

# Behavioral Risk Factor Surveillance System

## 2022 Iowa Data Codebook

### Division of Strategic Operations

#### Bureau of Performance

STATE OF IOWA DEPARTMENT OF  
**Health** AND **Human**  
SERVICES

## Behavioral Risk Factor Surveillance System 2022 Iowa Data Codebook

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SECTION 0 - Record Identification

Label: State FIPS Code  
 Section Name: Record Identification  
 SAS Variable Name: \_STATE  
 Question: State FIPS Code

Value	Value Label
19	Iowa

Label: Geographic Stratum Code  
 Section Name: Record Identification  
 SAS Variable Name: \_GEOSTR  
 Question: Geographic Stratum Code

Value	Value Label
HIDDEN	Data not displayed

Label: Interview Date  
 Section Name: Record Identification  
 SAS Variable Name: IDATE  
 Question: Interview Date

Value	Value Label
HIDDEN	Data not displayed

Label: Interview Month  
 Section Name: Record Identification  
 SAS Variable Name: IMONTH  
 Question: Interview Month

Value	Value Label
1	January
2	February
3	March
4	April
5	May
6	June
7	July
8	August
9	September
10	October
11	November
12	December

Label: Interview Day	
Section Name: Record Identification	
SAS Variable Name: IDAY	
Question: Interview Day	
Value	Value Label
1 - 31	Interview Day

Label: Interview Year	
Section Name: Record Identification	
SAS Variable Name: IYEAR	
Question: Interview Year	
Value	Value Label
2020	Interview Year
2021	

Label: Final Disposition	
Section Name: Record Identification	
SAS Variable Name: DISPCODE	
Question: Final Disposition	
Value	Value Label
1100	Completed Interview
1200	Partial Complete Interview

Label: Annual Sequence Number	
Section Name: Record Identification	
SAS Variable Name: SEQNO	
Question: Annual Sequence Number	
Value	Value Label
HIDDEN	Data not displayed

Label: Primary Sampling Unit	
Section Name: Record Identification	
SAS Variable Name: _PSU	
Question: Primary Sampling Unit (Equal to Annual Sequence Number)	
Value	Value Label
HIDDEN	Data not displayed
	Notes: Value should be unique for a state for a year. Due to the nature of the data or the size of the table for display, this information is not printed for this report

Label: Number of Attempts  
 Section Name: Record Identification  
 SAS Variable Name: NATTMPTS  
 Question: Number of Attempts

Value	Value Label
HIDDEN	Data not displayed Notes: Due to the nature of the data or the size of the table for display, this information is not printed for this report

**LAND LINE INTRODUCTION**

Label: Correct telephone number?  
 Section Name: Land Line Introduction  
 SAS Variable Name: CTELENM1  
 Question: Is this [PHONE NUMBER]?

Value	Value Label
1	Yes
2	No—TERMINATE (Read: “Thank you very much, but I seem to have dialed the wrong number. It’s possible that your number may be called at a later time.”)
BLANK	Missing

Label: Private Residence?  
 Section Name: Land Line Introduction  
 SAS Variable Name: PVTRES1  
 Question Prologue: Variable only on the land line survey  
 Question: Is this a private residence? (READ ONLY IF NECESSARY: “By private residence, we mean someplace like a house or apartment.”)

Value	Value Label
1	Yes—Go to LL.04, STATERE1
2	No—Go to LL.03, COLGHOUS
3	No, this is a business—TERMINATE (Read: “Thank you very much but we are only interviewing persons on residential phones at this time.”) [Interviewer Note: Business numbers which are also used for personal communication are eligible.]
BLANK	Missing

Label: Do you live in college housing?  
 Section Name: Land Line Introduction  
 SAS Variable Name: COLGHOUS  
 Question Prologue: Variable only on the land line survey  
 Question: Do you live in college housing? (READ ONLY IF NECESSARY: "By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university.")

Value	Value Label
1	Yes
2	No—TERMINATE (Read: "Thank you very much, but we are only interviewing persons who live in private residences or college housing at this time.")
BLANK	Missing

Label: Resident of State  
 Section Name: Land Line Introduction  
 SAS Variable Name: STATERE1  
 Question Prologue: Variable only on the land line survey  
 Question: Do you currently live in Iowa?

Value	Value Label
1	Yes
2	No—TERMINATE (Read: "Thank you very much but we are only interviewing persons who live in Iowa at this time.")
BLANK	Not asked or Missing

Label: Cellular Telephone  
 Section Name: Land Line Introduction  
 SAS Variable Name: CELPHONE  
 Question Prologue: Variable only on the land line survey  
 Question: Is this a cell telephone? (READ ONLY IF NECESSARY: "By cellular (or cell) telephone we mean a telephone that is mobile and usable outside of your neighborhood." [Interviewer Note: Telephone service over the internet counts as landline service (includes Vonage, Magic Jack and other home-based phone services).])

Value	Value Label
1	Yes, it is a cell phone—TERMINATE (Read: "Thank you very much but we are only interviewing by landline telephones in private residences or college housing at this time.")
2	Not a cell phone
BLANK	Not asked or Missing



Label: Are you 18 years of age or older?

Section Name: Land Line Introduction

SAS Variable Name: LADULT1

Question Prologue: Variable only on the land line survey

Question: Are you 18 years of age or older?

Value	Value Label
1	Yes [If COLGHOUS = Yes, go to LL.07 COLGSEX; otherwise go to LL.08 NUMADULT]
2	No—TERMINATE (Read: "Thank you very much but we are only interviewing persons aged 18 or older at this time.")
BLANK	Not asked or Missing

Label: Are you male or female?

Section Name: Land Line Introduction

SAS Variable Name: COLGSEX

Question Prologue: Variable only on the land line survey

Question: Are you male or female? [Interviewer Note: We ask this question to determine which health related questions apply to each respondent. For example, persons who report Male as their sex at birth might be asked about prostate health issues.]

Value	Value Label
1	Male
2	Female
3	Nonbinary—TERMINATE (Read: "Thank you for your time, your number may be selected for another survey in the future.")
7	Don't know / Not sure—TERMINATE (Read: "Thank you for your time, your number may be selected for another survey in the future.")
9	Refused—TERMINATE (Read: "Thank you for your time, your number may be selected for another survey in the future.")
BLANK	Not asked or Missing

Label: Number of Adults in Household

Section Name: Land Line Introduction

SAS Variable Name: NUMADULT

Question Prologue: Variable only on the land line survey

Question: I need to randomly select one adult who lives in your household to be interviewed. Excluding adults living away from home, such as students away at college, how many members of your household, including yourself, are 18 years of age or older? [Interviewer Note: If respondent questions why any specific individual was chosen, emphasize that the selection is random and is not limited to any certain age group or sex.]

Value	Value Label
1	Number of adults in the household—Go to LL.09, LANDSEX (Read: “Are you that adult?” If yes: “Then you are the person I need to speak with.” If no: “May I speak with the adult in the household?”)
2	Number of adults in the household—Go to LL.10, NUMMEN
3	Number of adults in the household—Go to LL.10, NUMMEN
4	Number of adults in the household—Go to LL.10, NUMMEN
5	Number of adults in the household—Go to LL.10, NUMMEN
6 - 99	6 or more—Go to LL.10, NUMMEN
BLANK	Missing

Label: Are you male or female?

Section Name: Land Line Introduction

SAS Variable Name: LANDSEX

Question Prologue: Variable only on the land line survey

Question: Are you male or female?

Value	Value Label
1	Male—GO TO Transition to Section 1
2	Female—GO TO Transition to Section 1
3	Nonbinary—TERMINATE (Read: “Thank you for your time, your number may be selected for another survey in the future.”)
7	Don’t know / Not sure—TERMINATE (Read: “Thank you for your time, your number may be selected for another survey in the future.”)
9	Refused—TERMINATE (Read: “Thank you for your time, your number may be selected for another survey in the future.”)
BLANK	Not asked or Missing

Label: Number of Adult men in Household  
 Section Name: Land Line Introduction  
 SAS Variable Name: NUMMEN  
 Question Prologue: Variable only on the land line survey  
 Question: How many of these adults are men?

Value	Value Label
--	Number of adult men in the household
77	Don't know / Not sure
99	Refused
BLANK	Missing

Label: Number of Adult women in Household  
 Section Name: Land Line Introduction  
 SAS Variable Name: NUMWOMEN  
 Question Prologue: Variable only on the land line survey  
 Question: So the number of women in the household is [X]. Is that correct? [Interviewer Note: Confirm the number of adult women or clarify the total number of adults in the household. If the number of adult males and adult females does not add to the total number of adults due to some members of the household's gender identity, the interview may continue.]

Value	Value Label
--	Number of adult women in the household
BLANK	Missing

Label: Respondent Selection  
 Section Name: Land Line Introduction  
 SAS Variable Name: RESPLCT  
 Question Prologue: Variable only on the land line survey  
 Question: The person in your household that I need to speak with is [Oldest/Youngest/Middle// Male/Female]. Are you the [Oldest/Youngest/Middle//Male/Female] in this household?

Value	Value Label
1	Male
2	Female
7	Don't know / Not sure—TERMINATE (Read: "Thank you for your time, your number may be selected for another survey in the future.")
9	Refused—TERMINATE (Read: "Thank you for your time, your number may be selected for another survey in the future.")
BLANK	Missing

**CELL PHONE INTRODUCTION**

Label: Safe time to talk Section Name: Cell Phone Introduction SAS Variable Name: SAFETIME Question Prologue: Variable only on the cell phone survey Question: Is this a safe time to talk with you?	
Value	Value Label
1	Yes
2	No—TERMINATE [Read: “Thank you very much. We will call you back at a more convenient time.” (SET APPOINTMENT IF POSSIBLE)]
BLANK	Missing

Label: Correct Phone Number? Section Name: Cell Phone Introduction SAS Variable Name: CTELENM1 Question: Is this [PHONE NUMBER]?	
Value	Value Label
1	Yes
2	No—TERMINATE (Read: “Thank you very much, but I seem to have dialed the wrong number. It’s possible that your number may be called at a later time.”)
BLANK	Missing

Label: Is this a cell phone? Section Name: Cell Phone Introduction SAS Variable Name: CELLFON5 Question Prologue: Variable only on the cell phone survey Question: Is this a cell phone?	
Value	Value Label
1	Yes—Go to CP.04, CADULT1
2	No—TERMINATE (Read: “Thank you very much, but we are only interviewing persons on cell telephones at this time.”)
BLANK	Not asked or Missing

Label: Are you 18 years of age or older?  
 Section Name: Cell Phone Introduction  
 SAS Variable Name: CADULT1  
 Question Prologue: Variable only on the cell phone survey  
 Question: Are you 18 years of age or older?

Value	Value Label
1	Yes
2	No—TERMINATE (Read: “Thank you very much but we are only interviewing persons aged 18 or older at this time”.)
BLANK	Not asked or Missing

Label: Are you male or female?  
 Section Name: Cell Phone Introduction  
 SAS Variable Name: CELLSEX  
 Question Prologue: Variable only on the cell phone survey  
 Question: Are you male or female? [Interviewer Note: We ask this question to determine which health related questions apply to each respondent. For example, persons who report Male as their sex at birth might be asked about prostate health issues.]

Value	Value Label
1	Male
2	Female
3	Nonbinary—TERMINATE (Read: “Thank you for your time, your number may be selected for another survey in the future.”)
7	Don’t know / Not sure—TERMINATE (Read: “Thank you for your time, your number may be selected for another survey in the future.”)
9	Refused—TERMINATE (Read: “Thank you for your time, your number may be selected for another survey in the future.”)
BLANK	Not asked or Missing

Label: Do you live in a private residence?  
 Section Name: Cell Phone Introduction  
 SAS Variable Name: PVTRES3  
 Question Prologue: Variable only on the cell phone survey  
 Question: Do you live in a private residence? (READ ONLY IF NECESSARY: By private residence, we mean someplace like a house or apartment.) [Interviewer Note: Private residence includes any home where the respondent spends at least 30 days including vacation homes, RVs or other locations in which the respondent lives for portions of the year.]

Value	Value Label
1	Yes—Go to CP.08 CSTATE1
2	No—Go to CP.07 CCLGHOUS
BLANK	Not asked or Missing

Label: Do you live in college housing?

Section Name: Cell Phone Introduction

SAS Variable Name: CCLGHOUS

Question Prologue: Variable only on the cell phone survey

Question: Do you live in college housing? (READ ONLY IF NECESSARY: "By college housing we mean dormitory, graduate student or visiting faculty housing, or other housing arrangement provided by a college or university.")

Value	Value Label
1	Yes
2	No—TERMINATE (Read: "Thank you very much, but we are only interviewing persons who live in private residences or college housing at this time.")
BLANK	Missing

Label: Do you currently live in Iowa?

Section Name: Cell Phone Introduction

SAS Variable Name: CSTATE1

Question Prologue: Variable only on the cell phone survey

Question: Do you currently live in Iowa?

Value	Value Label
1	Yes—Go to CP.10 LANDLINE
2	No—Go to CP.09 RSPSTAT1
BLANK	Not asked or Missing

Label: In what state do you currently live?

Section Name: Cell Phone Introduction

SAS Variable Name: RSPSTAT1

Question Prologue: Variable only on the cell phone survey

Question: In what state do you currently live?

Value	Value Label
1	Alabama
2	Alaska
4	Arizona
5	Arkansas
6	California
8	Colorado
9	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
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
66	Guam
72	Puerto Rico

78	Virgin Islands
77	Live outside US and participating territories—TERMINATE (Read: “Thank you very much, but we are only interviewing persons who live in the US.”)
99	Refused—TERMINATE (Read: “Thank you very much, but we are only interviewing persons who live in the US.”)
BLANK	Not asked or Missing

Label: Do you also have a landline telephone?

Section Name: Cell Phone Introduction

SAS Variable Name: LANDLINE

Question Prologue: Variable only on the cell phone survey

Question: Do you also have a landline telephone in your home that is used to make and receive calls? (READ ONLY IF NECESSARY: “By landline telephone, we mean a ‘regular’ telephone in your home that is used for making or receiving calls. Please include landline phones used for both business and personal use.”)

Value	Value Label
1	Yes
2	No
7	Don’t know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Number of Adults in Household

Section Name: Cell Phone Introduction

SAS Variable Name: HHADULT

Question Prologue: Variable only on the cell phone survey

Question: How many members of your household, including yourself, are 18 years of age or older?

Value	Value Label
01 - 76	Number of adults
77	Don’t know/Not sure
99	Refused
BLANK	Not asked or Missing



CORE SECTION 1 - Health Status

Label: General Health  
Section Name: Health Status  
SAS Variable Name: GENHLTH  
Question: Would you say that in general your health is:

Value	Value Label
1	Excellent
2	Very good
3	Good
4	Fair
5	Poor
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

CORE SECTION 2 - Healthy Days

Label: Number of Days Physical Health Not Good

Section Name: Healthy Days

SAS Variable Name: PHYSHLTH

Question: Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

Value	Value Label
--	Number of days (01-30)
88	None
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing

Label: Number of Days Mental Health Not Good

Section Name: Healthy Days

SAS Variable Name: MENTHLTH

Question: Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

Value	Value Label
--	Number of days (01-30)
88	None
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing

Label: Poor Physical or Mental Health

Section Name: Healthy Days

SAS Variable Name: POORHLTH

Question: During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

Value	Value Label
--	Number of days (01-30)
88	None
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing Notes: Skipped if CHD.01 PHYSHLTH is 88 and CHD.02 MENTHLTH is 88

CORE SECTION 3 - Health Care Access

Label: What is Primary Source of Health Insurance?

Section Name: Health Care Access

SAS Variable Name: PRIMINSR

Question: What is the current primary source of your health insurance? [Interviewer Note: If respondent has multiple sources of insurance, ask for the one used most often. If respondents give the name of a health plan rather than the type of coverage ask whether this is insurance purchased independently, through their employer, or whether it is through Medicaid or CHIP.]

Value	Value Label
01	A plan purchased through an employer or union (including plans purchased through another person's employer)
02	A private nongovernmental plan that you or another family member buys on your own
03	Medicare
04	Medigap
05	Medicaid
06	Children's Health Insurance Program (CHIP)
07	Military related health care: TRICARE (CHAMPUS) / VA health care / CHAMP-VA
08	Indian Health Service
09	State sponsored health plan
10	Other government program
88	No coverage of any type
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing

Label: Have Personal Health Care Provider?

Section Name: Health Care Access

SAS Variable Name: PERSDOC3

Question: Do you have one person (or a group of doctors) you think of as your personal doctor or health care provider? [Interviewer Note: if the respondent had multiple doctor groups then it would be more than one—but if they had more than one doctor in the same group it would be one.]

Value	Value Label
1	Yes, only one
2	More than one
3	No (Read: "Is there more than one, or is there no person who you think of as your personal doctor or health care provider?")
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Could Not Afford To See Doctor

Section Name: Health Care Access

SAS Variable Name: MEDCOST1

Question: Was there a time in the past 12 months when you needed to see a doctor but could not because you could not afford it?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Length of time since last routine checkup

Section Name: Health Care Access

SAS Variable Name: CHECKUP1

Question: About how long has it been since you last visited a doctor for a routine checkup? (READ ONLY IF NECESSARY: "A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.")

Value	Value Label
1	Within past year (anytime less than 12 months ago)
2	Within past 2 years (1 year but less than 2 years ago)
3	Within past 5 years (2 years but less than 5 years ago)
4	5 or more years ago
7	Don't know/Not sure
8	Never
9	Refused
BLANK	Not asked or Missing

CORE SECTION 4 - Exercise

Label: Exercise in Past 30 Days

Section Name: Exercise

SAS Variable Name: EXERANY2

Question: During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

[Interviewer Note: If respondent does not have a regular job or is retired, they may count any physical activity or exercise they do]

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

CORE SECTION 5 – Inadequate Sleep

Label: How Much Time Do You Sleep

Section Name: Inadequate Sleep

SAS Variable Name: SLEPTIM1

Question: On average, how many hours of sleep do you get in a 24-hour period? [Interviewer Note: Enter hours of sleep in whole numbers, rounding 30 minutes (1/2 hour) or more up to the next whole hour and dropping 29 or fewer minutes]

Value	Value Label
--	Number of hours (01-24)
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing

CORE SECTION 6 – Oral Health

Label: Last Visited Dentist or Dental Clinic

Section Name: Oral Health

SAS Variable Name: LASTDEN4

Question: Including all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists, how long has it been since you last visited a dentist or a dental clinic for any reason?

Value	Value Label
1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 5 years (2 years but less than 5 years)
4	5 or more years ago
7	Don't know/Not sure
8	Never
9	Refused
BLANK	Not asked or Missing

Label: Number of Permanent Teeth Removed

Section Name: Oral Health

SAS Variable Name: RMTETH4

Question: Not including teeth lost for injury or orthodontics, how many of your permanent teeth have been removed because of tooth decay or gum disease? (READ ONLY IF NECESSARY: "If wisdom teeth are removed because of tooth decay or gum disease, they should be included in the count for lost teeth.")

Value	Value Label
1	1 to 5
2	6 or more but not all
3	All
8	None
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

CORE SECTION 7 - Chronic Health Conditions

Label: Ever Diagnosed with Heart Attack

Section Name: Chronic Health Conditions

SAS Variable Name: CVDINFR4

Question Prologue: Has a doctor, nurse, or other health professional ever told you that you had any of the following? For each, tell me Yes, No, Or You're Not Sure.

Question: (Ever told) you that you had a heart attack, also called a myocardial infarction?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Ever Diagnosed with Angina or Coronary Heart Disease

Section Name: Chronic Health Conditions

SAS Variable Name: CVDCRHD4

Question: (Ever told) (you had) angina or coronary heart disease?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Ever Diagnosed with a Stroke

Section Name: Chronic Health Conditions

SAS Variable Name: CVDSTRK3

Question: (Ever told) (you had) a stroke?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing



Label: Ever Told Had Asthma  
 Section Name: Chronic Health Conditions  
 SAS Variable Name: ASTHMA3  
 Question: (Ever told) (you had) asthma?

Value	Value Label
1	Yes
2	No—Go to CCHC.06 CHCSCNC1
7	Don't know/Not sure—Go to CCHC.06 CHCSCNC1
9	Refused—Go to CCHC.06 CHCSCNC1
BLANK	Not asked or Missing

Label: Still Have Asthma  
 Section Name: Chronic Health Conditions  
 SAS Variable Name: ASTHNOW  
 Question: Do you still have asthma?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: (Ever told) (you had) skin cancer that is not melanoma?  
 Section Name: Chronic Health Conditions  
 SAS Variable Name: CHCSCNC1  
 Question: (Ever told) (you had) skin cancer that is not melanoma?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: (Ever told) you had melanoma or any other types of cancer?

Section Name: Chronic Health Conditions

SAS Variable Name: CHCOCNC1

Question: (Ever told) (you had) melanoma or any other types of cancer?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Ever told you had C.O.P.D. emphysema or chronic bronchitis?

Section Name: Chronic Health Conditions

SAS Variable Name: CHCCOPD3

Question: (Ever told) (you had) C.O.P.D. (Chronic Obstructive Pulmonary Disease), emphysema or chronic bronchitis?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: (Ever told) you had a depressive disorder

Section Name: Chronic Health Conditions

SAS Variable Name: ADDEPEV3

Question: (Ever told) (you had) a depressive disorder (including depression, major depression, dysthymia, or minor depression)?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Ever told you have kidney disease?

Section Name: Chronic Health Conditions

SAS Variable Name: CHCKDNY2

Question: Not including kidney stones, bladder infection or incontinence, were you ever told you had kidney disease? (READ ONLY IF NECESSARY: Incontinence is not being able to control urine flow.)

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Told Had Arthritis

Section Name: Chronic Health Conditions

SAS Variable Name: HAVARTH4

Question: (Ever told) (you had) some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: (Ever told) you had diabetes

Section Name: Chronic Health Conditions

SAS Variable Name: DIABETE4

Question: (Ever told) (you had) diabetes? [Interviewer Note: If "Yes" and respondent is female, ask: 'was this only when you were pregnant?' If Respondent says pre-diabetes or borderline diabetes, use response code 4.]

Value	Value Label
1	Yes—Go To CCHC.13 DIABAGE3
2	Yes, but female told only during pregnancy—Go to M01.01 PDIABTST
3	No—Go to M01.01 PDIABTST
4	No, pre-diabetes or borderline diabetes—Go to M01.01 PDIABTST
7	Don't know/Not sure—Go to M01.01 PDIABTST
9	Refused—Go to M01.01 PDIABTST
BLANK	Not asked or Missing

MODULE 1 – Pre-Diabetes

Label: When was your last blood test for high blood sugar?

Section Name: Pre-Diabetes

SAS Variable Name: PDIABTS1

Question: When was the last time you had a blood test for high blood sugar or diabetes by a doctor, nurse, or other health professional?

Value	Value Label
1	Within the past year (anytime less than 12 months ago)
2	Within the last 2 years (1 year but less than 2 years ago)
3	Within the last 3 years (2 years but less than 3 years ago)
4	Within the last 5 years (3 years but less than 5 years ago)
5	Within the last 10 years (5 to 9 years but less than 10 years ago)
6	10 years ago or more
8	Never
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing Notes: Section 07.11, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing

Label: Ever told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?

Section Name: Pre-Diabetes

SAS Variable Name: PREDIAB2

Question: Has a doctor or other health professional ever told you that you had prediabetes or borderline diabetes? [Interviewer Note: If "Yes" and respondent is female, ask: 'Was this only when you were pregnant?']

Value	Value Label
1	Yes
2	Yes, during pregnancy
3	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

CORE SECTION 7 - Chronic Health Conditions continued

Label: Age When Told Had Diabetes  
 Section Name: Chronic Health Conditions  
 SAS Variable Name: DIABAGE3  
 Question: How old were you when you were told you had diabetes?

Value	Value Label
--	Age in years [97 = 97 and older]
98	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing

CORE SECTION 8 - Demographics

Label: Reported Age in Years  
 Section Name: Demographics  
 SAS Variable Name: AGE  
 Question: What is your age?

Value	Value Label
--	Code age in years
07	Don't know/Not sure
09	Refused
BLANK	Not asked or Missing

Label: Hispanic, Latino/a, or Spanish origin?  
 Section Name: Demographics  
 SAS Variable Name: HISPANC3  
 Question: Are you Hispanic, Latino/a, or Spanish origin? [Interviewer Note: One or more categories may be selected.]

Value	Value Label
7	Don't know/Not sure
9	Refused
HIDDEN	Data not displayed Notes: Due to the nature of the data or the size of the table for display, this information is not printed for this report

Label: Multiple Race

Section Name: Demographics

SAS Variable Name: MRACE2

Question: Which one or more of the following would you say is your race? [Interviewer Note: One or more categories may be selected. If 40 (Asian) or 50 (Pacific Islander) is selected read and code subcategories underneath major heading. If respondent indicates that they are Hispanic for race, please read the race choices.]

Value	Value Label
77	Don't know/Not sure
99	Refused
HIDDEN	Data not displayed Notes: Due to the nature of the data or the size of the table for display, this information is not printed for this report

Label: Respondent Race Choice

Section Name: Demographics

SAS Variable Name: ORACE4

Question: Which one of these groups would you say best represents your race?

Value	Value Label
77	Don't know/Not sure
99	Refused
HIDDEN	Data not displayed Notes: Due to the nature of the data or the size of the table for display, this information is not printed for this report

MODULE 25 - Sex at Birth

Label: Are you male or female?

Section Name: Sex at Birth

SAS Variable Name: BIRTHSEX

Question: What was your sex at birth? Was it male or female? [Interviewer Note: This question refers to the original birth certificate of the respondent. It does not refer to amended birth certificates.]

Value	Value Label
1	Male
2	Female
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

MODULE 26 - Sexual Orientation and Gender Identity (SOGI)

Label: Sexual orientation

Section Name: Sexual Orientation and Gender Identity (SOGI)

SAS Variable Name: SOMALE

Question Prologue: The next two questions are about sexual orientation and gender identity.

Question: Which of the following best represents how you think of yourself? (READ ONLY IF NECESSARY: "We ask this question in order to better understand the health and health care needs of people with different sexual orientations.") [Interviewer Note: Please say the number before the text response. Respondent can answer with either the number or the text/word.]

Value	Value Label
1	Gay
2	Straight, that is, not gay
3	Bisexual
4	Something else
7	I don't know the answer
9	Refused
BLANK	Not asked or Missing Notes: Asked if BIRTHSEX = 1

Label: Sexual orientation

Section Name: Sexual Orientation and Gender Identity (SOGI)

SAS Variable Name: SOFEMALE

Question: Which of the following best represents how you think of yourself? (READ ONLY IF NECESSARY: "We ask this question in order to better understand the health and health care needs of people with different sexual orientations.") [Interviewer Note: Please say the number before the text response. Respondent can answer with either the number or the text/word.]

Value	Value Label
1	Lesbian or Gay
2	Straight, that is, not gay
3	Bisexual
4	Something else
7	I don't know the answer
9	Refused
BLANK	Not asked or Missing Notes: Asked if BIRTHSEX = 2



Label: Do you consider yourself to be transgender?

Section Name: Sexual Orientation and Gender Identity (SOGI)

SAS Variable Name: TRNSGNDR

Question: Do you consider yourself to be transgender? (If yes, ask “Do you consider yourself to be 1. male-to-female, 2. female-to-male, or 3. gender non-conforming?)

Value	Value Label
1	Yes, Transgender, male-to-female
2	Yes, Transgender, female to male
3	Yes, Transgender, gender nonconforming
4	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

CORE SECTION 8 – Demographics continued

Label: Marital Status

Section Name: Demographics

SAS Variable Name: MARITAL

Question: Are you: (marital status)

Value	Value Label
1	Married
2	Divorced
3	Widowed
4	Separated
5	Never married
6	A member of an unmarried couple
9	Refused
BLANK	Not asked or Missing

Label: Education Level

Section Name: Demographics

SAS Variable Name: EDUCA

Question: What is the highest grade or year of school you completed?

Value	Value Label
1	Never attended school or only attended kindergarten
2	Grades 1 through 8 (Elementary)
3	Grades 9 through 11 (Some high school)
4	Grade 12 or GED (High school graduate)
5	College 1 year to 3 years (Some college or technical school)
6	College 4 years or more (College graduate)
9	Refused
BLANK	Not asked or Missing

Label: Own or Rent Home

Section Name: Demographics

SAS Variable Name: RENTHOM1

Question: Do you own or rent your home? (READ ONLY IF NECESSARY: "Home is defined as the place where you live most of the time/the majority of the year. We ask this question in order to compare health indicators among people with different housing situations.") [Interviewer Note: Other arrangement may include group home, staying with friends or family without paying rent.]

Value	Value Label
1	Own
2	Rent
3	Other arrangement
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: County Code

Section Name: Demographics

SAS Variable Name: CTYCODE2

Question: In what county do you currently live?

Value	Value Label
777	Don't know/Not sure
999	Refused
BLANK	Not asked or Missing
HIDDEN	Data not displayed Notes: Due to the nature of the data or the size of the table for display, this information is not printed for this report

Label: Zipcode of residence

Section Name: Demographics

SAS Variable Name: ZIPCODE1

Question: What is the ZIP Code where you currently live?

Value	Value Label
77777	Don't know/Not sure
99999	Refused
HIDDEN	Data not displayed Notes: Due to the nature of the data or the size of the table for display, this information is not printed for this report

Label: Household Telephones

Section Name: Demographics

SAS Variable Name: NUMHHOL4

Question: Not including cell phones or numbers used for computers, fax machines or security systems, do you have more than one telephone number in your household?

Value	Value Label
1	Yes
2	No—Go to CDEM.12 CPDEM01B
7	Don't know/Not sure—Go to CDEM.12 CPDEM01B
9	Refused—Go to CDEM.12 CPDEM01B
BLANK	Not asked or Missing

Label: Residential Phones

Section Name: Demographics

SAS Variable Name: NUMPHON3

Question: How many of these telephone numbers are residential numbers?

Value	Value Label
—	Enter number (1-5)
6	Six or more
7	Don't know/Not sure
8	None
9	Refused
BLANK	Not asked or Missing Notes: Not asked if CDEM.10 NUMHHOL3, is coded > 1

Label: Do you have a cell phone for personal use?

Section Name: Demographics

SAS Variable Name: CPDEMO1B

Question: How many cell phones do you have for personal use? (READ ONLY IF NECESSARY: "Include cell phones used for both business and personal use.") [Interviewer Note: Do not include cell phones that are used exclusively by other members of your household. Last question needed for partial complete.]

Value	Value Label
–	Enter number (1-5)
6	Six or more
7	Don't know/Not sure
8	None
9	Refused
BLANK	Not asked or Missing

Label: Are You A Veteran

Section Name: Demographics

SAS Variable Name: VETERAN3

Question: Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit? (READ ONLY IF NECESSARY: "Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.")

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Employment Status

Section Name: Demographics

SAS Variable Name: EMPLOY1

Question: Are you currently...? (If more than one, say "Select the category which best describes you.")

Value	Value Label
1	Employed for wages
2	Self-employed
3	Out of work for 1 year or more
4	Out of work for less than 1 year
5	A homemaker
6	A student
7	Retired
8	Unable to work
9	Refused
BLANK	Not asked or Missing

MODULE 21 - Industry and Occupation

Label: Type of Work  
 Section Name: Industry and Occupation  
 SAS Variable Name: TYPEWORK  
 Question: What kind of work do you do? (for example, registered nurse, janitor, cashier, auto mechanic)

Value	Value Label
99	Refused
BLANK	Not asked or Missing Notes: Section 09.14, EMPLOY1, is coded 3, 5, 6, 7, 8, 9 or Missing
HIDDEN	Data not displayed Notes: Due to the nature of the data or the size of the table for display, this information is not printed for this report

Label: Type of Business/Industry  
 Section Name: Industry and Occupation  
 SAS Variable Name: TYPEINDS  
 Question: What kind of business or industry do you work in? (for example, hospital, elementary school, clothing manufacturing, restaurant)

Value	Value Label
99	Refused
BLANK	Not asked or Missing Notes: Section 09.14, EMPLOY1, is coded 3, 5, 6, 7, 8, 9 or Missing
HIDDEN	Data not displayed Notes: Due to the nature of the data or the size of the table for display, this information is not printed for this report

CORE SECTION 8 – Demographics continued

Label: Number of Children in Household  
 Section Name: Demographics  
 SAS Variable Name: CHILDREN  
 Question: How many children less than 18 years of age live in your household?

Value	Value Label
--	Number of children
88	None
99	Refused
BLANK	Not asked or Missing

Label: Income Level

Section Name: Demographics

SAS Variable Name: INCOME3

Question: Is your annual household income from all sources: [Interviewer Note: If respondent refuses at ANY income level, code 99 (Refused)]

Value	Value Label
01	Less than \$10,000
02	Less than \$15,000 (\$10,000 to less than \$15,000)
03	Less than \$20,000 (\$15,000 to less than \$20,000)
04	Less than \$25,000 (\$20,000 to less than \$25,000)
05	Less than \$35,000 (\$25,000 to less than \$35,000)
06	Less than \$50,000 (\$35,000 to less than \$50,000)
07	Less than \$75,000 (\$50,000 to less than \$75,000)
08	Less than \$100,000 (\$75,000 to less than \$100,000)
09	Less than \$150,000 (\$100,000 to less than \$150,000)
10	Less than \$200,000 (\$150,000 to less than \$200,000)
11	\$200,000 or more
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing

Label: Pregnancy Status

Section Name: Demographics

SAS Variable Name: PREGNANT

Question: To your knowledge, are you now pregnant?

Value	Value Label
1	Yes
2	No
9	Refused
BLANK	Not asked or Missing Notes: Skip if MSAB.01 BIRTHSEX is coded 1; If MSAB.01 BIRTHSEX = Missing AND (CP.05 = 1 OR LL.12 = 1; OR LL.09 = 1 OR LL.07 = 1) OR AGE > 49

Label: Reported Weight in Pounds

Section Name: Demographics

SAS Variable Name: WEIGHT2

Question: About how much do you weigh without shoes? [Interviewer Note: If respondent answers in metrics, put 9 in the first column. Round fractions up]

Value	Value Label
----	Weight (pounds/kilograms) Notes: 0 ___ = weight in pounds, 9 ___ = weight in kilograms
7777	Don't know/Not sure
9999	Refused
BLANK	Not asked or Missing

Label: Reported Height in Feet and Inches

Section Name: Demographics

SAS Variable Name: HEIGHT3

Question: About how tall are you without shoes? [Interviewer Note: If respondent answers in metrics, put a 9 in the first column. Round fractions down.]

Value	Value Label
__ / __	Height (ft/inches) Notes: 0 _ / __ = feet / inches, 9 _ / __ = meters / centimeters
7777	Don't know/Not sure
9999	Refused
BLANK	Not asked or Missing



CORE SECTION 9 - Disability

Label: Are you deaf or do you have serious difficulty hearing?

Section Name: Disability

SAS Variable Name: DEAF

Question: Some people who are deaf or have serious difficulty hearing use assistive devices to communicate by phone. Are you deaf or do you have serious difficulty hearing?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Blind or Difficulty seeing

Section Name: Disability

SAS Variable Name: BLIND

Question: Are you blind or do you have serious difficulty seeing, even when wearing glasses?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Difficulty Concentrating or Remembering

Section Name: Disability

SAS Variable Name: DECIDE

Question: Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Difficulty Walking or Climbing Stairs

Section Name: Disability

SAS Variable Name: DIFFWALK

Question: Do you have serious difficulty walking or climbing stairs?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Difficulty Dressing or Bathing

Section Name: Disability

SAS Variable Name: DIFFDRES

Question: Do you have difficulty dressing or bathing?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Difficulty Doing Errands Alone

Section Name: Disability

SAS Variable Name: DIFFALON

Question: Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

CORE SECTION 10 – Breast and Cervical Cancer Screening

Label: Have You Ever Had a Mammogram

Section Name: Breast and Cervical Cancer Screening

SAS Variable Name: HADMAM

Question Prologue: The next questions are about breast and cervical cancer.

Question: Have you ever had a mammogram? [Interviewer Note: A mammogram is an x-ray of each breast to look for breast cancer.]

Value	Value Label
1	Yes
2	No—Go to CBCCS.03 CERVSCRN
7	Don't know/Not sure—Go to CBCCS.03 CERVSCRN
9	Refused—Go to CBCCS.03 CERVSCRN
BLANK	Not asked or Missing

Label: How Long since Last Mammogram

Section Name: Breast and Cervical Cancer Screening

SAS Variable Name: HOWLONG

Question: How long has it been since you had your last mammogram?

Value	Value Label
1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	5 or more years ago
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Have you ever had a cervical cancer screening test?

Section Name: Breast and Cervical Cancer Screening

SAS Variable Name: CERVSCRN

Question: Have you ever had a cervical cancer screening test?

Value	Value Label
1	Yes
2	No—Go to CBCCS.07 HADHYST2
7	Don't know/Not sure— Go to CBCCS.07 HADHYST2
9	Refused— Go to CBCCS.07 HADHYST2
BLANK	Not asked or Missing

Label: Time since last cervical cancer screening test

Section Name: Breast and Cervical Cancer Screening

SAS Variable Name: CRVCLCNC

Question: How long has it been since you had your last cervical cancer screening test?

Value	Value Label
1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	5 or more years ago
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Have a PAP test and recent cervical cancer screening

Section Name: Breast and Cervical Cancer Screening

SAS Variable Name: CRVCLPAP

Question: At your most recent cervical cancer screening, did you have a Pap test?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Have an H.P.V. test and recent cervical cancer screening

Section Name: Breast and Cervical Cancer Screening

SAS Variable Name: CRVCLHPV

Question: At your most recent cervical cancer screening, did you have an H.P.V. test? [Interviewer

Note: H.P.V. stands for Human papillomavirus (pap-uh-loh-muh virus)]

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Had Hysterectomy

Section Name: Breast and Cervical Cancer Screening

SAS Variable Name: HADHYST2

Question: Have you had a hysterectomy? (READ ONLY IF NECESSARY: "A hysterectomy is an operation to remove the uterus [womb]")

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing Skipped if CDEM.17 = 1 (is pregnant)

CORE SECTION 11 – Colorectal Cancer Screening

Label: Ever Had Sigmoidoscopy/Colonoscopy

Section Name: Colorectal Cancer Screening

SAS Variable Name: HADSIGM4

Question: Colonoscopy and sigmoidoscopy are exams to check for colon cancer. Have you ever had either of these exams?

Value	Value Label
1	Yes
2	No—Go to CCRC.06 COLNCNCR
7	Don't know/Not sure—Go to CCRC.06 COLNCNCR
9	Refused—Go to CCRC.06 COLNCNCR
BLANK	Not asked or Missing

Label: Ever had a colonoscopy, sigmoidoscopy, or both

Section Name: Colorectal Cancer Screening

SAS Variable Name: COLNSIGM

Question: Have you had a colonoscopy, a sigmoidoscopy, or both?

Value	Value Label
1	Yes
2	No—Go to CCRC.04 SIGMTES1
3	Both
7	Don't know/Not sure—Go to CCRC.05 LASTSIG3
9	Refused—Go to CCRC.06 COLNCNCR
BLANK	Not asked or Missing

Label: How long since you had colonoscopy

Section Name: Colorectal Cancer Screening

SAS Variable Name: COLNTES1

Question: How long has it been since you had your most recent colonoscopy?

Value	Value Label
1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 5 years (3 years but less than 5 years ago)
4	Within the past 10 years (5 years but less than 10 years ago)
5	10 or more years ago
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How long since you had sigmoidoscopy

Section Name: Colorectal Cancer Screening

SAS Variable Name: SIGMTES1

Question: How long has it been since you had your most recent sigmoidoscopy?

Value	Value Label
1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 5 years (3 years but less than 5 years ago)
4	Within the past 10 years (5 years but less than 10 years ago)
5	10 or more years ago
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Time Since Last Sigmoidoscopy/Colonoscopy

Section Name: Colorectal Cancer Screening

SAS Variable Name: LASTSIG4

Question: How long has it been since you had your most recent colonoscopy or sigmoidoscopy?

Value	Value Label
1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 5 years (3 years but less than 5 years ago)
4	Within the past 10 years (5 years but less than 10 years ago)
5	10 or more years ago
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Ever had any other kind of test for colorectal cancer

Section Name: Colorectal Cancer Screening

SAS Variable Name: COLNCNCR

Question: Have you ever had any other kind of test for colorectal cancer, such as virtual colonoscopy, CT colonography, blood stool test, FIT DNA, or Cologuard test?

Value	Value Label
1	Yes
2	No—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Not asked or Missing

Label: Ever had a virtual colonoscopy

Section Name: Colorectal Cancer Screening

SAS Variable Name: VIRCOLO1

Question: A virtual colonoscopy uses a series of X-rays to take pictures of inside the colon. Have you ever had a virtual colonoscopy? [Interviewer Note: CT colonography, sometimes called virtual colonoscopy, is a new type of test that looks for cancer in the colon. Unlike regular colonoscopies, you do not need medication to make you sleepy during the test. In this new test, your colon is filled with air and you are moved through a donut-shaped X-ray machine as you lie on your back and then your stomach.]

Value	Value Label
1	Yes
2	No—Go to CCRC.09 SMALSTOL
7	Don't know/Not sure—Go to CCRC.09 SMALSTOL
9	Refused—Go to CCRC.09 SMALSTOL
BLANK	Not asked or Missing

Label: How long since you had virtual colonoscopy

Section Name: Colorectal Cancer Screening

SAS Variable Name: VCLNTES2

Question: When was your most recent CT colonography or virtual colonoscopy?

Value	Value Label
1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 5 years (3 years but less than 5 years ago)
4	Within the past 10 years (5 years but less than 10 years ago)
5	10 or more years ago
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing



Label: Ever had stool test?

Section Name: Colorectal Cancer Screening

SAS Variable Name: SMALSTOL

Question: One stool test uses a special kit to obtain a small amount of stool at home and returns the kit to the doctor or the lab. Have you ever had this test? [Interviewer Note: The blood stool or occult blood test, fecal immunochemical or FIT test determine whether you have blood in your stool or bowel movement and can be done at home using a kit. You use a stick or brush to obtain a small amount of stool at home and send it back to the doctor or lab.]

Value	Value Label
1	Yes
2	No—Go to CCRC.11 STOOLDN2
7	Don't know/Not sure—Go to CCRC.11 STOOLDN2
9	Refused—Go to CCRC.11 STOOLDN2
BLANK	Not asked or Missing

Label: How long since you had stool test?

Section Name: Colorectal Cancer Screening

SAS Variable Name: STOLTEST

Question: How long has it been since you had this test?

Value	Value Label
1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	5 or more years ago
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Ever had stool DNA test?

Section Name: Colorectal Cancer Screening

SAS Variable Name: STOOLDN2

Question: Another stool test uses a special kit to obtain an entire bowel movement at home and returns the kit to a lab. Have you ever had this test?

Value	Value Label
1	Yes
2	No—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Not asked or Missing

Label: Was test part of Cologuard test?

Section Name: Colorectal Cancer Screening

SAS Variable Name: BLDSTFIT

Question: Was the blood stool or FIT (you reported earlier) conducted as part of a Cologuard test?

[Interviewer Note: Cologuard is a new type of stool test for colon cancer. Unlike other stool tests, Cologuard looks for changes in DNA in addition to checking for blood in your stool. The Cologuard test is shipped to your home in a box that includes a container for your stool sample.]

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How long since you had stool DNA

Section Name: Colorectal Cancer Screening

SAS Variable Name: SDNATES1

Question: How long has it been since you had this test?

Value	Value Label
1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	5 or more years ago
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

CORE SECTION 12 - Tobacco Use

Label: Smoked at Least 100 Cigarettes

Section Name: Tobacco Use

SAS Variable Name: SMOKE100

Question: Have you smoked at least 100 cigarettes in your entire life? [Interviewer Note: Do not include: electronic cigarettes (e-cigarettes, njoy, bluetip, JUUL), herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookahs) or marijuana. 5 packs = 100 cigarettes]

Value	Value Label
1	Yes
2	No—Go to CTOB.03 USENOW3
7	Don't know/Not sure—Go to CTOB.03 USENOW3
9	Refused—Go to CTOB.03 USENOW3
BLANK	Not asked or Missing

Label: Frequency of Days Now Smoking

Section Name: Tobacco Use

SAS Variable Name: SMOKDAY2

Question: Do you now smoke cigarettes every day, some days, or not at all?

Value	Value Label
1	Every day
2	Some days
3	Not at all
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing Notes: Not asked if CTOB.01 SMOKE100, is coded 2, 7, 9, or Missing

Label: Use of Smokeless Tobacco Products

Section Name: Tobacco Use

SAS Variable Name: USENOW3

Question: Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all? (READ ONLY IF NECESSARY: Snus (Swedish for snuff) is a moist smokeless tobacco, usually sold in small pouches that are placed under the lip against the gum.)

Value	Value Label
1	Every day
2	Some days
3	Not at all
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Do you now use e-cigarettes, or vaping products every day, some days, or not at all?

Section Name: Tobacco Use

SAS Variable Name: ECIGNOW2

Question: Would you say you have never used e-cigarettes or other electronic vaping products in your entire life or now use them every day, use them some days, or used them in the past but do not currently use them at all? [Interviewer Note: Electronic cigarettes (e-cigarettes) and other electronic vaping products include electronic hookahs (e-hookahs), vape pens, e-cigars, and others. These products are battery-powered and usually contain nicotine and flavors such as fruit, mint, or candy. Brands you may have heard of are JUUL, NJOY, or blu. These questions concern electronic vaping products for nicotine use. The use of electronic vaping products for marijuana use is not included in these questions.]

Value	Value Label
1	Never used e-cigarettes in your entire life
2	Use them every day
3	Use them some days
4	Not at all (right now)
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

CORE SECTION 13 – Lung Cancer Screening

Label: How old when you first started smoking?

Section Name: Lung Cancer Screening

SAS Variable Name: LCSFIRST

Question Prologue: You've told us that you have smoked in the past or are currently smoking. The next questions are about screening for lung cancer.

Question: How old were you when you first started to smoke cigarettes regularly? [Interviewer Note: Regularly is at least one cigarette or more on days that a respondent smokes (either every day or some days) or smoked (not at all). If respondent indicates age inconsistent with previously entered age, verify that this is the correct answer and change the age of the respondent regularly smoking or make a note to correct the age of the respondent.]

Value	Value Label
---	Age in Years (001 – 100)
777	Don't know/Not sure
999	Refused
888	Never smoked cigarettes regularly—Go to CLC.04 LCSCTSC1
BLANK	Not asked or Missing

Label: How old when you last smoked?

Section Name: Lung Cancer Screening

SAS Variable Name: LCSLAST

Question: How old were you when you last smoked cigarettes regularly?

Value	Value Label
---	Age in Years (001 – 100)
777	Don't know/Not sure
999	Refused
BLANK	Not asked or Missing

Label: On average, how many cigarettes do you smoke each day?

Section Name: Lung Cancer Screening

SAS Variable Name: LCSNUMCG

Question: On average, when you smoke/smoked regularly, about how many cigarettes do/did you usually smoke each day? [Interviewer Note: Regularly is at least one cigarette or more on days that a respondent smokes (either every day or some days) or smoked (not at all). Respondents may answer in packs instead of number of cigarettes. Below is a conversion table: 0.5 pack = 10 cigarettes/ 1.75 pack = 35 cigarettes/ 0.75 pack = 15 cigarettes/ 2 packs = 40 cigarettes/ 1 pack = 20 cigarettes/ 2.5 packs= 50 cigarettes/ 1.25 pack = 25 cigarettes/ 3 packs= 60 cigarettes/ 1.5 pack = 30 cigarettes]

Value	Value Label
---	Number of cigarettes
777	Don't know/Not sure
999	Refused
BLANK	Not asked or Missing

Label: Did you have a CT or CAT scan?

Section Name: Lung Cancer Screening

SAS Variable Name: LCSCTSC1

Question Prologue: The next question is about CT or CAT scans of your chest area. During this test, you lie flat on your back and are moved through an open, donut shaped x-ray machine.

Question: Have you ever had a CT or CAT scan of your chest area?

Value	Value Label
1	Yes
2	No—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Not asked or Missing

Label: Were any CT or CAT scans done to check for lung cancer?

Section Name: Lung Cancer Screening

SAS Variable Name: LCSCNCR

Question: Were any of the CT or CAT scans of your chest area done mainly to check or screen for lung cancer?

Value	Value Label
1	Yes
2	No—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Not asked or Missing

Label: When did you have your most recent CT or CAT scan?

Section Name: Lung Cancer Screening

SAS Variable Name: LCSCTWHN

Question: When did you have your most recent CT or CAT scan of your chest area mainly to check or screen for lung cancer?

Value	Value Label
1	Within the past year (anytime less than 12 months ago)
2	Within the past 2 years (1 year but less than 2 years ago)
3	Within the past 3 years (2 years but less than 3 years ago)
4	Within the past 5 years (3 years but less than 5 years ago)
5	Within the past 10 years (5 years but less than 10 years ago)
6	10 or more years ago
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

CORE SECTION 14 - Alcohol Consumption

Label: Days in past 30 had alcoholic beverage

Section Name: Alcohol Consumption

SAS Variable Name: ALCDAY4

Question Prologue: The next questions concern alcohol consumption. One drink of alcohol is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor.

Question: During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage? (READ ONLY IF NECESSARY: "A 40 ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks.")

Value	Value Label
1 __	Days per week
2 __	Days in past 30 days
888	No drinks in past 30 days—Go to Next Module
777	Don't know/Not sure—Go to Next Module
999	Refused—Go to Next Module
BLANK	Not asked or Missing

Label: Avg alcoholic drinks per day in past 30

Section Name: Alcohol Consumption

SAS Variable Name: AVEDRNK3

Question: During the past 30 days, on the days when you drank, about how many drinks did you drink on the average? (READ ONLY IF NECESSARY: "A 40-ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks.")

Value	Value Label
--	Number of drinks
88	None
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing Not asked if CALC.01 ALCDAY5 is coded 888, 777, or 999

Label: Binge Drinking

Section Name: Alcohol Consumption

SAS Variable Name: DRNK3GE5

Question: Considering all types of alcoholic beverages, how many times during the past 30 days did you have X [X = 5 for men, X = 4 for women] or more drinks on an occasion?

Value	Value Label
--	Number of times
88	None
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing Not asked if CALC.01 ALCDAY5 is coded 888, 777, or 999

Label: Most drinks on single occasion past 30 days

Section Name: Alcohol Consumption

SAS Variable Name: MAXDRNKS

Question: During the past 30 days, what is the largest number of drinks you had on any occasion?

Value	Value Label
--	Number of drinks
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing Not asked if CALC.01 ALCDAY5 is coded 888, 777, or 999



CORE SECTION 15 - Immunization

Label: Adult flu shot/spray past 12 mos

Section Name: Immunization

SAS Variable Name: FLUSHOT7

Question: During the past 12 months, have you had either flu vaccine that was sprayed in your nose or flu shot injected into your arm? (READ ONLY IF NECESSARY: "A new flu shot that came out in 2011 that injects vaccine into the skin with a very small needle. It is called Fluzone Intradermal vaccine. This is also considered a flu shot.")

Value	Value Label
1	Yes
2	No—Go to CIMM.03 PNEUVAC4
7	Don't know/Not sure—Go to CIMM.03 PNEUVAC4
9	Refused—Go to CIMM.03 PNEUVAC4
BLANK	Not asked or Missing

Label: When did you receive your most recent seasonal flu shot/spray?

Section Name: Immunization

SAS Variable Name: FLSHMY3

Question: During what month and year did you receive your most recent flu vaccine that was sprayed in your nose or flu shot injected into your arm?

Value	Value Label
-- / ----	Month / Year
77/7777	Don't know/Not sure
99/9999	Refused
BLANK	Not asked or Missing Not asked if CIMM.01 FLUSHOT7 is coded 2, 7, or 9

Label: Pneumonia shot ever

Section Name: Immunization

SAS Variable Name: PNEUVAC4

Question: Have you ever had a pneumonia shot also known as a pneumococcal vaccine? (READ ONLY IF NECESSARY: "There are two types of pneumonia shots: polysaccharide, also known as Pneumovax, and conjugate, also known as Prevnar.")

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Received Tetanus Shot Since 2005?

Section Name: Immunization

SAS Variable Name: TETANUS1

Question: Have you received a tetanus shot in the past 10 years? [Interviewer Note: If yes, ask: "Was this Tdap, the tetanus shot that also has pertussis or whooping cough vaccine?"]

Value	Value Label
1	Yes, received Tdap
2	Yes, received tetanus shot, but not Tdap
3	Yes, received tetanus shot but not sure what type
4	No, did not receive any tetanus shot in the past 10 years
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

CORE SECTION 16 — HIV/AIDS

Label: Ever tested H.I.V.

Section Name: HIV/AIDS

SAS Variable Name: HIVTST7

Question: Including fluid testing from your mouth, but not including tests you may have had for blood donation, have you ever been tested for H.I.V.? (READ ONLY IF NECESSARY: “Please remember that your answers are strictly confidential and that you don’t have to answer every question if you do not want to. Although we will ask you about testing, we will not ask you about the results of any test you may have had.”)

Value	Value Label
1	Yes
2	No—Go to CHIV.03 HIVRISK5
7	Don’t know/Not sure—Go to CHIV.03 HIVRISK5
9	Refused—Go to CHIV.03 HIVRISK5
BLANK	Not asked or Missing

Label: Month and Year of Last HIV Test

Section Name: HIV/AIDS

SAS Variable Name: HIVTSTD3

Question: Not including blood donations, in what month and year was your last H.I.V. test?  
 [Interviewer Note: If the respondent remembers the year but cannot remember the month, code the first two digits 77 and the last four digits for the year. If response is before January 1985, code ‘777777’]

Value	Value Label
__ / ____	Code month and year
77/7777	Don’t know/Not sure
99/9999	Refused
BLANK	Not asked or Missing Not asked if CHIV.01 HIVTST7 is coded 2, 7, 9, or Missing

Label: Do Any High Risk Situations Apply

Section Name: HIV/AIDS

SAS Variable Name: HIVRISK5

Question: I am going to read you a list. When I am done, please tell me if any of the situations apply to you. You do not need to tell me which one.

You have injected any drug other than those prescribed for you in the past year.

You have been treated for a sexually transmitted disease or STD in the past year.

You have given or received money or drugs in exchange for sex in the past year.

You had anal sex without a condom in the past year.

You had four or more sex partners in the past year.

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

EMERGING CORE – Long-term COVID Effects

Label: Have you ever been told you tested positive for COVID 19?

Section Name: Long-term COVID Effects

SAS Variable Name: COVIDPOS

Question: Has a doctor, nurse, or other health professional ever told you that you tested positive for COVID-19? [Interviewer Note: Positive tests include antibody or blood testing as well as other forms of testing for COVID, such a nasal swabbing or throat swabbing including home tests. Do not include instances where a healthcare professional told you that you likely had the virus without a test to confirm.]

Value	Value Label
1	Yes
3	Tested positive using home test without health professional
2	No—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Missing

Label: Have any 3 month or longer covid symptoms?

Section Name: Long-term COVID Effects

SAS Variable Name: COVIDSMP

Question: Did you have any symptoms lasting 3 months or longer that you did not have prior to having coronavirus or COVID-19? [Interviewer Note: Long-term conditions may be an indirect effect of COVID-19. These long-term conditions may not be related to the virus itself.]

Value	Value Label
1	Yes
2	No—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Missing

Label: Which was the primary symptom that you experienced?

Section Name: Long-term COVID Effects

SAS Variable Name: COVIDPRM

Question: Which of the following was the primary symptom that you experienced? Was it ...

Value	Value Label
01	Tiredness or fatigue
02	Difficulty thinking or concentrating or forgetfulness/memory problems (sometimes referred to as “brain fog”)
03	Difficulty breathing or shortness of breath
04	Joint or muscle pain
05	Fast-beating or pounding heart (also known as heart palpitations) or chest pain
06	Dizziness on standing
07	Depression, anxiety, or mood changes
08	Symptoms that get worse after physical or mental activities
09	You did not have any long-term symptoms that limited your activities
77	Don’t know/Not sure
99	Refused
BLANK	Missing

MODULE 7 – COVID Vaccination

Label: Received at least one COVID-19 vaccination

Section Name: COVID Vaccination

SAS Variable Name: COVIDVA1

Question: Have you received at least one dose of a COVID-19 vaccination?

Value	Value Label
1	Yes—Go to MCOV.03 COVIDNUM
2	No—Go to MCOV.02 COVAGET
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Missing

Label: Will you get COVID-19 vaccination?

Section Name: COVID Vaccination

SAS Variable Name: COVACGET

Question: Would you say you will definitely get a vaccine, will probably get a vaccine, will probably not get a vaccine, will definitely not get a vaccine, or you are not sure?

Value	Value Label
1	Will definitely get a vaccine—Go to Next Module
2	Will probably get a vaccine—Go to Next Module
3	Will probably not get a vaccine—Go to Next Module
4	Will definitely not get a vaccine—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Missing

Label: Number of COVID-19 vaccinations received

Section Name: COVID Vaccination

SAS Variable Name: COVIDNU1

Question: How many COVID-19 vaccinations have you received?

Value	Value Label
1	One
2	Two—Go to MCOV.05 COVIDFST
3	Three—Go to MCOV.05 COVIDFST
4	Four or more—Go to MCOV.05 COVIDFST
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Missing

Label: Intend to get COVID-19 vaccination

Section Name: COVID Vaccination

SAS Variable Name: COVIDINT

Question Prologue: Which of the following best describes your intent to take the recommended COVID vaccinations...

Question: Would you say you have already received all recommended doses, plan to receive all recommended doses, or do not plan to receive all recommended doses?

Value	Value Label
1	Already received all recommended doses
2	Plan to receive all recommended doses
3	Do not plan to receive all recommended doses
7	Don't know/Not sure
9	Refused
BLANK	Missing

Label: Month/Year of first COVID-19 vaccination

Section Name: COVID Vaccination

SAS Variable Name: COVIDFS1

Question: During what month and year did you receive your (first) COVID-19 vaccination?

[Interviewer Note: If respondent indicated only one vaccine do not read word "first"]

Value	Value Label
__ / ____	Month / Year
77/7777	Don't know/Not sure
99/9999	Refused
BLANK	Not asked or Missing

Label: Month/Year of second COVID-19 vaccination

Section Name: COVID Vaccination

SAS Variable Name: COVIDSE1

Question: During what month and year did you receive your second COVID-19 vaccination?

Value	Value Label
__ / ____	Month / Year
77/7777	Don't know/Not sure
99/9999	Refused
BLANK	Not asked or Missing



MODULE 9 – Cancer Survivorship: Type of Cancer [FORM A]

Label: How Many Types of Cancer?

Section Name: Cancer Survivorship: Type of Cancer [FORM A]

SAS Variable Name: CNCRDIFF

Question Prologue: You’ve told us that you have had cancer. I would like to ask you a few more questions about your cancer.

Question: How many different types of cancer have you had?

Value	Value Label
1	Only one
2	Two
3	Three or more
7	Don’t know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Missing

Label: Age Told Had Cancer

Section Name: Cancer Survivorship: Type of Cancer [FORM A]

SAS Variable Name: CNCRAGE

Question: At what age were you told that you had cancer? (READ ONLY IF NECESSARY: “This question refers to the first time they were told about their first cancer.”) [Interviewer Note: If MTOC.01= 2 (Two) or 3 (Three or more), ask: “At what age were you first diagnosed with cancer?”]

Value	Value Label
--	Age in Years (97 = 97 and older)
98	Don’t know/Not sure
99	Refused
BLANK	Not asked or Missing

Label: Type of Cancer

Section Name: Cancer Survivorship: Type of Cancer [FORM A]

SAS Variable Name: CNCRTYP2

Question: What kind of cancer is it? [Interviewer Note: If MTOC.01 CNCRDIFF > 1, ask: “With your most recent diagnoses of cancer, what type of cancer was it?”]

Value	Value Label
01	Bladder
02	Blood
03	Bone
04	Brain
05	Breast
06	Cervix/Cervical
07	Colon

08	Esophagus/Esophageal
09	Gallbladder
10	Kidney
11	Larynx-trachea
12	Leukemia
13	Liver
14	Lung
15	Lymphoma
16	Melanoma
17	Mouth/Tongue/Lip
18	Ovary/Ovarian
19	Pancreas/Pancreatic
20	Prostate
21	Rectum/Rectal
22	Skin (non-melanoma)
23	Skin (don't know what kind)
24	Soft tissue (muscle or fat)
25	Stomach
26	Testis/Testicular
27	Throat-pharynx
28	Thyroid
29	Uterus/Uterine
30	Other
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing

MODULE 10 – Cancer Survivorship: Course of Treatment [FORM A]

Label: Currently Receiving Treatment for Cancer

Section Name: Cancer Survivorship: Course of Treatment [FORM A]

SAS Variable Name: CSRVRT3

Question: Are you currently receiving treatment for cancer? (READ ONLY IF NECESSARY: “By treatment, we mean surgery, radiation therapy, chemotherapy, or chemotherapy pills.”)

Value	Value Label
1	Yes—Go to Next Module
2	No, I’ve completed treatment—Go to Next Module
3	No, I’ve refused treatment
4	No, I haven’t started treatment—Go to Next Module
5	Treatment was not necessary—Go to Next Module
7	Don’t know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Not asked or Missing

Label: What Type of Doctor Provides Majority of Your Care

Section Name: Cancer Survivorship: Course of Treatment [FORM A]

SAS Variable Name: CSRVDOC1

Question: What type of doctor provides the majority of your health care? Is it a ... (READ ONLY IF NECESSARY: “An oncologist is a medical doctor who manages a person’s care and treatment after a cancer diagnosis.”) [Interviewer Note: If the respondent requests clarification of this question, say: “We want to know which type of doctor you see most often for illness or regular health care” (Examples: annual exams and/or physicals, treatment of colds, etc.).]

Value	Value Label
01	Cancer Surgeon
02	Family Practitioner
03	General Surgeon
04	Gynecologic Oncologist
05	General Practitioner, Internist
06	Plastic Surgeon, Reconstructive Surgeon
07	Medical Oncologist
08	Radiation Oncologist
09	Urologist
10	Other
77	Don’t know/Not sure
99	Refused
BLANK	Not asked or Missing

Label: Did You Receive a Summary of Cancer Treatments Received

Section Name: Cancer Survivorship: Course of Treatment [FORM A]

SAS Variable Name: CSRVSUM

Question: Did any doctor, nurse, or other health professional ever give you a written summary of all the cancer treatments that you received? (READ ONLY IF NECESSARY: "By 'other healthcare professional', we mean a nurse practitioner, a physician's assistant, social worker, or some other licensed professional.")

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Ever Receive Instructions From A Doctor For Follow-Up Check-Ups

Section Name: Cancer Survivorship: Course of Treatment [FORM A]

SAS Variable Name: CSRVRTRN

Question: Have you ever received instructions from a doctor, nurse, or other health professional about where you should return or who you should see for routine cancer check-ups after completing your treatment for cancer?

Value	Value Label
1	Yes
2	No—Go to MCOT.06 CSRVINSR
7	Don't know/Not sure—Go to MCOT.06 CSRVINSR
9	Refused—Go to MCOT.06 CSRVINSR
BLANK	Not asked or Missing

Label: Instructions Written or Printed

Section Name: Cancer Survivorship: Course of Treatment [FORM A]

SAS Variable Name: CSRVINST

Question: Were these instructions written down or printed on paper for you?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Did Health Insurance Pay For All Of Your Cancer Treatment

Section Name: Cancer Survivorship: Course of Treatment [FORM A]

SAS Variable Name: CSRVINSR

Question: With your most recent diagnosis of cancer, did you have health insurance that paid for all or part of your cancer treatment? (READ ONLY IF NECESSARY: "Health insurance also includes Medicare, Medicaid, or other types of state health programs.")

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Ever Denied Insurance Coverage Because Of Your Cancer?

Section Name: Cancer Survivorship: Course of Treatment [FORM A]

SAS Variable Name: CSRVDEIN

Question: Were you ever denied health insurance or life insurance coverage because of your cancer?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Participate In Clinical Trial As Part Of Cancer Treatment?

Section Name: Cancer Survivorship: Course of Treatment [FORM A]

SAS Variable Name: CSRVCLIN

Question: Did you participate in a clinical trial as part of your cancer treatment?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

MODULE 13 – Cognitive Decline [FORM B]

Label: Have you experienced confusion or memory loss that is happening more often or is getting worse?

Section Name: Cognitive Decline [FORM B]

SAS Variable Name: CIMEMLOS

Question Prologue: The next few questions ask about difficulties in thinking or remembering that can make a big difference in everyday activities. This does not refer to occasionally forgetting your keys or the name of someone you recently met, which is normal. This refers to confusion or memory loss that is happening more often or getting worse, such as forgetting how to do things you've always done or forgetting things that you would normally know. We want to know how these difficulties impact you.

Question: During the past 12 months, have you experienced confusion or memory loss that is happening more often or is getting worse?

Value	Value Label
1	Yes—Go to M13.02 CDHOUSE
2	No—Go to Next Module
7	Don't know/Not sure—Go to M13.02 CDHOUSE
9	Refused—Go to Next Module
BLANK	Not asked or Missing

Label: Given up day-to-day chores due to confusion or memory loss

Section Name: Cognitive Decline [FORM B]

SAS Variable Name: CDHOUSE

Question: During the past 12 months, as a result of confusion or memory loss, how often have you given up day-to-day household activities or chores you used to do, such as cooking, cleaning, taking medications, driving, or paying bills? Would you say it is...

Value	Value Label
1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

\*\*NOTE TO ANALYSTS: Error in CDC coding for CDHOUSE. If respondents answered 4-9, they should have been skipped to CDSOCIAL. The current coding for CDHOUSE is inconsistent with Cognitive Decline Statistical Brief. See Iowa BRFSS Epidemiologist for more information.

Label: Need assistance with day-to\_day activities due to confusion or memory loss

Section Name: Cognitive Decline [FORM B]

SAS Variable Name: CDASSIST

Question: As a result of confusion or memory loss, how often do you need assistance with these day-to-day activities? Would you say it is...

Value	Value Label
1	Always
2	Usually
3	Sometimes
4	Rarely—Go to M13.05 CDSOCIAL
5	Never—Go to M13.05 CDSOCIAL
7	Don't know/Not sure—Go to M13.05 CDSOCIAL
9	Refused—Go to M13.05 CDSOCIAL
BLANK	Not asked or Missing

\*\*NOTE TO ANALYSTS: Only respondents who answered 1-3 on CDHOUSE should have been asked this question. You will need to recode this variable to only keep responses from those who answered 1-3 on CDHOUSE. See Iowa BRFSS Epidemiologist for more information.

Label: When you need help with day-to-day activities are you able to get it

Section Name: Cognitive Decline [FORM B]

SAS Variable Name: CDHELP

Question: When you need help with these day-to-day activities, how often are you able to get the help that you need? Would you say it is...

Value	Value Label
1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Does confusion or memory loss interfere with work or social activities

Section Name: Cognitive Decline [FORM B]

SAS Variable Name: CDSOCIAL

Question: During the past 12 months, how often has confusion or memory loss interfered with your ability to work, volunteer, or engage in social activities outside the home? Would you say it is...

Value	Value Label
1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Have you discussed your confusion or memory loss with a health care professional?

Section Name: Cognitive Decline [FORM B]

SAS Variable Name: CDDISCUS

Question: Have you or anyone else discussed your confusion or memory loss with a health care professional?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing



MODULE 15 - Adverse Childhood Experiences (ACEs)

Label: Live With Anyone Depressed, Mentally Ill, Or Suicidal?

Section Name: Adverse Childhood Experiences (ACEs)

SAS Variable Name: ACEDEPRS

Question Prologue: I'd like to ask you some questions about events that happened during your childhood. This information will allow us to better understand problems that may occur early in life and may help others in the future. This is a sensitive topic and some people may feel uncomfortable with these questions. At the end of this section, I will give you a phone number for an organization that can provide information and referral for these issues. Please keep in mind that you can ask me to skip any question you do not want to answer. All questions refer to the time period before you were 18 years of age. [Interviewer Note: Be aware of the level of stress introduced by questions in this section and be familiar with the crisis plan.] Now, looking back before you were 18 years of age...

Question: Did you live with anyone who was depressed, mentally ill, or suicidal?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Live With a Problem Drinker/Alcoholic?

Section Name: Adverse Childhood Experiences (ACEs)

SAS Variable Name: ACEDRINK

Question: Did you live with anyone who was a problem drinker or alcoholic?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Live With Anyone Who Used Illegal Drugs or Abused Prescriptions?

Section Name: Adverse Childhood Experiences (ACEs)

SAS Variable Name: ACEDRUGS

Question: Did you live with anyone who used illegal street drugs or who abused prescription medications?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Live With Anyone Who Served Time in Prison or Jail?

Section Name: Adverse Childhood Experiences (ACEs)

SAS Variable Name: ACEPRISN

Question: Did you live with anyone who served time or was sentenced to serve time in a prison, jail, or other correctional facility?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Were Your Parents Divorced/Separated?

Section Name: Adverse Childhood Experiences (ACEs)

SAS Variable Name: ACEDIVRC

Question: Were your parents separated or divorced?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
8	Parents not married
9	Refused
BLANK	Not asked or Missing

Label: How Often Did Your Parents Beat Each Other Up?

Section Name: Adverse Childhood Experiences (ACEs)

SAS Variable Name: ACEPUNCH

Question: How often did your parents or adults in your home ever slap, hit, kick, punch or beat each other up? Was it...

Value	Value Label
1	Never
2	Once
3	More than once
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How Often Did A Parent Physically Hurt You In Any Way?

Section Name: Adverse Childhood Experiences (ACEs)

SAS Variable Name: ACEHURT1

Question: Not including spanking, (before age 18), how often did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way? Was it...

Value	Value Label
1	Never
2	Once
3	More than once
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How Often Did A Parent Swear At You?

Section Name: Adverse Childhood Experiences (ACEs)

SAS Variable Name: ACESWEAR

Question: How often did a parent or adult in your home ever swear at you, insult you, or put you down? Was it...

Value	Value Label
1	Never
2	Once
3	More than once
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How Often Did Anyone Ever Touch You Sexually?  
 Section Name: Adverse Childhood Experiences (ACEs)  
 SAS Variable Name: ACETOUCH  
 Question: How often did anyone at least 5 years older than you or an adult, ever touch you sexually?  
 Was it...

Value	Value Label
1	Never
2	Once
3	More than once
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How Often Did Anyone Make You Touch Them Sexually?  
 Section Name: Adverse Childhood Experiences (ACEs)  
 SAS Variable Name: ACETTHEM  
 Question: How often did anyone at least 5 years older than you or an adult, try to make you touch them sexually?  
 Was it...

Value	Value Label
1	Never
2	Once
3	More than once
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How Often Did Anyone Ever Force You to Have Sex?  
 Section Name: Adverse Childhood Experiences (ACEs)  
 SAS Variable Name: ACEHVSEX  
 Question: How often did anyone at least 5 years older than you or an adult, force you to have sex?  
 Was it...

Value	Value Label
1	Never
2	Once
3	More than once
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Did an adult make you feel safe and protected

Section Name: Adverse Childhood Experiences (ACEs)

SAS Variable Name: ACEADSAF

Question: For how much of your childhood was there an adult in your household who made you feel safe and protected? Would you say never, a little of the time, some of the time, most of the time, or all of the time?

Value	Value Label
1	Never
2	A little of the time
3	Some of the time
4	Most of the time
5	All of the time
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Did an adult make sure basic needs were met

Section Name: Adverse Childhood Experiences (ACEs)

SAS Variable Name: ACEADNED

Question: For how much of your childhood was there an adult in your household who tried hard to make sure your basic needs were met? Would you say never, a little of the time, some of the time, most of the time, or all of the time?

Value	Value Label
1	Never
2	A little of the time
3	Some of the time
4	Most of the time
5	All of the time
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

State-Added Questions – Resilience

Label: How often in HS felt like you belonged

Section Name: State-added - Resilience

SAS Variable Name: SARQ1

Question Prologue: The next questions also refer to the time before you were eighteen years of age.

Question: Thinking about when you were in high school, how often did you feel like you belonged?

Would you say... [Interviewer Note: If respondent attended multiple high schools, ask respondent to respond about the high schools in general.]

Value	Value Label
1	Never
2	Rarely
3	Sometimes
4	Often
5	Very often
8	Did not attend High School
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How often in HS feel supported by friends

Section Name: State-added - Resilience

SAS Variable Name: SARQ2

Question: How often did you feel supported by your friends? Would you say...

[Interviewer Note: If respondent says some friends did/didn't, ask respondent to answer about friends in general.]

Value	Value Label
1	Never
2	Rarely
3	Sometimes
4	Often
5	Very often
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How often in HS were there at least 2 adults who took interest in you

Section Name: State-added - Resilience

SAS Variable Name: SARQ3

Question: How often were there at least two adults, other than your parents, who took a genuine interest in you? Would you say...

Value	Value Label
1	Never
2	Rarely
3	Sometimes
4	Often
5	Very often
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How often in HS talk to family about your feelings

Section Name: State-added - Resilience

SAS Variable Name: SARQ4

Question: How often did you feel that you were able to talk to your family about your feelings? Would you say...

Value	Value Label
1	Never
2	Rarely
3	Sometimes
4	Often
5	Very often
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How often in HS enjoy participating in community traditions

Section Name: State-added - Resilience

SAS Variable Name: SARQ5

Question: How often did you enjoy participating in your community's traditions? Would you say...

[Interviewer Note: If a respondent asks what we mean by "community" or "traditions", say "whatever it means to you."]

Value	Value Label
1	Never
2	Rarely
3	Sometimes
4	Often
5	Very often
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How often in HS feel family stood by you during diff time

Section Name: State-added - Resilience

SAS Variable Name: SARQ6

Question: How often did you feel your family stood by you during difficult times? Would you say...

[Interviewer Note: If respondent says some family members did/didn't, ask respondent to answer about family in general. If respondent's family situation was complicated, say "whoever you considered your family when you were growing up".]

Value	Value Label
1	Never
2	Rarely
3	Sometimes
4	Often
5	Very often
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing



MODULE 16 - Social Determinants and Health Equity

Label: Satisfaction with life

Section Name: Social Determinants and Health Equity

SAS Variable Name: LSATISFY

Question: In general, how satisfied are you with your life? Are you...

Value	Value Label
1	Very satisfied
2	Satisfied
3	Dissatisfied
4	Very dissatisfied
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How often get emotional support needed

Section Name: Social Determinants and Health Equity

SAS Variable Name: EMTSUPRT

Question: How often do you get the social and emotional support that you need? Is that...

Value	Value Label
1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How often do you feel socially isolated from others?

Section Name: Social Determinants and Health Equity

SAS Variable Name: SDHISOLT

Question: How often do you feel socially isolated from others? Is it...

Value	Value Label
1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Have you lost employment or had hours reduced?

Section Name: Social Determinants and Health Equity

SAS Variable Name: SDHEMPLY

Question: In the past 12 months have you lost employment or had hours reduced?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: During the past 12 months have you received food stamps

Section Name: Social Determinants and Health Equity

SAS Variable Name: FOODSTMP

Question: During the past 12 months, have you received food stamps, also called SNAP, the Supplemental Nutrition Assistance Program on an EBT card?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How often did the food that you bought not last, and you didn't have money to get more?

Section Name: Social Determinants and Health Equity

SAS Variable Name: SDHFOOD1

Question: During the past 12 months how often did the food that you bought not last, and you didn't have money to get more? Was that...

Value	Value Label
1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Were you not able to pay your bills?

Section Name: Social Determinants and Health Equity

SAS Variable Name: SDHBILLS

Question: During the last 12 months, was there a time when you were not able to pay your mortgage, rent or utility bills?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Were you not able to pay utility bills or threatened to lose service?

Section Name: Social Determinants and Health Equity

SAS Variable Name: SDHUTILS

Question: During the last 12 months was there a time when an electric, gas, oil, or water company threatened to shut off services?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Has a lack of reliable transportation kept you from appointments, meetings, work, or getting things needed

Section Name: Social Determinants and Health Equity

SAS Variable Name: SDHTRNSP

Question: During the past 12 months has a lack of reliable transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: How often have you felt this kind of stress

Section Name: Social Determinants and Health Equity

SAS Variable Name: SDHSTRE1

Question: Stress means a situation in which a person feels tense, restless, nervous or anxious, or is unable to sleep at night because his/her mind is troubled all the time. Within the last 30 days, how often have you felt this kind of stress?

Value	Value Label
1	Always
2	Usually
3	Sometimes
4	Rarely
5	Never
7	Don't know/not sure
9	Refused
BLANK	Not asked or Missing

## MODULE 27 – Family Planning

Label: Have you have sexual intercourse?

Section Name: Family Planning

SAS Variable Name: HADSEX

Question Prologue: The next set of questions asks you about your experiences preventing pregnancy and using birth control, also known as family planning. Questions that ask about sexual intercourse are referring to sex where a penis is inserted into the vagina.

Question: In the past 12 months, did you have sexual intercourse?

Value	Value Label
1	Yes
2	No—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Not asked or Missing

Label: Did you do anything to keep from getting pregnant?

Section Name: Family Planning

SAS Variable Name: PFPPRVN4

Question Prologue: Some things people do to keep from getting pregnant include not having sex at certain times of the month, pulling out, using birth control methods such as the pill, implant, shots, condoms, or IUD, having their tubes tied, or having a vasectomy.

Question: The last time you had sexual intercourse, did you or your partner do anything to keep you from getting pregnant?

Value	Value Label
1	Yes
2	No—Go to Module 27.06 NOBCUSE8
7	Don't know/Not sure—Go to Module 27.07 BCPREFER
9	Refused—Go to Module 27.07 BCPREFER
BLANK	Not asked or Missing

Label: What did you do to keep from getting pregnant

Section Name: Family Planning

SAS Variable Name: TYPCNTR9

Question: The last time you had sexual intercourse, what did you or your partner do to keep you from getting pregnant? [Interviewer Note: If respondent reports using two methods, please code the method that occurs first on the list. Code the other method in question 4 (do not ask question 4). If respondent reports using more than two methods, please code the method that occurs first on the list. Of the remaining methods mentioned, code the method that occurs first on the list in question 4 (do not ask question 4). If respondent reports “other method,” ask respondent to “please be specific” and ensure that their response does not fit into another category. If response does fit into another category, please mark appropriately.]

Value	Value Label
01	Female sterilization (Tubal ligation, Essure, Adiana)
02	Male sterilization (vasectomy)
03	Contraceptive implant
04	Intrauterine device or IUD (Mirena, Levonorgestrel, ParaGard)
05	Shots (Depo-Provera)
06	Birth control pills, Contraceptive ring (NuvaRing), Contraceptive patch (Ortho Evra)
07	Condoms (male or female)
08	Diaphragm, cervical cap, sponge, foam, jelly, film, or cream
09	Had sex at a time when less likely to get pregnant (rhythm or natural family planning)
10	Withdrawal or pulling out
11	Emergency contraception or the morning after pill (Plan B or ella)
12	Other method
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing

Label: Are You Doing Anything to Keep From Getting Pregnant?

Section Name: Family Planning

SAS Variable Name: BRTHCNT4

Question: The last time you had sexual intercourse, what else, if anything, did you or your partner do to keep you from getting pregnant? [Interviewer Note: If respondent reports using more than one additional method, please code the method that occurs first on the list. If respondent reports “other method,” ask respondent to “please be specific” and ensure that their response does not fit into another category. If response does fit into another category, please mark appropriately.]

Value	Value Label
00	Nothing else
01	Female sterilization (Tubal ligation, Essure, Adiana)
02	Male sterilization (vasectomy)
03	Contraceptive implant
04	Intrauterine device or IUD (Mirena, Levonorgestrel, ParaGard)
05	Shots (Depo-Provera)
06	Birth control pills, Contraceptive ring (NuvaRing), Contraceptive patch (Ortho Evra)
07	Condoms (male or female)
08	Diaphragm, cervical cap, sponge, foam, jelly, film, or cream
09	Had sex at a time when less likely to get pregnant (rhythm or natural family planning)
10	Withdrawal or pulling out
11	Emergency contraception or the morning after pill (Plan B or ella)
12	Other method
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing

Label: Where did you get what you used to prevent pregnancy?

Section Name: Family Planning

SAS Variable Name: WHEREGET

Question: The last time you had sexual intercourse, what else, if anything, did you or your partner do to keep you from getting pregnant?

Value	Value Label
01	Private doctor's office—Go to Module 27.07 BCPREFER
02	Community health clinic, Community clinic, Public health clinic—Go to Module 27.07 BCPREFER
03	Family planning or Planned Parenthood Clinic—Go to Module 27.07 BCPREFER
04	School or school-based clinic—Go to Module 27.07 BCPREFER
05	Hospital outpatient clinic, emergency room, regular hospital room—Go to Module 27.07 BCPREFER
06	Urgent care center, urgi-care or walk-in facility—Go to Module 27.07 BCPREFER
07	In-store health clinic (like CVS, Target, or Walmart)—Go to Module 27.07 BCPREFER
08	Health care visit with a pharmacist—Go to Module 27.07 BCPREFER
09	Website or app—Go to Module 27.07 BCPREFER
10	Some other place—Go to Module 27.07 BCPREFER
BLANK	Not asked or Missing



Label: What was main reason for not doing anything to keep you from getting pregnant?

Section Name: Family Planning

SAS Variable Name: NOBCUSE8

Question Prologue: Some reasons people might not do anything to keep from getting pregnant might include wanting a pregnancy, not being able to pay for birth control, or not thinking that they can get pregnant.

Question: What was your main reason for not using a method to prevent pregnancy the last time you had sexual intercourse? [Interviewer Note: If respondent reports “other reason,” ask respondent to “please specify” and ensure that their response does not fit into another category. If response does fit into another category, please mark appropriately.]

Value	Value Label
01	You didn't think you were going to have sex/no regular partner
02	You just didn't think about it
03	You wanted a pregnancy
04	You didn't care if you got pregnant
05	You or your partner didn't want to use birth control (side effects, don't like birth control)
06	You had trouble getting or paying for birth control
07	You didn't trust giving out your personal information to medical personnel
08	Didn't think you or your partner could get pregnant (infertile or too old)
09	You were using withdrawal or “pulling out”
10	You had your tubes tied (sterilization)
11	Your partner had a vasectomy (sterilization)
12	You were currently breast-feeding or you just had a baby
13	You were assigned male at birth
14	Other reasons
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing

Label: What is your preferred birth control method?

Section Name: Family Planning

SAS Variable Name: BCPREFER

Question: If you could use any birth control method you wanted, what method would you use?

Value	Value Label
01	Female sterilization (Tubal ligation, Essure, Adiana)
02	Male sterilization (vasectomy)
03	Contraceptive implant
04	Intrauterine device or IUD (Mirena, Levonorgestrel, ParaGard)
05	Shots (Depo-Provera)
06	Birth control pills, Contraceptive ring (NuvaRing), Contraceptive patch (Ortho Evra)
07	Condoms (male or female)
08	Diaphragm, cervical cap, sponge, foam, jelly, film, or cream
09	Had sex at a time when less likely to get pregnant (rhythm or natural family planning)
10	Withdrawal or pulling out
11	Emergency contraception or the morning after pill (Plan B or ella)
12	Other method
13	I am using the method that I want to use
14	I don't want to use any method
77	Don't know/Not sure
99	Refused
BLANK	Not asked or Missing

State-Added Questions – Brain Injury [FORM B]

Label: Ever had head injury

Section Name: State Added – Brain Injury [FORM B]

SAS Variable Name: SABIQ1

Question Prologue: A head injury, or concussion, is an injury to the brain or skull that may have been caused by, but not limited to, a bump or blow to the head, injury from an explosion or blast, or injury to the head from a car accident or crash.

Question: Have you ever had a head injury?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

State-Added Questions – Home/Self Measured Blood Pressure [FORM A]

Label: Health professional recommended self-checking blood pressure

Section Name: State Added – Home/Self Measured Blood Pressure [FORM A]

SAS Variable Name: HOMBPCHK

Question: Has your doctor, nurse or other health professional recommended you check your blood pressure outside of the office or at home? [Interviewer Note: By other healthcare professional, we mean nurse practitioner, a physician assistant, or some other licensed health professional.]

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Regularly self-check blood pressure

Section Name: State Added – Home/Self Measured Blood Pressure [FORM A]

SAS Variable Name: HOMRGCHK

Question: Do you regularly check your blood pressure outside of your healthcare professional's office or at home?

Value	Value Label
1	Yes
2	No—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Not asked or Missing

Label: Location of self-checking blood pressure

Section Name: State Added – Home/Self Measured Blood Pressure [FORM A]

SAS Variable Name: WHEREBP

Question: Do you take it mostly at home or on a machine at a pharmacy, grocery or similar location?

Value	Value Label
1	At home
2	On a machine at a pharmacy, grocery or similar location
3	Do not check it
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Mode of sharing self-blood pressure results

Section Name: State Added – Home/Self Measured Blood Pressure [FORM A]

SAS Variable Name: SHAREBP

Question: How do you share your blood pressure numbers that you collected with your health professional? Is it mostly by telephone, other methods such as emails; internet portal; or fax, or in person?

Value	Value Label
1	Telephone
2	Other methods such as email, internet portal, or fax
3	In person
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

State-Added Questions – Hepatitis Treatment

Label: Ever tested for Hepatitis C

Section Name: State-added - Hepatitis Treatment

SAS Variable Name: SAHCVQ1

Question: Have you ever been tested for Hepatitis C? [Interviewer Note: The hepatitis C virus causes hepatitis C infection of the liver.]

Value	Value Label
1	Yes
2	No—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Not asked or missing

Label: Told by doctor or health professional you had Hepatitis C

Section Name: State-added - Hepatitis Treatment

SAS Variable Name: SAHCVQ2

Question: Have you ever been told by a doctor or other health professional that you had Hepatitis C?

Value	Value Label
1	Yes
2	No—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Not asked or missing

Label: Treated for Hepatitis C in 2015 or after

Section Name: State-added - Hepatitis Treatment

SAS Variable Name: SAHCVQ3

Question: Were you treated for Hepatitis C in 2015 or after? [Interviewer Note: Most hepatitis C treatments offered in 2015 or after were oral medicines or pills. Including Harvoni, Viekira, Zepatier, Eplclusa and others.]

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

Label: Treated for Hepatitis C prior to 2015

Section Name: State-added - Hepatitis Treatment

SAS Variable Name: SAHCVQ4

Question: Were you treated for Hepatitis C prior to 2015? [Interviewer Note: Most hepatitis C treatments offered prior to 2015 were shots and pills given weekly or more often over many months.]

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

Label: Still have Hepatitis C

Section Name: State-added - Hepatitis Treatment

SAS Variable Name: SAHCVQ5

Question: Do you still have Hepatitis C? (READ ONLY IF NECESSARY: You may still have Hepatitis C and feel healthy. Your blood must be tested again to tell if you still have Hepatitis C.)

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

Label: Ever told you had Hepatitis B

Section Name: State-added - Hepatitis Treatment

SAS Variable Name: SAHCVQ6

Question Prologue: The next question is about Hepatitis B.

Question: Have you ever been told by a doctor or other health professional that you had hepatitis B? [Interviewer note: Hepatitis B is an infection of the liver from the hepatitis B virus.]

Value	Value Label
1	Yes
2	No—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Not asked or missing

Label: Currently taking medicine for Hepatitis B

Section Name: State-added - Hepatitis Treatment

SAS Variable Name: SAHCVQ7

Question: Are you currently taking medicine to treat hepatitis B?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing



State-Added Questions – Opioid Use

Label: Did you take prescription opioid pain relievers

Section Name: State-added - Opioid Use

SAS Variable Name: SAOUQ1

Question: In the past year, did you take any prescription opioid pain relievers such as hydrocodone, codeine, oxycodone, morphine, Lortab, Vicodin, Tylenol #3, Percocet, or OxyContin?

Value	Value Label
1	Yes
2	No—Go to Next Module
7	Don't know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Not asked or missing

Label: Did you take opioid pain meds more frequently than prescribed

Section Name: State-added - Opioid Use

SAS Variable Name: SAOUQ2

Question: In the past year, did you take any of the opioid pain medications more frequently or in higher doses than directed by a doctor?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

Label: Take any prescription opioid pain relievers when not prescribed by hlth prof

Section Name: State-added - Opioid Use

SAS Variable Name: SAOUQ3

Question: In the past year, have you taken any prescription opioid pain relievers (hydrocodone, codeine, oxycodone, morphine, Lortab, Vicodin, Tylenol #3, Percocet, OxyContin) when it was NOT prescribed to you by a doctor, dentist, nurse practitioner, or other healthcare provider?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

State-Added Questions – Marijuana Use [FORM B]

Label: Days use marijuana

Section Name: State-added - Marijuana Use [FORM B]

SAS Variable Name: SAMUQ1

Question: During the past 30 days, on how many days did you use marijuana or cannabis?

[Interviewer Note: Answer “No” If respondent asks whether Cannabidiol, CBD, or medical marijuana should be included in their answer.]

Value	Value Label
--	01 – 30 Number of Days
88	None
77	Don't know/not sure
99	Refused
BLANK	Not asked or missing

State-Added Questions – Gambling [FORM B]

Label: How often participated in sports wagering-mobile apps tele lines sports books

Section Name: State-added – Gambling [FORM B]

SAS Variable Name: SAGQ5

Question: In the past 12 months, how often have you participated in sports wagering through Iowa casinos' mobile apps, telephone lines or in their sports books? Was it... [Interviewer Note: Sports wagering is the activity of predicting sports results by betting money on the outcome.]

Value	Value Label
1	About every day
2	One to three times a week
3	Once or twice a month
4	A few days a year
5	Only one day in the past 12 months
6	Never in the past 12 months
7	Don't know/not sure
9	Refused
BLANK	Not asked or Missing

State-Added Questions – Cigarette Use [FORM A]

Label: How often smoke menthol

Section Name: State-added – Cigarette Use [FORM A]

SAS Variable Name: SACUQ1

Question Prologue: The next two questions are about your cigarette use.

Question: Currently, when you smoke cigarettes, do you usually smoke menthol cigarettes?

Value	Value Label
1	Yes
2	No
7	Don't know/not sure
9	Refused
BLANK	Not asked or missing

Label: Stopped smoking due to trying to quit in past year

Section Name: State-added – Cigarette Use [FORM A]

SAS Variable Name: SACUQ2

Question: During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

Label: How long since last smoked

Section Name: State-added – Cigarette Use [FORM A]

SAS Variable Name: SACUQ3

Question Prologue: The next question is about quitting cigarettes.

Question: How long has it been since you last smoked a cigarette, even one or two puffs?

Value	Value Label
01	Within the past month (less than 1 month ago)
02	Within the past 3 months (1 month but less than 3 months ago)
03	Within the past 6 months (3 months but less than 6 months ago)
04	Within the past year (6 months but less than 1 year ago)
05	Within the past 5 years (1 year but less than 5 years ago)
06	Within the past 10 years (5 years but less than 10 years ago)
07	10 years or more
08	Never smoked regularly
77	Don't know/Not sure
99	Refused
BLANK	Not asked or missing

State-Added Questions – E-Cigarette Use [FORM A]

Label: Menthol e-cigarette or vaping usage when using e-cigarettes

Section Name: State-added – E-Cigarette Use [FORM A]

SAS Variable Name: SAECIGQ1

Question Prologue: The next two questions are about your vaping or e-cigarette use. (READ ONLY IF NECESSARY: “JUUL and JUUL copycats are sometimes called vape pods. They are types of vaping devices that resemble a USB flash drive and have a battery. They can be plugged into a laptop or USB drive.”) [Interviewer Note: the next two questions concern electronic vaping products for nicotine use. The use of electronic vaping products for marijuana or cannabidiol / CBD use is not included in these questions. The new heat not burn electronic non-combusted tobacco cigarettes are not included either. Respondent use of heat not burn/heated tobacco products are asked about later on.]

Question: Currently, when you use e-cigarettes, do you usually use menthol e-cigarettes?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

Label: Serious attempt to quit e-cigarettes or vaping products

Section Name: State-added – E-Cigarette Use [FORM A]

SAS Variable Name: SAECIGQ4

Question: During the past 12 months, have you stopped using e-cigarettes or other “vaping” products for a day or longer because you were TRYING to quit vaping?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

State-Added Questions – Heated Tobacco Product [FORM B]

Label: Ever used heated tobacco product

Section Name: State-added – Heated Tobacco Product [FORM B]

SAS Variable Name: SATHTPQ1

Question Prologue: The next questions are about heated tobacco products. Some people refer to these as “heat not burn” tobacco products. These heat tobacco sticks or capsules to produce a vapor. Some brands of heated tobacco products include iQOS [eye-kos], Glo, and Eclipse. (READ ONLY IF NECESSARY: “Heated tobacco products are not the same as e-cigarettes or vapes. Heated tobacco products heat actual tobacco leaf. By contrast, e-cigarettes heat liquids that typically contain nicotine as well as flavorings and other ingredients”.)

Question: Have you ever used a heated tobacco product even just one time, in your entire life?

Value	Value Label
1	Yes
2	No—Go to SATHTPQ3
7	Don’t know/Not sure—Go to SATHTPQ3
9	Refused—Go to SATHTPQ3
BLANK	Not asked or missing

Label: Now use heated tobacco products

Section Name: State-added – Heated Tobacco Product [FORM B]

SAS Variable Name: SATHTPQ2

Question: Have you ever used a heated tobacco product even just one time, in your entire life?

Value	Value Label
1	Every day—Go to Next Module
2	Some days—Go to Next Module
3	Not at all—Go to Next Module
7	Don’t know/Not sure—Go to Next Module
9	Refused—Go to Next Module
BLANK	Not asked or missing

Label: Heard of heated tobacco products before today

Section Name: State-added – Heated Tobacco Product [FORM B]

SAS Variable Name: SATHTPQ3

Question: Before today, have you heard of heated tobacco products?

Value	Value Label
1	Yes
2	No
7	Don’t know/Not sure
9	Refused
BLANK	Not asked or missing

State-Added Questions – Other Tobacco Use

Label: Now use oral nicotine pouches

Section Name: State-added – Other Tobacco Use

SAS Variable Name: SATQNP

Question Prologue: The next questions are about your use of other tobacco.

Question: Do you now use oral nicotine pouches like Zyn, ON!, Velo or Rogue every day, some days or not at all? (READ ONLY IF NECESSARY: “Nicotine pouches are small, flavored pouches of nicotine that users place in their mouth. Nicotine pouches are different from other smokeless tobacco products such as snus, dip, or chewing tobacco, because they do not contain any tobacco leaf.”)

Value	Value Label
1	Every day
2	Some days
3	Not at all
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

Label: Now smoke cigars

Section Name: State-added – Other Tobacco Use

SAS Variable Name: SATQ3

Question: Do you now smoke cigars, cigarillos, or little filtered cigars every day, some days or not at all?

Value	Value Label
1	Every day
2	Some days
3	Not at all
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing



Label: Now smoke a pipe

Section Name: State-added – Other Tobacco Use

SAS Variable Name: SATQ4

Question: Do you now smoke a regular pipe filled with tobacco every day, some days or not at all?

Value	Value Label
1	Every day
2	Some days
3	Not at all
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

Label: Now smoke hookah

Section Name: State-added – Other Tobacco Use

SAS Variable Name: SATQ6

Question: Do you now smoke tobacco in a water pipe or hookah every day, some days, or not at all?

Value	Value Label
1	Every day
2	Some days
3	Not at all
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

Label:

Section Name: State-added – Other Tobacco Use

SAS Variable Name: SATQ12

Question: During the past 12 months, have you stopped using nicotine pouches, smokeless tobacco, cigars or pipe tobacco – for a day or longer because you were TRYING to quit?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

Label: Dentist ask about tobacco use

Section Name: State-added – Other Tobacco Use

SAS Variable Name: SATQ20A

Question Prologue: The next questions are about dental care visits.

Question: In the PAST 12 MONTHS, when you visited your dentist, dental hygienist or dental clinic did they ask about your tobacco use? (READ ONLY IF NECESSARY: “Asking about tobacco use includes being asked on a background form or asked verbally by a dental provider.”)

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

Label: Dentist advise to quit tobacco use

Section Name: State-added – Other Tobacco Use

SAS Variable Name: SATQ20B

Question Prologue: The next questions are about dental care visits.

Question: In the PAST 12 MONTHS, when you visited your dentist, dental hygienist or dental clinic, did they advise you to stop smoking or using tobacco?

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or missing

State-Added Questions – Secondhand Smoking [FORM A]

Label: Days other smoked in home

Section Name: State-added – Secondhand Smoking [FORM A]

SAS Variable Name: SASSQ1

Question: Not counting decks, porches, or garages, during the past 7 days, that is since last [TODAY'S DAY OF WEEK], on how many days did SOMEONE OTHER THAN YOU smoke tobacco inside your home while you were at home?

Value	Value Label
--	Number of days [1-7]
88	None
77	Don't know/not sure
99	Refused
BLANK	Not asked or missing

State-Added Questions – Volunteerism [FORM B]

Label: Spent time volunteering in past year

Section Name: State-added – Volunteerism [FORM B]

SAS Variable Name: SAVLTRQ1

Question: During the past year, have you spent time volunteering? (READ ONLY IF NECESSARY: “Volunteering is providing unpaid work to benefit a charitable organization, program, club, community or faith based group, cause or non-family member in need.”)

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Not asked or Missing

Label: Average hours of volunteering per month

Section Name: State-added – Volunteerism [FORM B]

SAS Variable Name: SAVLTRQ2

Question: On average, how many hours did you volunteer a month or per year?

Value	Value Label
1 __	Hours per month
2 __	Hours per year
777	Don't know
999	Refused
BLANK	Not asked or Missing

## ASTHMA Follow-up Call Back

Label: Asthma Follow-Up call back request

Section Name: Asthma Follow-up Call Back

SAS Variable Name: CALLBACK

Question: We would like to call you again within the next 2 weeks to talk in more detail about your experiences with asthma. The information will be used to help develop and improve the asthma programs in Iowa. The information you gave us today and any you give us in the future will be kept confidential. If you agree to this, we will keep your first name or initials and phone number on file, separate from the answers collected today. Even if you agree now, you or others may refuse to participate in the future. Would it be okay if we called you back to ask additional asthma-related questions at a later time?

Value	Value Label
1	Yes
2	No
BLANK	Not asked or Missing

## CDC CATI

Label: Adult Hispanic response

Section Name: CDCCATI Hispanic Adult

SAS Variable Name: ADHISPA

Question: Adult Hispanic response

Value	Value Label
1	Yes
2	No
7	Don't know/Not sure
9	Refused
BLANK	Missing

## Questionnaire Version

Label: Questionnaire Version Identifier

Section Name: Questionnaire Version

SAS Variable Name: QSTVER

Question: Questionnaire Version Identifier

Value	Value Label
11	Landline multiple questionnaire version 1
12	Landline multiple questionnaire version 2
20	Cell Phone single questionnaire
21	Cell Phone multiple questionnaire version 1
22	Cell Phone multiple questionnaire version 2

## Questionnaire Identifiers

Label: Language identifier

Section Name: Questionnaire Identifiers

SAS Variable Name: QSTLANG

Question: Language identifier

Value	Value Label
1	English
2	Spanish

Label: State Added Questions

Section Name: Questionnaire Identifiers

SAS Variable Name: STATEQUE

Question: State Added Questions

Value	Value Label
HIDDEN	Data not displayed Notes: Due to the nature of the data or the size of the table for display, this information is not printed for this report

Computed Variables

Label: NCHS Urban-Rural Classification  
 Section Name: Calculated Variables  
 SAS Variable Name: \_URBNRRL  
 Question: NCHS Urban-Rural Classification

Value	Value Label
3	Medium metro
4	Small metro
5	Micropolitan
6	Noncore

Label: Metropolitan Status  
 Section Name: Calculated Variables  
 SAS Variable Name: \_METSTAT  
 Question: Metropolitan Status

Value	Value Label
1	Metropolitan counties (_URBNRRL = 1,2,3,4)
2	Nonmetropolitan counties (_URBNRRL = 5,6)

Label: Urban/Rural Status  
 Section Name: Calculated Variables  
 SAS Variable Name: \_URBSTAT  
 Question: Urban/Rural Status

Value	Value Label
1	Urban counties (_URBNRRL = 1,2,3,4,5)
2	Rural counties (_URBNRRL = 6)

Label: Adults with good or better health  
 Section Name: Calculated Variables  
 SAS Variable Name: \_RFHLTH  
 Question: Adults with good or better health

Value	Value Label
1	Good or Better Health Notes: GENHLTH = 1 or 2 or 3
2	Fair or Poor Health Notes: GENHLTH = 4 or 5
9	Don't know/Not sure Or Refused/Missing Notes: GENHLTH = 7 or 9 or Missing

Label: Computed Physical Health Status

Section Name: Calculated Variables

SAS Variable Name: \_PHYS14D

Question: 3 level not good physical health status: 0 days, 1-13 days, 14-30 days

Value	Value Label
1	Zero days when physical health not good
2	1-13 days when physical health not good
3	14+ days when physical health not good
9	Don't know/Refused/Missing

Label: Computed Mental Health Status

Section Name: Calculated Variables

SAS Variable Name: \_MENT14D

Question: 3 level not good mental health status: 0 days, 1-13 days, 14-30 days

Value	Value Label
1	Zero days when mental health not good
2	1-13 days when mental health not good
3	14+ days when mental health not good
9	Don't know/Refused/Missing

Label: Have any health insurance

Section Name: Calculated Variables

SAS Variable Name: \_HLTHPLN

Question: Adults who had some form of health insurance

Value	Value Label
1	Have some form of insurance Notes: PRIMINSR=1, 2, 3, 4, 5, 6, 7, 8, 9, 10
2	Do not have some form of health insurance Notes: PRIMINSR=88
9	Don't know, refused or missing insurance response Notes: PRIMINSR=77, 99, or missing



Label: Respondents aged 18-64 with health insurance

Section Name: Calculated Variables

SAS Variable Name: \_HCVU652

Question: Respondents aged 18-64 who have any form of health insurance

Value	Value Label
1	Have some form of health insurance Notes: 18 <= AGE <=64 and PRIMINSR=1, 2, 3, 4, 5, 6, 7, 8, 9, 10
2	Do not have any form of health insurance Notes: 18 <= AGE <= 64 and PRIMINSR=88
9	Don't know/Not sure, Refused or Missing Notes: 18 <= AGE <= 64 and PRIMINSR=77, 99, or missing or AGE => 65

Label: Leisure Time Physical Activity Calculated Variable

Section Name: Calculated Variables

SAS Variable Name: \_TOTINDA

Question: Adults who reported doing physical activity or exercise during the past 30 days other than their regular job

Value	Value Label
1	Had physical activity or exercise Notes: EXERANY2 = 1
2	No physical activity or exercise in last 30 days Notes: EXERANY2 = 2
9	Don't know/Refused/Missing Notes: EXERANY2 = 7 or 9 or Missing

Label: Adults aged 18+ that have had permanent teeth extracted

Section Name: Calculated Variables

SAS Variable Name: \_EXTETH3

Question: Adults aged 18+ who have had permanent teeth extracted

Value	Value Label
1	Not at risk Notes: RMVTETH4=8
2	At risk Notes: RMVTETH4=1 or 2 or 3
9	Don't know/Not Sure Or Refused/Missing Notes: RMVTETH4=7 or 9 or Missing

Label: Adults aged 65+ who have had all their natural teeth extracted

Section Name: Calculated Variables

SAS Variable Name: \_ALTETH3

Question: Adults aged 65+ who have had all their natural teeth extracted

Value	Value Label
1	No Notes: AGE>= 65 and RMVTETH4=1 or 2 or 8
2	Yes Notes: AGE>= 65 and RMVTETH4=3
9	Don't know/Not Sure Or Refused/Missing Notes: AGE>= 65 or =7 or 9 or Missing and RMVTETH4=7 or 9 or Missing
BLANK	Missing or Age < 65 Notes: 18 <= AGE <= 64

Label: Adults that have visited a dentist, dental hygienist or dental clinic within the past year

Section Name: Calculated Variables

SAS Variable Name: \_DENVST3

Question: Adults who have visited a dentist, dental hygienist or dental clinic within the past year

Value	Value Label
1	Yes Notes: LASTDEN4=1
2	No Notes: LASTDEN4=2 or 3 or 4
9	Don't know/Not Sure Or Refused/Missing Notes: LASTDEN4=7 or 9 or Missing

Label: Ever had CHD or MI

Section Name: Calculated Variables

SAS Variable Name: \_MICHHD

Question: Respondents that have ever reported having coronary heart disease (CHD) or myocardial infarction (MI)

Value	Value Label
1	Reported having MI or CHD Notes: CVDINFR4=1 OR CVDCRHD4=1
2	Did not report having MI or CHD Notes: CVDINFR4=2 AND CVDCRHD4=2
BLANK	Not asked or Missing Notes: CVDINFR4=7, 9 OR MISSING OR CVDCRHD4=7, 9, OR MISSING

Label: Lifetime Asthma Calculated Variable

Section Name: Calculated Variables

SAS Variable Name: \_LTASTH1

Question: Adults who have ever been told they have asthma

Value	Value Label
1	No Notes: ASTHMA3 = 2
2	Yes Notes: ASTHMA3 = 1
9	Don't know/Not sure Or Refused/Missing Notes: ASTHMA3 = 7 or 9 or Missing

Label: Current Asthma Calculated Variable

Section Name: Calculated Variables

SAS Variable Name: \_CASTHM1

Question: Adults who have been told they currently have asthma

Value	Value Label
1	No Notes: ASTHMA3 = 2 or ASTHMA3 = 1 and ASTHNOW = 2
2	Yes Notes: ASTHMA3 = 1 and ASTHNOW = 1
9	Don't know/Not sure Or Refused/Missing Notes: ASTHMA3 = 7 or 9 or Missing or ASTHNOW = 7 or 9 or Missing

Label: Computed Asthma Status

Section Name: Calculated Variables

SAS Variable Name: \_ASTHMS1

Question: Computed asthma status

Value	Value Label
1	Current Notes: ASTHMA3 = 1 and ASTHNOW = 1
2	Former Notes: ASTHMA3 = 1 and ASTHNOW = 2
3	Never Notes: ASTHMA3 = 2
9	Don't know/Not sure Or Refused/Missing Notes: ASTHMA3 = 7 or 9 or Missing or ASTHNOW = 7 or 9 or Missing

Label: Respondents diagnosed with arthritis  
Section Name: Calculated Variables  
SAS Variable Name: \_DRDXAR2  
Question: Respondents who have had a doctor diagnose them as having some form of arthritis

Value	Value Label
1	Diagnosed with arthritis Notes: HAVARTH4 = 1
2	Not diagnosed with arthritis Notes: HAVARTH4 = 2
BLANK	Don't know/Not Sure/Refused/Missing Notes: HAVARTH4 = 7 or 9 or Missing

Label: MRACE2 with 77,88,99s removed calculated variable  
Section Name: Calculated Race Variables  
SAS Variable Name: MRACORG2  
Question: MRACE2 with 77,88,99s removed

Value	Value Label
77	Don't know/Not sure Notes: MRACE1 = 77
99	Refused Notes: MRACE1 = 99
HIDDEN	Data not displayed Notes: Due to the nature of the data or the size of the table for display, this information is not printed for this report

Label: MRACORG2 with responses in ascending order calculated variable  
Section Name: Calculated Race Variables  
SAS Variable Name: MRACASC2  
Question: MRACORG2 with 77,88,99s removed, in ascending order

Value	Value Label
77	Don't know/Not sure Notes: MRACORG1 = 77
99	Refused Notes: MRACORG1 = 99
BLANK	
HIDDEN	Data not displayed Notes: Due to the nature of the data or the size of the table for display, this information is not printed for this report

Label: Computed Preferred Race  
 Section Name: Calculated Race Variables  
 SAS Variable Name: \_PRACE2  
 Question: Preferred race category

Value	Value Label
1	White Notes: MRACASC2=10 or MRACASC2>99 and ORACE4=10
2	Black or African American Notes: MRACASC2=20 or MRACASC2>99 and ORACE4=20
3	American Indian or Alaskan Native Notes: MRACASC2=30 or MRACASC2>99 and ORACE4=30
4	Asian Notes: MRACASC2=40 or MRACASC2>99 and ORACE4=40
5	Native Hawaiian or other Pacific Islander Notes: MRACASC2=50 or MRACASC2>99 and ORACE4=50
7	Multiracial but no preferred race Notes: MRACASC2>99 and ORACE4=77 or 99
88	No race choice given Notes: MRACASC2=88
77	Don't know/Not sure Notes: MRACASC2=77
99	Refused Notes: MRACASC2=99

Label: Calculated non-Hispanic Race including multiracial

Section Name: Calculated Race Variables

SAS Variable Name: \_MRACE2

Question: Calculated multiracial race categorization

Value	Value Label
1	White only Notes: MRACASC2 = 10
2	Black or African American only Notes: MRACASC2 = 20
3	American Indian or Alaskan Native only Notes: MRACASC2 = 30
4	Asian Only Notes: MRACASC2 = 40,41,42,43,44,45,46,47
5	Native Hawaiian or other Pacific Islander only Notes: MRACASC2 = 50,51,52,53,54
6	Multiracial Notes: MRACASC2 >= 100
88	No race choice given Notes: MRACASC2 = 88
77	Don't know/Not sure Notes: MRACASC2 = 77
99	Refused Notes: MRACASC2 = 99

Label: Calculated non-Hispanic Race including multiracial

Section Name: Calculated Race Variables

SAS Variable Name: \_M\_RACE1

Question: Calculated multiracial race categorization

Value	Value Label
10	White Notes: MRACASC2=10
20	Black or African American Notes: MRACASC2=20
30	American Indian or Alaska Native Notes: MRACASC2=30
40	Asian Notes: MRACASC2=40
41	Asian Indian Notes: MRACASC2=41
42	Chinese Notes: MRACASC2=42
43	Filipino Notes: MRACASC2=43
44	Japanese Notes: MRACASC2=44
45	Korean Notes: MRACASC2=45
46	Vietnamese Notes: MRACASC2=46
47	Other Asian Notes: MRACASC2=47
50	Pacific Islander Notes: MRACASC2=50
51	Native Hawaiian Notes: MRACASC2=51
54	Other Pacific Islander Notes: MRACASC2=54
70	Multiple responses Notes: MRACASC2>99
88	No race choice given Notes: MRACASC2=88
77	Don't know/Not Sure Notes: MRACASC2=77
99	Refused Notes: MRACASC2=99

Label: Hispanic, Latino/a, or Spanish origin calculated variable	
Section Name: Calculated Race Variables	
SAS Variable Name: _HISPANC	
Question: Hispanic, Latino/a, or Spanish origin calculated variable	
Value	Value Label
1	Hispanic, Latino/a, or Spanish origin
2	Not of Hispanic, Latino/a, or Spanish origin
9	Don't Know, Refused or Missing

Label: Computed Race-Ethnicity grouping	
Section Name: Calculated Race Variables	
SAS Variable Name: _RACE1	
Question: Race/ethnicity categories	
Value	Value Label
1	White only, non-Hispanic Notes: _HISPANC = 2 and _MRACE2 = 10
2	Black only, non-Hispanic Notes: _HISPANC = 2 and _MRACE2 = 20
3	American Indian or Alaskan Native only, Non-Hispanic Notes: _HISPANC = 2 and _MRACE2 = 30
4	Asian only, non-Hispanic Notes: _HISPANC = 2 and _MRACE2 = 40,41,42,43,44,45,46,47
5	Native Hawaiian or other Pacific Islander only, Non-Hispanic Notes: _HISPANC = 2 and _MRACE2 = 50,51,52,53,54
7	Multiracial, non-Hispanic
8	Hispanic Notes: _HISPANC = 1
9	Don't know/Not sure/Refused Notes: _HISPANC = 7 or 9 or _MRACE2 = 77, 88 or 99 and _HISPANC = 2



Label: Create Computed Non-Hispanic Whites/All Others Race Categories Race/Ethnic Group Codes Used In Post-Stratification Variable

Section Name: Calculated Race Variables

SAS Variable Name: \_RACEG22

Question: White non-Hispanic race group

Value	Value Label
1	Non-Hispanic White Notes: _RACE = 1
2	Non-White or Hispanic Notes: _RACE = 2 or 3 or 4 or 5 or 6 or 7 or 8
9	Don't know/Not sure/Refused Notes: _RACE = 9

Label: Computed Five level race/ethnicity category.

Section Name: Calculated Race Variables

SAS Variable Name: \_RACEGR4

Question: Five-level race/ethnicity category

Value	Value Label
1	White only, Non-Hispanic Notes: _RACE1=1
2	Black only, Non-Hispanic Notes: _RACE1=2
3	Other race only, Non-Hispanic Notes: _RACE1=3, 4, 5
4	Multiracial, Non-Hispanic Notes: _RACE1=6
5	Hispanic Notes: _RACE1=7
9	Don't know/Not sure/Refused Notes: _RACE1=9

Label: Computed race groups used for internet prevalence tables  
 Section Name: Calculated Race Variables  
 SAS Variable Name: \_RACEPR1  
 Question: Computed race groups used for internet prevalence tables

Value	Value Label
1	White only, non-Hispanic Notes: _RACE=1 or _RACE=9 and _IMPRACE=1
2	Black only, non-Hispanic Notes: _RACE=2 or _RACE=9 and _IMPRACE=2
3	American Indian or Alaskan Native only, Non-Hispanic Notes: _RACE=3 or _RACE=9 and _IMPRACE=4
4	Asian only, non-Hispanic Notes: _RACE=4 or _RACE=9 and _IMPRACE=3
5	Native Hawaiian or other Pacific Islander only, Non-Hispanic Notes: _RACE=5
6	Multiracial, non-Hispanic Notes: _RACE=6
7	Hispanic Notes: _RACE=7 or _RACE=9 and _IMPRACE==5

Label: Calculated sex variable  
 Section Name: Calculated Variables  
 SAS Variable Name: \_SEX  
 Question: Calculated sex variable

Value	Value Label
1	Male Notes: BIRTHSEX=1 or BIRTHSEX not equal to (1,2) and SEXVAR=1
2	Female Notes: BIRTHSEX=2 or BIRTHSEX not equal to (1,2) and SEXVAR=2

Label: Reported age in five-year age categories calculated variable  
 Section Name: Calculated Variables  
 SAS Variable Name: \_AGEG5YR  
 Question: Fourteen-level age category

Value	Value Label
1	Age 18 to 24 Notes: 18 <= AGE <= 24
2	Age 25 to 29 Notes: 25 <= AGE <= 29
3	Age 30 to 34 Notes: 30 <= AGE <= 34
4	Age 35 to 39 Notes: 35 <= AGE <= 39

5	Age 40 to 44 Notes: 40 <= AGE <= 44
6	Age 45 to 49 Notes: 45 <= AGE <= 49
7	Age 50 to 54 Notes: 50 <= AGE <= 54
8	Age 55 to 59 Notes: 55 <= AGE <= 59
9	Age 60 to 64 Notes: 60 <= AGE <= 64
10	Age 65 to 69 Notes: 65 <= AGE <= 69
11	Age 70 to 74 Notes: 70 <= AGE <= 74
12	Age 75 to 79 Notes: 75 <= AGE <= 79
13	Age 80 or older Notes: 80 <= AGE <= 99
14	Don't know/Refused/Missing Notes: 7 <= AGE <= 9

Label: Reported age in two age groups calculated variable

Section Name: Calculated Variables

SAS Variable Name: \_AGE65YR

Question: Two-level age category

Value	Value Label
1	Age 18 to 64 Notes: 18 <= AGE <= 64
2	Age 65 or older Notes: 65 <= AGE <= 99
3	Don't know/Refused/Missing Notes: 7 <= AGE <= 9

Label: Imputed Age value collapsed above 80  
 Section Name: Calculated Variables  
 SAS Variable Name: \_AGE80  
 Question: Imputed Age value collapsed above 80

Value	Value Label
18 - 24	Imputed Age 18 to 24
25 - 29	Imputed Age 25 to 29
30 - 34	Imputed Age 30 to 34
35 - 39	Imputed Age 35 to 39
40 - 44	Imputed Age 40 to 44
45 - 49	Imputed Age 45 to 49
50 - 54	Imputed Age 50 to 54
55 - 59	Imputed Age 55 to 59
60 - 64	Imputed Age 60 to 64
65 - 69	Imputed Age 65 to 69
70 - 74	Imputed Age 70 to 74
75 - 79	Imputed Age 75 to 79
80 - 99	Imputed Age 80 or older

Label: Imputed age in six groups  
 Section Name: Calculated Variables  
 SAS Variable Name: \_AGE\_G  
 Question: Six-level imputed age category

Value	Value Label
1	Age 18 to 24 Notes: 18 <= _IMPAGE <= 24
2	Age 25 to 34 Notes: 25 <= _IMPAGE <= 34
3	Age 35 to 44 Notes: 35 <= _IMPAGE <= 44
4	Age 45 to 54 Notes: 45 <= _IMPAGE <= 54
5	Age 55 to 64 Notes: 55 <= _IMPAGE <= 64
6	Age 65 or older Notes: _IMPAGE => 65

Label: Computed Height in Inches Section Name: Calculated Variables SAS Variable Name: HTIN4 Question: Reported height in inches	
Value	Value Label
36 - 95	Height in inches Notes: 0300 <= HEIGHT3 <= 0711 (metric HEIGHT3 value multiplied by 100 and divided by 2.54)
BLANK	Don't know/Refused/Not asked or Missing Notes: HEIGHT3=777, 999, 7777, 9999 or HEIGHT3 < 36 inches or HEIGHT3 > 95 inches or HEIGHT3=missing

Label: Computed Height in Meters Section Name: Calculated Variables SAS Variable Name: HTM4 Question: Reported height in meters	
Value	Value Label
91 - 244	Height in meters [2 implied decimal places] Notes: 0300 <= HEIGHT3 <= 0711 or 9091 <= HEIGHT3 <= 9244 (non-metric HEIGHT3 value multiplied by .0254)
BLANK	Don't know/Refused/Not asked or Missing Notes: HEIGHT3 = 7777 or 9999 or outside accepted values or HEIGHT3=missing

Label: Computed Weight in Kilograms Section Name: Calculated Variables SAS Variable Name: WTKG3 Question: Reported weight in kilograms	
Value	Value Label
2300 - 29500	Weight in kilograms [2 implied decimal places] Notes: 0001 <= WEIGHT2 <= 650 or 9023 <= WEIGHT2 <= 9295 (non-metric WEIGHT2 value divided by 2.2046)
BLANK	Don't know/Refused/Not asked or Missing Notes: WEIGHT2 = 7777 or 9999 or not in accepted values or WEIGHT2 = Missing

Label: Computed body mass index Section Name: Calculated Variables SAS Variable Name: <code>_BMI5</code> Question: Body Mass Index (BMI)	
Value	Value Label
1 - 9999	1 or greater Notes: $WTKG3 / (HTM4 * HTM4)$ (Has 2 implied decimal places)
BLANK	Don't know/Refused/Missing Notes: $WTKG3 = 777$ or $999$ or $HTM4 = 777$ or $999$

Label: Computed body mass index categories Section Name: Calculated Variables SAS Variable Name: <code>_BMI5CAT</code> Question: Four-categories of Body Mass Index (BMI)	
Value	Value Label
1	Underweight Notes: $_BMI5 < 1850$ ( <code>_BMI5</code> has 2 implied decimal places)
2	Normal Weight Notes: $1850 \leq _BMI5 < 2500$
3	Overweight Notes: $2500 \leq _BMI5 < 3000$
4	Obese Notes: $3000 \leq _BMI5 < 9999$
BLANK	Don't know/Refused/Missing Notes: $_BMI5 = 9999$

Label: Overweight or obese calculated variable Section Name: Calculated Variables SAS Variable Name: <code>_RFBMI5</code> Question: Adults who have a body mass index greater than 25.00 (Overweight or Obese)	
Value	Value Label
1	No Notes: $1200 \leq _BMI5 < 2500$ ( <code>_BMI5</code> has 2 implied decimal places)
2	Yes Notes: $2500 \leq _BMI5 < 9999$
9	Don't know/Refused/Missing Notes: $_BMI5 = 9999$

Label: Computed number of children in household

Section Name: Calculated Variables

SAS Variable Name: \_CHLDCNT

Question: Number of children in household

Value	Value Label
1	No children in household Notes: CHILDREN = 88
2	One child in household Notes: CHILDREN = 01
3	Two children in household Notes: CHILDREN = 02
4	Three children in household Notes: CHILDREN = 03
5	Four children in household Notes: CHILDREN = 04
6	Five or more children in household Notes: 05 <= CHILDREN < 88
9	Don't know/Not sure/Missing Notes: CHILDREN = 99

Label: Computed level of education completed categories

Section Name: Calculated Variables

SAS Variable Name: \_EDUCAG

Question: Level of education completed

Value	Value Label
1	Did not graduate High School Notes: EDUCA = 1 or 2 or 3
2	Graduated High School Notes: EDUCA = 4
3	Attended College or Technical School Notes: EDUCA = 5
4	Graduated from College or Technical School Notes: EDUCA = 6
9	Don't know/Not sure/Missing Notes: EDUCA = 9 or Missing

Label: Computed income categories

Section Name: Calculated Variables

SAS Variable Name: \_INCOMG1

Question: Income categories

Value	Value Label
1	Less than \$15,000 Notes: INCOME3=1,2
2	\$15,000 to < \$25,000 Notes: INCOME3=3,4
3	\$25,000 to < \$35,000 Notes: INCOME3=5
4	\$35,000 to < \$50,000 Notes: INCOME3=6
5	\$50,000 to < \$100,000 Notes: INCOME3=7,8
6	\$100,000 to < \$200,000 Notes: INCOME3=9,10
7	\$200,000 or more Notes: INCOME3=11
9	Don't know/Not sure/Missing Notes: INCOME3=77, 99, or missing

Label: Women respondents aged 40+ who have had a mammogram in the past two years

Section Name: Calculated Variables

SAS Variable Name: \_RFMAM22

Question: Women respondents aged 40+ who have had a mammogram in the past two years

Value	Value Label
1	Yes Notes: (BIRTHSEX=2 or (BIRTHSEX notin (1,2) and SEXVAR=2)) and AGE => 40and HADMAM = 1 and HOWLONG = 1 or 2
2	No Notes: (BIRTHSEX=2 or (BIRTHSEX notin (1,2) and SEXVAR=2))and AGE => 40 and HADMAM = 1 and HOWLONG = 3 or 4 or 5
9	Don't know/Not Sure/Refused Notes: (BIRTHSEX=2 or (BIRTHSEX notin (1,2) and SEXVAR=2)) and AGE => 40 and HADMAM = 1 and HOWLONG = 7 or 9 or (BIRTHSEX=2 or (BIRTHSEX notin (1,2) and SEXVAR=2)) and HADMAM = 7 or 9 or SEX1 = 2 and AGE = 7 or 9 or missing
BLANK	Missing or Age < 40 or Male Notes: (BIRTHSEX=1 or (BIRTHSEX notin (1,2) and SEXVAR=1)) or (BIRTHSEX=2 or (BIRTHSEX notin (1,2) and SEXVAR=2)) and AGE < 40 or (BIRTHSEX=2 or (BIRTHSEX notin (1,2) and SEXVAR=2)) and AGE => 40 and HADMAM = missing



Label: Women respondents aged 50-74 that have had a mammogram in the past two years	
Section Name: Calculated Variables	
SAS Variable Name: _MAM5023	
Question: Women respondents aged 50-74 who have had a mammogram in the past two years	
Value	Value Label
1	Received a mammogram within the past 2 years. Notes: (BIRTHSEX=2 or (BIRTHSEX notin (1,2) and SEXVAR=2)) and 50 <= AGE <= 74 and HADMAM = 1 and HOWLONG = 1 or 2
2	Did not receive a mammogram within the past 2 years. Notes: (BIRTHSEX=2 or (BIRTHSEX notin (1,2) and SEXVAR=2))and 50 <= AGE <= 74 and HADMAM = 1 and HOWLONG = 3 or 4 or 5 or HADMAM = 2
BLANK	Missing, Age < 50 or > 74 or Male Notes: (BIRTHSEX=1 or (BIRTHSEX notin (1,2) and SEXVAR=1)) or (BIRTHSEX=2 or (BIRTHSEX notin (1,2) and SEXVAR=2)) and AGE < 50 or (BIRTHSEX=2 or (BIRTHSEX notin (1,2) and SEXVAR=2)) and AGE > 74 or (BIRTHSEX=2 or (BIRTHSEX notin (1,2) and SEXVAR=2)) and 50 <= AGE <= 74 and HADMAM = missing or HOWLONG = missing

Label: Had colonoscopy calculated variable	
Section Name: Calculated Variables	
SAS Variable Name: _HADCOLN	
Question: Had colonoscopy calculated variable	
Value	Value Label
1	Have had a colonoscopy Notes: HADSIGM4=1 and COLNSIGM=1,3
2	Have not had a colonoscopy Notes: HADSIGM4=1 and COLNSIGM=2 or HADSIGM4=2
BLANK	Don't know/Refused/Missing

Label: Respondents aged 45-75 who have had a colonoscopy within the past ten years	
Section Name: Calculated Variables	
SAS Variable Name: _CLNSCP1	
Question: Respondents aged 45-75 who have had a colonoscopy within the past ten years	
Value	Value Label
1	Had a colonoscopy in the past ten years Notes: 45 </= AGE </= 75 and _HADCOLN =1 and COLNTES1=1,2,3,4
2	Had a colonoscopy ten or more years ago Notes: 45 </= AGE </= 75 and _HADCOLN=1 and COLNTES1=5
3	Have never had a colonoscopy Notes: 45 </= AGE </= 75 and _HADCOLN=2
BLANK	Missing, Age < 45, Age > 75 Notes: 45 </= AGE </= 75 and _HADCOLN=missing or COLNTES1=missing or AGE < 45 or AGE > 75

Label: Had sigmoidoscopy calculated variable	
Section Name: Calculated Variables	
SAS Variable Name: _HADSIGM	
Question: Had sigmoidoscopy calculated variable	
Value	Value Label
1	Have had a sigmoidoscopy Notes: HADSIGM4=1 and COLNSIGM=2,3
2	Have not had a sigmoidoscopy Notes: HADSIGM4=1 and COLNSIGM=1 or HADSIGM4=2
BLANK	Don't know/Refused/Missing

Label: Respondents aged 45-75 who have had a sigmoidoscopy within the past five years	
Section Name: Calculated Variables	
SAS Variable Name: _SGMSCP1	
Question: Respondents aged 45-75 who have had a sigmoidoscopy within the past five years	
Value	Value Label
1	Have had a sigmoidoscopy in the past 5 years Notes: 45 <=/ AGE <=/ 75 and _HADSIGM=1 and SIGMTES1=1,2,3
2	Have had a sigmoidoscopy 5 or more years ago Notes: 45 <=/ AGE <=/ 75 and _HADSIGM=1 and SIGMTES1=4,5
3	Have never had a sigmoidoscopy Notes: 45 <=/ AGE <=/ 75 and _HADSIGM=2
BLANK	Missing, Age < 45, Age > 75 Notes: 45 <=/ AGE <=/ 75 and _HADSIGM=missing or SIGMTES1=missing or AGE < 45 or AGE > 75

Label: Respondents aged 45-75 who have had a sigmoidoscopy within the past ten years	
Section Name: Calculated Variables	
SAS Variable Name: _SGMS101	
Question: Respondents aged 45-75 who have had a sigmoidoscopy within the past ten years	
Value	Value Label
1	Have had a sigmoidoscopy in the past 10 years Notes: 45 <=/ AGE <=/ 75 and _HADSIGM=1 and SIGMTES1=1,2,3,4
2	Have had a sigmoidoscopy 10 or more years ago Notes: 45 <=/ AGE <=/ 75 and _HADSIGM=1 and SIGMTES1=5
3	Have never had a sigmoidoscopy Notes: 45 <=/ AGE <=/ 75 and _HADSIGM=2
BLANK	Missing, Age < 45, Age > 75 Notes: 45 <=/ AGE <=/ 75 and _HADSIGM=7,9 or missing or SIGMTES1=7,9 or missing or AGE < 45 or AGE > 75

Label: Respondents aged 45-75 who have had a stool test within the past year

Section Name: Calculated Variables

SAS Variable Name: \_RFBLDS5

Question: Respondents aged 45-75 who have had a stool test within the past year

Value	Value Label
1	Had a blood stool test in the past year Notes: 45 <=/ AGE <=/ 75 and COLNCNCR=1 and SMALSTOL=1 and STOLTEST=1
2	Have had a blood stool test one or more years ago Notes: 45 <=/ AGE <=/ 75 and COLNCNCR=1 and SMALSTOL=1 and STOLTEST=2,3,4,5
3	Have never had a blood stool test Notes: 45 <=/ AGE <=/ 75 and (COLNCNCR=1 and SMALSTOL=2) or COLNCNCR=2
BLANK	Missing, Age < 45, Age > 75 Notes: 45 <=/ AGE <=/ 75 and SMALSTOL=missing or STOLTEST=missing or AGE < 45 or AGE > 75 or COLNCNCR = 7,9, or missing

Label: Respondents aged 45-75 who have had a stool DNA test within the past three years

Section Name: Calculated Variables

SAS Variable Name: \_STOLDN1

Question: Respondents aged 45-75 who have had a stool DNA test within the past three years

Value	Value Label
1	Had a stool DNA test in the past 3 years Notes: 45 <=/ AGE <=/ 75 and COLNCNCR=1 and STOOLDN2=1 and SDNATES1=1,2,3
2	Have had a stool DNA test 3 or more years ago Notes: 45 <=/ AGE <=/ 75 and COLNCNCR=1 and STOOLDN2=1 and SDNATES1=4,5
3	Have never had a stool DNA test Notes: 45 <=/ AGE <=/ 75 and (COLNCNCR=1 and STOOLDN2=2) or COLNCNCR=2
BLANK	Missing, Age < 45, Age > 75 Notes: 45 <=/ AGE <=/ 75 and STOOLDN2=missing or SDNATES1=missing or AGE < 45 or AGE > 75 or COLNCNCR=7,9,or missing

Label: Respondents aged 45-75 who have had a virtual colonoscopy within the past five years  
 Section Name: Calculated Variables  
 SAS Variable Name: \_VIRCOL1  
 Question: Respondents aged 45-75 who have had a virtual colonoscopy within the past five years

Value	Value Label
1	Had a virtual colonoscopy in the past 5 years Notes: 45 <= AGE <= 75 and COLNCNCR=1 and VIRCOLO1=1 and VCLNTES2=1,2,3
2	Have not had a virtual colonoscopy in the past 5 or more years Notes: 45 <= AGE <= 75 and COLNCNCR=1 and VIRCOLO1=1 and VCLNTES2=4,5
3	Have never had a virtual colonoscopy Notes: 45 <= AGE <= 75 and (COLNCNCR=1 and VIRCOLO1=2) or COLNCNCR=2
BLANK	Missing, Age < 45, Age > 75 Notes: 45 <= AGE <= 75 and VIRCOLO1=missing or VCLNTES2=missing or AGE < 45 or AGE > 75 or COLNCNCR=7,9,or missing

Label: Respondents aged 45-75 who have had a sigmoidoscopy within the past ten years and a blood stool test in the past year  
 Section Name: Calculated Variables  
 SAS Variable Name: \_SBONTI1  
 Question: Respondents aged 45-75 who have had a sigmoidoscopy within the past ten years and a blood stool test in the past year

Value	Value Label
1	Both on time Notes: 45 <= AGE <= 75 and COLNCNCR=1 and _SGMS101=1 and _RFBLDS5=1
2	At least one not on time Notes: 45 <= AGE <= 75 and (COLNCNCR=1 and (_SGMS101=2 or _RFBLDS5=2) or (_SGMS101_3 or _RFBLDS5_3)) or (COLNCNCR=2 and _SGMS101_3)
3	Never had either Notes: 45 <= AGE <= 75 and (COLNCNCR=1 and _SGMS101=3 and _RFBLDS5=3) or (COLNCNCR=2 and _SGMS101=3)
BLANK	Missing, Age < 45, Age > 75 Notes: 45 <= AGE <= 75 and _SGMS101=missing or _RFBLDS54=missing or COLNCNCR=7, 9, or missing or AGE < 45 or AGE > 75

Label: Respondents aged 45-75 who have fully met the USPSTF recommendations

Section Name: Calculated Variables

SAS Variable Name: \_CRCREC2

Question: Respondents aged 45-75 who have fully met the USPSTF recommendations

Value	Value Label
1	Had at least one of the recommended CRC tests within the recommended time interval Notes: 45 <= AGE <= 75 and _RFBLDS5=1 or _SGMSCP1=1 or _CLNSCP1=1 or _STOLDN1=1 or _VIRCOL1=1 or _SBONTI1=1
2	Did not have any of the recommended CRC tests within the recommended time interval Notes: 45 <= AGE <= 75 and _RFBLDS5=2,3 and _SGMSCP1=2,3 and _CLNSCP1=2,3 and _STOLDN1=2,3 and _VIRCOL1=2 and _SBONTI1=2
3	Have never had any of the recommended CRC tests Notes: 45 <= AGE <= 75 and _RFBLDS5=3 and _SGMSCP1=3 and _CLNSCP1 =3 and _STOLDN1=3 and _VIRCOL1=2 and _SBONTI1=2
BLANK	Missing, Age < 45, Age > 75 Notes: 45 <= AGE <= 75 and _RFBLDS5=missing or _SGMSCP1=missing or _CLNSCP1=missing or _STOLDN1=missing or _VIRCOL1=missing or _SBONTI1=missing or AGE < 45 or AGE > 75

Label: Computed Smoking Status

Section Name: Calculated Variables

SAS Variable Name: \_SMOKER3

Question: Four-level smoker status: Everyday smoker, Someday smoker, Former smoker, Non-smoker

Value	Value Label
1	Current smoker - now smokes every day Notes: SMOKE100 = 1 and SMOKEDAY = 1
2	Current smoker - now smokes some days Notes: SMOKE100 = 1 and SMOKEDAY = 2
3	Former smoker Notes: SMOKE100 = 1 and SMOKEDAY = 3
4	Never smoked Notes: SMOKE100 = 2
9	Don't know/Refused/Missing Notes: SMOKE100 = 1 and SMOKEDAY = 9 or SMOKE100 = 7 or 9 or Missing

Label: Current Smoking Calculated Variable

Section Name: Calculated Variables

SAS Variable Name: \_RFSMOK3

Question: Adults who are current smokers

Value	Value Label
1	No Notes: _SMOKER3 = 3 or 4
2	Yes Notes: _SMOKER3 = 1 or 2
9	Don't know/Refused/Missing Notes: _SMOKER3 = 9

Label: Current E-cigarette User Calculated Variable

Section Name: Calculated Variables

SAS Variable Name: \_CURECI1

Question: Adults who are current e-cigarette users

Value	Value Label
1	Not currently using E-cigarettes Notes: ECIGNOW2=1, 4
2	Current E-cigarette user Notes: ECIGNOW2=2,3
9	Don't know/Refused/Missing Notes: ECIGNOW2=7,9, or missing

Label: Number of years smoked cigarettes

Section Name: Calculated Variables

SAS Variable Name: \_YRSSMOK

Question: Number of years respondent smoked cigarettes

Value	Value Label
1 - 100	Years smoked cigarettes Notes: AGE-LCSFIRST_ or LCSLAST_-LCSFIRST_
BLANK	Don't know/Refused/Missing

Label: Number of packs of cigarettes smoked per day	
Section Name: Calculated Variables	
SAS Variable Name: <code>_PACKDAY</code>	
Question: Number of packs of cigarettes smoked per day	
Value	Value Label
0 - 100	Number of packs of cigarettes smoked per day Notes: <code>_PACKDAY=(LCSNUMCG_/20)</code>
BLANK	Don't know/Refused/Missing

Label: Years smoked reported packs per day	
Section Name: Calculated Variables	
SAS Variable Name: <code>_PACKYRS</code>	
Question: Number of years smoked reported number of packs per day	
Value	Value Label
0 - 999	Number of years smoked reported packs per day Notes: <code>_PACKYRS=round(_YRSSMOK*_PACKDAY)</code>
BLANK	Don't know/Refused/Missing

Label: Number of years since quit smoking cigarettes	
Section Name: Calculated Variables	
SAS Variable Name: <code>_YRSQUIT</code>	
Question: Number of years since quit smoking cigarettes	
Value	Value Label
1 - 100	Number of years since smoked cigarettes Notes: <code>_YRSQUIT=(AGE-LCSLAST_)</code>
BLANK	Don't know/Refused/Missing

Label: Smoking Group	
Section Name: Calculated Variables	
SAS Variable Name: <code>_SMOKGRP</code>	
Question: Smoking Group	
Value	Value Label
1	Current smoker, 20+ Pack Years Notes: <code>_SMOKER3 IN (1,2) AND _PACKYRS&gt;=20</code>
2	Former smoker, 20+ Pack Years, quit < 15 years Notes: <code>_SMOKER3=3 AND _PACKYRS&gt;=20 AND 0&lt;=_YRSQUIT&lt; 15</code>
3	All other current and former smokers Notes: All others where <code>_SMOKER3 IN (1,2,3)</code>
4	Never smoker Notes: <code>_SMOKER3=4</code>
BLANK	Don't know/Refused/Missing

Label: Lung cancer screening recommendation status

Section Name: Calculated Variables

SAS Variable Name: \_LCSREC

Question: Lung cancer screening recommendation status

Value	Value Label
1	Meet USPSTF recommendation: did have CAT/CT chest scan in last year Notes: LCSSCNCR=1 AND _SMOKGRP in (1,2) AND LCSTWHN=1
2	Does not meet USPSTF recommendation: did not have CAT/CT chest scan in last year Notes: All other current and former smokers
BLANK	Don't know/Refused/Missing

Label: Drink any alcoholic beverages in past 30 days

Section Name: Calculated Variables

SAS Variable Name: DRNKANY6

Question: Adults who reported having had at least one drink of alcohol in the past 30 days.

Value	Value Label
1	Yes Notes: 1 <= ALCDAY4 <= 231
2	No Notes: ALCDAY4=888
7	Don't know/Not Sure Notes: ALCDAY4=777
9	Refused/Missing Notes: ALCDAY4=999, Missing

Label: Computed drink-occasions-per-day

Section Name: Calculated Variables

SAS Variable Name: DROCDY4\_

Question: Drink-occasions-per-day

Value	Value Label
0	No Drink-Occasions per day Notes: ALCDAY4 = 888
1 - 899	Drink-Occasions per day Notes: ALCDAY4 <= 231
900	Don't know/Not Sure Or Refused/Missing Notes: ALCDAY4 = 777 or 999 or Missing



Label: Binge Drinking Calculated Variable  
Section Name: Calculated Variables  
SAS Variable Name: \_RFBING6  
Question: Binge drinkers (males having five or more drinks on one occasion, females having four or more drinks on one occasion)

Value	Value Label
1	No Notes: ALCDAY4<231 and DRNK3GE5=88; or ALCDAY4=888
2	Yes Notes: ALCDAY4<231 and 1<=DRNK3GE5<=76
9	Don't know/Refused/Missing Notes: DRNK3GE5=77, 99, missing; or ALCDAY4=777, 999, missing

Label: Computed number of drinks of alcohol beverages per week  
Section Name: Calculated Variables  
SAS Variable Name: \_DRNKWK2  
Question: Calculated total number of alcoholic beverages consumed per week

Value	Value Label
0	Did not drink Notes: DROCDY4_=0 or AVEDRNK3=88
1 - 98999	Number of drinks per week Notes: 0 < DROCDY4_ < 990
99900	Don't know/Not sure/Refused/Missing Notes: AVEDRNK3=.,77,99 or DROCDY4_=900

Label: Heavy Alcohol Consumption Calculated Variable  
Section Name: Calculated Variables  
SAS Variable Name: \_RFDRHV8  
Question: Heavy drinkers (adult men having more than 14 drinks per week and adult women having more than 7 drinks per week)

Value	Value Label
1	No Notes: (SEXVAR=1 or BIRTHSEX=1) and _DRNKWK2 <= 1400 or (SEXVAR=2 or BIRTHSEX=2) and _DRNKWK2 <= 700 or ALCDAY4=888
2	Yes Notes: (SEXVAR=1 or BIRTHSEX=1) and _DRNKWK2 > 1400 or (SEXVAR=2 or BIRTHSEX=2) and _DRNKWK2 > 700
9	Don't know/Refused/Missing Notes: ALCDAY5=777, 999, or missing, or _DRNKWEK=99, or missing

Label: Flu Shot Calculated Variable

Section Name: Calculated Variables

SAS Variable Name: \_FLSHOT7

Question: Adults aged 65+ who have had a flu shot within the past year

Value	Value Label
1	Yes Notes: AGE >=65 and FLUSHOT7 = 1
2	No Notes: AGE >=65 and FLUSHOT7 = 2
9	Don't know/Not sure Or Refused/Missing
BLANK	Age Less Than 65

Label: Pneumonia Vaccination Calculated Variable

Section Name: Calculated Variables

SAS Variable Name: \_PNEUMO3

Question: Adults aged 65+ who have ever had a pneumonia vaccination

Value	Value Label
1	Yes Notes: AGE >= 65 and PNEUVAC4 = 1
2	No Notes: AGE >= 65 and PNEUVAC4 = 2
9	Don't know/Not sure Or Refused/Missing Notes: AGE = 7 or 9 or Missing or PNEUVAC4 = 7 or 9 or Missing
BLANK	Age Less Than 65 Notes: AGE < 65

Label: Ever been tested for HIV calculated variable

Section Name: Calculated Variables

SAS Variable Name: \_AIDTST4

Question: Adults who have ever been tested for HIV

Value	Value Label
1	Yes Notes: HIVTST7 = 1
2	No Notes: HIVTST7 = 2
9	Don't know/Not sure/Refused Notes: HIVTST7 = 7 or 9
BLANK	Not asked or missing Notes: HIVTST7 = Missing

Label: Computed Fruit intake in times per day

Section Name: Calculated Variables

SAS Variable Name: FRUTDA2\_

Question: Fruit intake in times per day

Value	Value Label
0 - 9999	Times per day (two implied decimal places)
BLANK	Don't know/Not sure Or Refused/Missing

Label: Computed Fruit Dark Green Vegetable intake in times per day

Section Name: Calculated Variables

SAS Variable Name: GREEDA2\_

Question: Dark green vegetable intake in times per day

Value	Value Label
0 - 9999	Times per day (two implied decimal places)
BLANK	Don't know/Not sure Or Refused/Missing

Label: Computed French Fry intake in times per day

Section Name: Calculated Variables

SAS Variable Name: FRNCHDA\_

Question: French fry intake in times per day

Value	Value Label
0 - 9999	Times per day (two implied decimal places)
BLANK	Don't know/Not sure Or Refused/Missing

Label: Computed Potato per day

Section Name: Calculated Variables

SAS Variable Name: POTADA1\_

Question: Potato servings per day

Value	Value Label
0 - 9999	Times per day (two implied decimal places)
BLANK	Don't know/Not sure Or Refused/Missing

Label: Computed Other Vegetable intake in times per day

Section Name: Calculated Variables

SAS Variable Name: VEGEDA2\_

Question: Other vegetable intake in times per day

Value	Value Label
0 - 9999	Times per day (two implied decimal places)
BLANK	Don't know/Not sure Or Refused/Missing

Label: The number of missing fruit responses

Section Name: Calculated Variables

SAS Variable Name: \_MISFRT1

Question: The number of missing fruit responses

Value	Value Label
0	No missing fruit responses
1 - 2	Has 1 or 2 missing fruit responses

Label: The number of missing vegetable responses

Section Name: Calculated Variables

SAS Variable Name: \_MISVEG1

Question: The number of missing vegetable responses

Value	Value Label
0	No missing vegetable responses
1 - 4	Has 1, 2, 3, or 4 missing vegetable responses

Label: Missing any fruit responses

Section Name: Calculated Variables

SAS Variable Name: \_FRTRES1

Question: Missing any fruit responses

Value	Value Label
0	Not Included - Missing Fruit Responses
1	Included - Not Missing Fruit Responses

Label: Missing any vegetable responses

Section Name: Calculated Variables

SAS Variable Name: \_VEGRES1

Question: Missing any vegetable responses

Value	Value Label
0	Not Included - Missing Vegetable Responses
1	Included - Not Missing Vegetable Responses

Label: Total fruits consumed per day

Section Name: Calculated Variables

SAS Variable Name: \_FRUTSU1

Question: Total fruits consumed per day

Value	Value Label
0 - 99998	Number of Fruits consumed per day (two implied decimal places)
BLANK	Not asked or Missing

Label: Total vegetables consumed per day

Section Name: Calculated Variables

SAS Variable Name: \_VEGESU1

Question: Total vegetables consumed per day

Value	Value Label
0 - 99998	Number of Vegetables consumed per day (two implied decimal places)
BLANK	Not asked or Missing

Label: Consume Fruit 1 or more times per day

Section Name: Calculated Variables

SAS Variable Name: \_FRTL1A

Question: Consume Fruit 1 or more times per day

Value	Value Label
1	Consumed fruit one or more times per day
2	Consumed fruit less than one time per day
9	Don't know, refused or missing values

Label: Consume Vegetables 1 or more times per day

Section Name: Calculated Variables

SAS Variable Name: \_VEGLT1A

Question: Consume Vegetables 1 or more times per day

Value	Value Label
1	Consumed vegetables one or more times per day
2	Consumed vegetables less than one time per day
9	Don't know, refused or missing values

Label: Reported consuming Fruit >16 per day

Section Name: Calculated Variables

SAS Variable Name: \_FRT16A

Question: Reported consuming Fruit >16 per day

Value	Value Label
0	Not Included - Values are too high
1	Included - Values are in accepted range

Label: Reported consuming Vegetables >23 per day

Section Name: Calculated Variables

SAS Variable Name: \_VEG23A

Question: Reported consuming Vegetables >23 per day

Value	Value Label
0	Not Included - Values are too high
1	Included - Values are in accepted range

Label: Fruit Exclusion from analyses

Section Name: Calculated Variables

SAS Variable Name: \_FRUITE1

Question: Fruit Exclusion from analyses

Value	Value Label
0	No missing values and in accepted range
1	Missing Fruit responses
2	Fruit values out of range

Label: Vegetable Exclusion from analyses

Section Name: Calculated Variables

SAS Variable Name: \_VEGETE1

Question: Vegetable Exclusion from analyses

Value	Value Label
0	No missing values and in accepted range
1	Missing Vegetable responses
2	Vegetable values out of range

Weighting Variables

Label: Final weight: Land-line and cell-phone data  
 Section Name: Weighting Variables  
 SAS Variable Name: \_LLCPWT  
 Question: Final weight assigned to each respondent: Land-line and cell-phone data (raking derived weight)

Value	Value Label
HIDDEN	Data not displayed

Label: Sample Design Stratification Variable  
 Section Name: Weighting Variables  
 SAS Variable Name: \_STSTR  
 Question: Sample Design Stratification Variable

Value	Value Label
HIDDEN	Data not displayed Notes: Floating Decimal Point.

Label: Region  
 Section Name: Weighting Variables  
 SAS Variable Name: \_REGION  
 Question: Geographic region within a state, imputed from CTYCODE, \_IMPCTY, or \_GEOSTR

Value	Value Label
HIDDEN	Data not displayed