Disability Days (DD) Section

BOX_01
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<table>
<thead>
<tr>
<th>IF PERSON IS LESS THAN 1 YEAR OF AGE (OR AGE CATEGORY 1), GO TO BOX_03</th>
</tr>
</thead>
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<table>
<thead>
<tr>
<th>OTHERWISE, CONTINUE WITH DD01</th>
</tr>
</thead>
</table>

DD01
=====

{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT}
{END-DT}

The next questions ask about time when (PERSON) may have missed a half day or more from work or school or spent a half day or more in bed since (START DATE). In answering these questions, please include any time when this occurred because of (PERSON)'s physical illness or injury, or a mental or emotional problem such as stress or depression.

PRESS ENTER TO CONTINUE.

<table>
<thead>
<tr>
<th>IF PERSON IS = OR &gt; 1 YEAR OLD AND &lt; 3 YEARS OLD (OR AGE CATEGORY 2), GO TO DD08</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>IF PERSON IS = OR &gt; 3 YEARS OLD AND &lt; OR = 15 YEARS OLD (OR AGE CATEGORY 3), GO TO DD05</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>IF PERSON IS = OR &gt; 16 YEARS OLD (OR AGE CATEGORIES 4-9), CONTINUE WITH DD02</th>
</tr>
</thead>
</table>

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<thead>
<tr>
<th>NOTE: THERE IS NO UPPER AGE LIMIT RESTRICTION FOR PERSONS WHO ARE ASKED THE WORK-LOSS DISABILITY DAYS QUESTION.</th>
</tr>
</thead>
</table>

21-1
DD02
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{PERSON'S FIRST MIDDLE AND LAST NAME} {STR-DT}
{END-DT}

{NUMBER OF DAYS IN HOSPITAL: {NUMBER OF DAYS}}

Let's start with work. {Including the time (PERSON) (were/was)
in the hospital, how/How} many days did (PERSON) miss a half
day or more from work since (START DATE)? Please do not
include work around the house.

PROBE: Include any time when a half day or more was missed
because of a physical illness or injury, or a mental or
emotional problem.

IF NO DAYS MISSED FROM WORK, CODE ‘995’.
IF PERSON DOES NOT WORK, CODE ‘996’.

[Enter Number of Days]  .................
NONE  ..................................... 995
DOES NOT WORK (OTHER THAN AROUND THE
HOUSE)  ..................................... 996
REF  ........................................ -7
DK  ......................................... -8

PRESS F1 FOR DEFINITION OF HALF DAY OR MORE.

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| DISPLAY 'NUMBER OF DAYS IN HOSPITAL: { }' IF |
| PERSON HAS AT LEAST ONE HOSPITAL STAY THAT ENDED |
| IN CURRENT ROUND (I.E., DISCHARGE DATE NOT |
| CODED '95' (STILL IN HOSPITAL)). |
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| FOR 'NUMBER OF DAYS', DISPLAY TOTAL NUMBER OF DAYS|
| PERSON WAS IN HOSPITAL FOR ALL HOSPITAL STAYS THAT|
| ENDED IN CURRENT ROUND (I.E., DISCHARGE DATE NOT |
| CODED '95' (STILL IN HOSPITAL)). |
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| DISPLAY 'Including the time..., how' IF PERSON HAS|
| AT LEAST ONE HOSPITAL STAY THAT ENDED IN CURRENT |
| ROUND (I.E., DISCHARGE DATE NOT CODED '95' (STILL |
| IN HOSPITAL)). |
| OTHERWISE, DISPLAY 'How'. |
----------------------------------------------------
RANGE CHECK: 1 THROUGH NUMBER OF DAYS IN REFERENCE PERIOD FOR THIS PERSON.

IF '0' ENTERED, DISPLAY THE FOLLOWING ERROR MESSAGE: 'IF NO WORK DAYS MISSED, CODE '995'.'

IF NUMBER ENTERED > NUMBER OF DAYS IN REFERENCE PERIOD, DISPLAY THE FOLLOWING ERROR MESSAGE:
‘NUMBER OF DAYS MUST BE EQUAL TO OR LESS THAN NUMBER IN REFERENCE PERIOD.’

IF CODED '995' (NONE), '996' (DOES NOT WORK), '-7' (REFUSED), OR '-8' (DON'T KNOW) AND PERSON IS 16 THROUGH 22 YEARS OF AGE INCLUSIVE (OR AGE CATEGORY 4), GO TO DD05

IF CODED '995' (NONE), '996' (DOES NOT WORK), '-7' (REFUSED), OR '-8' (DON'T KNOW) AND PERSON IS 23 YEARS OF AGE OR OLDER (OR AGE CATEGORIES 5-9), GO TO DD08

OTHERWISE, CONTINUE WITH DD03

NOTE: THE AGE RANGE FOR PERSONS GOING TO THE SCHOOL-LOSS DISABILITY DAYS QUESTION HAS BEEN EXTENDED TO INCLUDE INDIVIDUALS WHO MAY BE ATTENDING POST-SECONDARY INSTITUTIONS.
What are the health problems that caused (PERSON) to miss work on those days?

PROBE: Any other health problems?

IF CONDITION IS ALREADY LISTED, ASK: Is this the same (NAME OF CONDITION) that we have already talked about before? IF SAME EPISODE OF CONDITION, SELECT ENTRY ON ROSTER. IF NEW EPISODE OF CONDITION, ADD TO ROSTER.

TO TURN CHECK MARK ON/OFF, USE ARROW KEYS, PRESS ENTER. TO ADD, PRESS CTRL/A. TO DELETE, PRESS CTRL/D. TO LEAVE, PRESS ESC.

[1. Medical Condition] .................
[2. Medical Condition] .................
[3. Medical Condition] .................
OTHER SPECIFY: (____________)........91
ROSTER BEHAVIOR SPECIFICATIONS:

1. INTERVIEWER MAY SELECT A CONDITION(S) ALREADY LISTED ON THE ROSTER. DOING SO SHOULD NOT IMPACT THE ROUND FLAG OF THE CONDITION.
2. INTERVIEWER SHOULD BE ABLE TO ADD ANY NUMBER OF CONDITIONS AT THE ROSTER QUESTIONS (I.E., NO LIMIT TO THE NUMBER OF CONDITIONS). AS CONDITIONS ARE ENTERED, THEY SHOULD BE FLAGGED WITH THE NUMBER OF THE ROUND IN WHICH THEY WERE FIRST CREATED. THIS ROUND FLAG WILL BE USED LATER IN THE INTERVIEW TO DETERMINE WHICH QUESTIONS SHOULD BE ASKED.
3. INTERVIEWER SHOULD BE ABLE TO DELETE CONDITION THAT WAS RECORDED ON THE SCREEN WHERE DELETE IS USED. THAT IS, AS LONG AS THE INTERVIEWER HAS NOT LEFT THE SCREEN, SHE SHOULD BE ABLE TO DELETE A CONDITION ENTERED IN ERROR. IF DELETE IS ATTEMPTED AT A TIME WHEN IT IS NOT ALLOWED (I.E., AFTER THE LINK IS ESTABLISHED), DISPLAY THE FOLLOWING ERROR MESSAGE: ‘DELETE ALLOWED ONLY WHEN CONDITION IS FIRST ENTERED.’

FLAG ALL CONDITIONS SELECTED OR ADDED AS BEING ASSOCIATED WITH MISSED WORK DAYS IN THIS ROUND.

DD04

{PERSON’S FIRST MIDDLE AND LAST NAME} {STR-DT}
{END-DT}

NUMBER OF DAYS MISSED WORK: {NUMBER OF DAYS}

Of those days, how many did (PERSON) stay in bed for half a day or more?

[Enter Number of Days] ............
REF ..................................... -7
DK ..................................... -8

PRESS F1 FOR DEFINITION OF STAY IN BED.
MEPS FAMES Panel 1 Round 3 Disability Days (DD) Section
January 31, 1997

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| IF PERSON IS 16 THROUGH 22 YEARS OF AGE INCLUSIVE |
| (OR AGE CATEGORY 4), CONTINUE WITH DD05          |
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| IF PERSON IS 23 YEARS OF AGE OR OLDER (OR AGE     |
| CATEGORIES 5-9), GO TO DD08                       |
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| EDIT: DAYS IN BED < DAYS MISSED FROM WORK.        |
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| FOR ‘NUMBER OF DAYS’, DISPLAY THE NUMBER ENTERED  |
| AT DD02.                                          |
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DD05
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{PERSON'S FIRST MIDDLE AND LAST NAME}  {STR-DT}  
{END-DT}

{NUMBER OF DAYS IN HOSPITAL:  {NUMBER OF DAYS}}

Let's talk about school (and day care). {Including the time (PERSON) (were/was) in the hospital, how/How} many days did (PERSON) miss a half day or more of school (or day care) since (START DATE)?

PROBE: Include any time when a half day or more of school (or day care) was missed because of a physical illness or injury, or a mental or emotional problem.

IF NO DAYS MISSED FROM SCHOOL, CODE ‘995’.
IF PERSON DOES NOT ATTEND SCHOOL, CODE ‘996’.

[Enter Number of Days] .................
NONE ............................... 995  {DD08}
DOES NOT ATTEND SCHOOL ............... 996  {DD08}
REF ................................  -7  {DD08}
DK ..................................  -8  {DD08}

PRESS F1 FOR DEFINITION OF HALF DAY OR MORE.

[Code One]
DISPLAY ‘NUMBER OF DAYS IN HOSPITAL: ( )’ IF PERSON HAS AT LEAST ONE HOSPITAL STAY THAT ENDED IN CURRENT ROUND (I.E., DISCHARGE DATE NOT CODED ‘95’ (STILL IN HOSPITAL)).

FOR ‘NUMBER OF DAYS’, DISPLAY TOTAL NUMBER OF DAYS PERSON WAS IN HOSPITAL FOR ALL HOSPITAL STAYS THAT ENDED IN CURRENT ROUND (I.E., DISCHARGE DATE NOT CODED ‘95’ (STILL IN HOSPITAL)).

DISPLAY ‘Including the time..., how’ IF PERSON HAS AT LEAST ONE HOSPITAL STAY THAT ENDED IN CURRENT ROUND (I.E., DISCHARGE DATE NOT CODED ‘95’ (STILL IN HOSPITAL)). OTHERWISE, DISPLAY ‘How’.

RANGE CHECK: 1 THROUGH NUMBER OF DAYS IN REFERENCE PERIOD FOR THIS PERSON.

IF ‘0’ ENTERED, DISPLAY THE FOLLOWING ERROR MESSAGE: ‘IF NO SCHOOL DAYS MISSED, CODE ‘995’.’

IF NUMBER ENTERED > NUMBER OF DAYS IN REFERENCE PERIOD, DISPLAY THE FOLLOWING ERROR MESSAGE: ‘NUMBER OF DAYS MUST BE EQUAL TO OR LESS THAN NUMBER IN REFERENCE PERIOD.’
What are the health problems that caused (PERSON) to miss school on those days?

PROBE: Any other health problems?

IF CONDITION IS ALREADY LISTED, ASK: Is this the same (NAME OF CONDITION) that we have already talked about before? IF SAME EPISODE OF CONDITION, SELECT ENTRY ON ROSTER. IF NEW EPISODE OF CONDITION, ADD TO ROSTER.

TO TURN CHECK MARK ON/OFF, USE ARROW KEYS, PRESS ENTER.
TO ADD, PRESS CTRL/A. TO DELETE, PRESS CTRL/D.
TO LEAVE, PRESS ESC.

[1. Medical Condition] ............... 
[2. Medical Condition] ............... 
[3. Medical Condition] ............... 
OTHER SPECIFY: (__________).........91

---------------------------------------------------------------------
| ROSTER DEFINITION: THIS ITEM DISPLAYS PERSON’S- |
| MEDICAL-CONDITIONS-ROSTER.-------------------------- |
ROSTER BEHAVIOR SPECIFICATIONS:

1. INTERVIEWER MAY SELECT A CONDITION(S) ALREADY LISTED ON THE ROSTER. DOING SO SHOULD NOT IMPACT THE ROUND FLAG OF THE CONDITION.

2. INTERVIEWER SHOULD BE ABLE TO ADD ANY NUMBER OF CONDITIONS AT THE ROSTER QUESTIONS (I.E., NO LIMIT TO THE NUMBER OF CONDITIONS). AS CONDITIONS ARE ENTERED, THEY SHOULD BE FLAGGED WITH THE NUMBER OF THE ROUND IN WHICH THEY WERE FIRST CREATED. THIS ROUND FLAG WILL BE USED LATER IN THE INTERVIEW TO DETERMINE WHICH QUESTIONS SHOULD BE ASKED.

3. INTERVIEWER SHOULD BE ABLE TO DELETE CONDITION THAT WAS RECORDED ON THE SCREEN WHERE DELETE IS USED. THAT IS, AS LONG AS THE INTERVIEWER HAS NOT LEFT THE SCREEN, SHE SHOULD BE ABLE TO DELETE A CONDITION ENTERED IN ERROR. IF DELETE IS ATTEMPTED AT A TIME WHEN IT IS NOT ALLOWED (I.E., AFTER THE LINK IS ESTABLISHED), DISPLAY THE FOLLOWING ERROR MESSAGE: “DELETE ALLOWED ONLY WHEN CONDITION IS FIRST ENTERED.”

FLAG ALL CONDITIONS SELECTED OR ADDED AS BEING ASSOCIATED WITH MISSED SCHOOL DAYS IN THIS ROUND.

{PERSON’S FIRST MIDDLE AND LAST NAME} {STR-DT} {END-DT}

NUMBER OF DAYS MISSED SCHOOL: {NUMBER OF DAYS}

Of those days, how many did (PERSON) stay in bed a half day or more?

[Enter Number of Days] .................
REF ................................... -7
DK .................................... -8

PRESS F1 FOR DEFINITION OF STAY IN BED.
<table>
<thead>
<tr>
<th>DISPLAY NUMBER RECORDED IN DD05 FOR ‘NUMBER OF DAYS’.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>EDIT: DAYS IN BED AT DD07 &lt; DAYS MISSED FROM SCHOOL.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>EDIT: TOTAL BED DAYS (SUM OF ENTRY AT DD04 PLUS ENTRY AT DD07) MUST BE &lt; NUMBER OF DAYS IN REFERENCE PERIOD FOR PERSON.</th>
</tr>
</thead>
</table>

DD08
====

{PERSON'S FIRST MIDDLE AND LAST NAME}  {STR-DT}
{END-DT}

{NUMBER OF DAYS IN HOSPITAL:  {NUMBER OF DAYS} }

{Besides the days in bed you just told me about, how many additional days did (PERSON) spend a half day or more in bed since (START DATE) because of a physical illness or injury, or mental or emotional problem? {Please include the time (PERSON) (were/was) in the hospital.)

IF NO {ADDITIONAL} BED DAYS, CODE ‘995’.

[Enter Number of Days] ..............
NONE .................................. 995 {BOX_02}
REF .................................... -7 {BOX_02}
DK ..................................... -8 {BOX_02}

PRESS F1 FOR DEFINITION OF HALF DAY OR MORE AND STAY IN BED.

<table>
<thead>
<tr>
<th>DISPLAY ‘NUMBER OF DAYS IN HOSPITAL:  { }’ IF PERSON HAS AT LEAST ONE HOSPITAL STAY THAT ENDED IN CURRENT ROUND (I.E., DISCHARGE DATE NOT CODED ‘95’ (STILL IN HOSPITAL)).</th>
</tr>
</thead>
</table>
FOR 'NUMBER OF DAYS', DISPLAY TOTAL NUMBER OF DAYS PERSON WAS IN HOSPITAL FOR ALL HOSPITAL STAYS THAT ENDED IN CURRENT ROUND (I.E., DISCHARGE DATE NOT CODED '95' (STILL IN HOSPITAL)).

DISPLAY 'Besides the days...how', 'additional', AND 'ADDITIONAL' IF ANY BED DAYS RECORDED FOR THIS PERSON IN EITHER DD04 OR DD07. IF NO BED DAYS RECORDED AT DD04 AND DD07, DISPLAY, 'How'.

DISPLAY 'Please include...' IF PERSON HAS AT LEAST ONE HOSPITAL STAY THAT ENDED IN CURRENT ROUND (I.E., DISCHARGE DATE NOT CODED '95' (STILL IN HOSPITAL)).

RANGE CHECK: 1 THROUGH NUMBER OF DAYS IN REFERENCE PERIOD FOR THIS PERSON.

IF '0' ENTERED, DISPLAY THE FOLLOWING ERROR MESSAGE: 'IF NO ADDITIONAL BED DAYS, CODE '995'.'

EDIT: TOTAL BED DAYS (SUM OF ENTRY AT DD04 PLUS ENTRY AT DD07 PLUS ENTRY AT DD08) MUST BE LESS THAN OR EQUAL TO NUMBER OF DAYS IN REFERENCE PERIOD FOR PERSON.
What are the health problems that caused (PERSON) to spend half day or more in bed on those days?

PROBE: Any other health problems?

IF CONDITION IS ALREADY LISTED, ASK: Is this the same (NAME OF CONDITION) that we have already talked about before? IF SAME EPISODE OF CONDITION, SELECT ENTRY ON ROSTER. IF NEW EPISODE OF CONDITION, ADD TO ROSTER.

TO TURN CHECK MARK ON/OFF, USE ARROW KEYS, PRESS ENTER. TO ADD, PRESS CTRL/A. TO DELETE, PRESS CTRL/D. TO LEAVE, PRESS ESC.

[1. Medical Condition] ...............  
[2. Medical Condition] ...............  
[3. Medical Condition] ...............  
OTHER SPECIFY: (____________)...........91  

| ROSTER DEFINITION: THIS ITEM DISPLAYS PERSON’S- |  
| MEDICAL-CONDITIONS-ROSTER. |
ROSTER BEHAVIOR SPECIFICATIONS:

1. INTERVIEWER MAY SELECT A CONDITION(S) ALREADY LISTED ON THE ROSTER. DOING SO SHOULD NOT IMPACT THE ROUND FLAG OF THE CONDITION.

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FLAG ALL CONDITIONS SELECTED OR ADDED AS BEING ASSOCIATED WITH BED DAYS IN THIS ROUND.

CHECK AGE AND WORK STATUS:
IF LESS THAN 16 YEARS OF AGE OR AGE CATEGORIES 1-3), GO TO BOX_03

IF 16 YEARS OF AGE OR OLDER (OR AGE CATEGORIES 4-9) AND DD02 IS NOT CODED '996' (DOES NOT WORK OTHER THAN AROUND THE HOUSE), CONTINUE WITH DD10

IF 16 YEARS OF AGE OR OLDER (OR AGE CATEGORIES 4-9) AND DD02 IS CODED '996' (DOES NOT WORK OTHER THAN AROUND THE HOUSE), GO TO BOX_03
DD10
====

{PERSON'S FIRST MIDDLE AND LAST NAME}  {STR-DT}
{END-DT}

{Besides the {NUMBER MISSED WORK DAYS} days (PERSON) missed a half day or more from work because of (PERSON)'s own illness or injury, did/Did) (PERSON) miss more than a half day from work because of someone else's illness, injury, or health care needs, for example, to take care of a sick child or a relative?}

YES ................................. 1
NO/DO NOT WORK ....................... 2 {BOX_03}
REF .................................. -7 {BOX_03}
DK ................................. -8 {BOX_03}

PRESS F1 FOR DEFINITION OF HALF DAY OR MORE.

----------------------------------------------------
| DISPLAY 'Besides the ..., did' IF ANY BED DAYS | |
| RECORDED FOR THIS PERSON IN DD02. DISPLAY 'Did' | |
| IF NO BED DAYS RECORDED FOR THIS PERSON IN DD02. | |
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----------------------------------------------------
| DISPLAY NUMBER RECORDED IN DD02 FOR 'NUMBER | |
| MISSED WORK DAYS' IF DD02 ≠ '-7' (REFUSED) OR '-8'| |
| DON'T KNOW). IF DD02 = '-7' (REFUSED) OR '-8' | |
| DON'T KNOW), USE A NULL DISPLAY. | |
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DD11
====

{PERSON'S FIRST MIDDLE AND LAST NAME}  {STR-DT}
{END-DT}

How many days did (PERSON) miss a half day or more from work because of someone else's illness, injury, or health care needs?

[Enter Number of Days] .................
REF .................................. -7
DK .................................. -8
EDIT: DAYS ENTERED < NUMBER OF DAYS IN REFERENCE PERIOD

IF '0' ENTERED, DISPLAY THE FOLLOWING ERROR MESSAGE: ‘IF NO WORK DAYS MISSED, USE CTRL/B TO CORRECT PREVIOUS ANSWER.’

IF NUMBER ENTERED > NUMBER OF DAYS IN REFERENCE PERIOD, DISPLAY THE FOLLOWING ERROR MESSAGE: ‘NUMBER OF DAYS MUST BE EQUAL TO OR LESS THAN NUMBER IN REFERENCE PERIOD.’

BOX_03

GO TO NEXT QUESTIONNAIRE SECTION