Questionnaire: SP Target Group: All Years Section: DMQ

Introduction and Verification (IVQ)

DMQ.010 [You have been chosen to participate in the National Health and Nutrition Examination Survey conducted by the U.S. Public Health Service. All the information that you give us will be kept in the strictest of confidence. Your name will not be attached to any of your answers without your specific permission. HAND RESPONDENT THE ADVANCE LETTER.] I would like to begin the health interview by verifying some information about {you/SP}.

VERIFY OR ASK DATE OF BIRTH AND AGE.

CAPI INSTRUCTION: DISPLAY DATE OF BIRTH AND SP AGE FROM SCREENER. IF AGE OR ALL OR PART OF DATE OF BIRTH NOT AVAILABLE, FILL CORRESPONDING FIELDS WITH 'DK' OR 'REF' AS APPROPRIATE. IF AGE IS A RANGE, DISPLAY THE RANGE FOR AGE. IF AGE IS LESS THAN 1 YEAR, DISPLAY AGE IN MONTHS. IF AGE IS CHANGED, DISPLAY MESSAGE TO CORRECT DOB. IF DOB IS CHANGED, RECALCULATE AGE.

DMQ.020 VERIFY GENDER.

CAPI INSTRUCTION: DISPLAY SP GENDER FROM SCREENER. IF GENDER NOT AVAILABLE, DISPLAY DK OR REF AS APPROPRIATE.

> { |___| } GENDER

BOX 1

CHECK ITEM DMQ.025: RUN SAMPLING ALGORITHM. IF PERSON NO LONGER IN THE SAMPLE DUE TO UPDATED AGE OR GENDER INFORMATION, CONTINUE. OTHERWISE, GO TO BOX 4.

DMQ.030 Thank you for your participation in the study. Our scientific, random selection process indicates that {you/SP} {have/has} not been selected for the next part of the study.

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BOX 2

CHECK ITEM DMQ.035: GO TO END OF INTERVIEW.

DMQ.040 What is {your/SP's} full name, including middle name?

What is your **first** name?

VERIFY SPELLING USE F1 FOR HELP RECORDING FIRST NAME

ENTER PREFIX (MS, MR, MRS, DR)

REFUSED	7777
DON'T KNOW	9999

ENTER FIRST NAME

REFUSED	7
DON'T KNOW	9

DMQ.050 What is {your/SP's} middle name?

VERIFY SPELLING USE F1 FOR HELP RECORDING MIDDLE NAME(S) IF NO MIDDLE NAME, MARK CHECK BOX

ENTER MIDDLE NAME #1

REFUSED	7
DON'T KNOW	9

ENTER MIDDLE NAME #2

REFUSED	7
DON'T KNOW	9

DMQ.060 What is {your/SP's} last name?

VERIFY SPELLING USE F1 FOR HELP RECORDING LAST NAME(S)

Questionnaire: SP Target Group: All Years Section: DMQ

ENTER LAST NAME #1

REFUSED	7
DON'T KNOW	9

ENTER LAST NAME #2

REFUSED	7
DON'T KNOW	9

DMQ.070 {Do you/Does SP} have a suffix? [What is it?]

ENTER SUFFIX (JR, SR, III)	
or	
NO	2
REFUSED	7
DON'T KNOW	9