug/compound
8158-8195	38	73rd drug/compound
8196-8233	38	74th drug/compound
8234-8271	38	75th drug/compound
8272-8309	38	76th drug/compound
8310-8347	38	77th drug/compound
8348-8385	38	78th drug/compound
8386-8423	38	79th drug/compound
8424-8461	38	80th drug/compound
8462-8499	38	81st drug/compound

1993 National Mortality Followback Survey with Death Certificate, Proxy Respondent, and Medical Examiner/Coroner Data File Documentation

File Location	Field size	Item and code outline
8500-8537	38	82nd drug/compound
8538-8575	38	83rd drug/compound
8576-8613	38	84th drug/compound
8614-8651	38	85th drug/compound
8652-8689	38	86th drug/compound
8690-8727	38	87th drug/compound
8728-8765	38	88th drug/compound
8766-8803	38	89th drug/compound
8804-8841	38	90th drug/compound
8842-8879	38	91st drug/compound
8880-8917	38	92nd drug/compound
8918-8955	38	93rd drug/compound
8956-8993	38	94th drug/compound
8994-9031	38	95th drug/compound
9032-9069	38	96th drug/compound
9070-9107	38	97th drug/compound
9108-9145	38	98th drug/compound
9146-9183	38	99th drug/compound
9184-9221	38	100th drug/compound
9222-9259	36	101st drug/compound
9260-9297	38	102nd drug/compound
9298-9335	38	103rd drug/compound
9336-9373	38	104th drug/compound
9374-9411	38	105th drug/compound
9412-9449	38	106th drug/compound
9450-9487	38	107th drug/compound
9488-9525	38	108th drug/compound
9526-9563	38	109th drug/compound
9564-9601	38	110th drug/compound
9602-9639	38	111th drug/compound
9640-9677	38	112th drug/compound
9678-9715	38	113th drug/compound
9716-9753	38	114th drug/compound
9754-9791	38	115th drug/compound
9792-9829	38	116th drug/compound
9830-9867	38	117th drug/compound
9868-9905	38	118th drug/compound
9906-9943	38	119th drug/compound
9944-9981	38	120th drug/compound
9982-10019	38	121st drug/compound
10020-10057	38	122nd drug/compound
10058-10095	38	123rd drug/compound
10096-10133	38	124th drug/compound
10134-10171	38	125th drug/compound
10172-10209	38	126th drug/compound