Quality (Priority Conditions) Supplement (PC) Section

BOX_00A
======

----------------------------------------------------
| THE PC SECTION IS ASKED IN ROUNDS 3 AND 5 ONLY. IF|
| IT IS ROUND 1, 2, OR 4, CONTINUE TO THE NEXT      |
| SECTION.                                          |
----------------------------------------------------

BOX_00
======

----------------------------------------------------
| CONTEXT HEADER DISPLAY INSTRUCTIONS:              |
| DISPLAY PERS.FULLNAME                             |
----------------------------------------------------

BOX_01
======

----------------------------------------------------
| NOTE: CURRENTLY THE QUALITY SUPPLEMENT CONTAINS    |
| QUESTIONS FOR PERSONS FOR WHOM DIABETES OR ASTHMA  |
| WAS REPORTED IN THE PRIORITY CONDITION ENUMERATION|
| (PE) SECTION. OTHER QUALITY QUESTIONS ARE LOCATED  |
| IN THE PREVENTIVE CARE (AP) SECTION. HOWEVER, THE |
| QUALITY SECTION COULD INCLUDE QUESTIONS FOR THE    |
| OTHER PRIORITY CONDITIONS AS THEY ARE NEEDED IN    |
| FUTURE PANELS.                                    |
----------------------------------------------------

PC01
=====
OMITTED.
BOX_01A
=======

----------------------------------------------------
| IF PERSON IS => 18 YEARS OF AGE OR IN AGE CATEGORIES 4-9 AND IF 'DIABETES' ON PERSON'S MEDICAL-CONDITIONS-ROSTER AND FLAGGED AS CREATED IN THE PE SECTION (IN ANY ROUND), CONTINUE WITH PC02A |
----------------------------------------------------

----------------------------------------------------
| OTHERWISE, GO TO BOX_01B |
----------------------------------------------------

PC01A
=====
OMITTED.

PC01B
=====
OMITTED.

PC01C
=====
OMITTED.

PC01D
=====
OMITTED.

PC01E
=====
OMITTED.

PC01F
=====
OMITTED.

PC01G
=====
OMITTED.

PC01H
=====
OMITTED.
The care of adults with diabetes is an interest of the Public Health Service. (During an earlier interview, it/It) was mentioned that (PERSON) (have/has) diabetes. We have a short questionnaire on the care adults may get for their diabetes.

SELECT ‘CONTINUE’ UNLESS RESPONDENT VOLUNTEERS DIABETES REPORTED IN ERROR.

CONTINUE ........................................ 1 {PC03}
(PERSON) DOES NOT HAVE DIABETES .......... 2 {BOX_01B}

[Code One]

| DISPLAY ‘During an earlier interview, it’ IF |
| DIABETES WAS NOT CREATED DURING THE CURRENT ROUND. |
| DISPLAY ‘It’ IF DIABETES CREATED DURING THE |
| CURRENT ROUND. |

| DISPLAY ‘PERSON’ IN PURPLE IN THE ANSWER TEXT. |
| DISPLAY ‘NOT’ IN BOLD IN THE ANSWER TEXT. |

| IF ‘PERSON DOES NOT HAVE DIABETES’ IS SELECTED, |
| THIS DOES NOT RE-SET THE DATA FROM THE PE SECTION |
| (PRND.PCDIABET). THE RESPONSE TO PC02A WILL |
| DETERMINE WHETHER PC03 IS ASKED AND WHETHER THERE |
| IS DCS FOLLOW-UP FOR THIS PERSON IN THE CL |
| SECTION. |
PC03
====

{PERSON'S FIRST MIDDLE AND LAST NAME}

PID: {PID}
DOB: {MM/DD/YYYY}
STATUS: {CURRENT/INSTITUTIONALIZED/DECEASED}

DETERMINE IF SELF OR PROXY DIABETES CARE SUPPLEMENT (DCS) SHOULD BE DISTRIBUTED:

SELF DCS: FOR ANY CURRENT RU MEMBER (18 YEARS OR OLDER) WHO HAS DIABETES.

PROXY DCS: FOR ANY CURRENT RU MEMBER (18 OR OLDER) WHO IS INSTITUTIONALIZED, DECEASED, OR OTHERWISE INCAPACITATED.

CODE TYPE OF DCS DISTRIBUTED FOR (PERSON).

SELF ................................... 1 {PC03A}
PROXY .................................. 2 {PC03OV1}

[Code One]

| DISPLAY PID OF PERSON BEING ASKED ABOUT FOR ‘PID’. |
| DISPLAY DATE OF BIRTH FOR PERSON BEING ASKED ABOUT FOR ‘MM/DD/YYYY’. |
| DISPLAY ‘CURRENT’ IF PERSON BEING ASKED ABOUT IS A CURRENT RU MEMBER AND IS NOT DECEASED OR INSTITUTIONALIZED. DISPLAY ‘INSTITUTIONALIZED’ IF PERSON BEING ASKED ABOUT IS FLAGGED AS ‘INSTITUTIONALIZED’ FOR THE CURRENT ROUND. DISPLAY ‘DECEASED’ IF PERSON BEING ASKED ABOUT IS FLAGGED AS ‘DECEASED’ FOR THE CURRENT ROUND. |

| FLAG ALL PERSONS WHO ARE ASKED PC03 FOR DCS FOLLOW-UP IN THE CLOSING (CL) SECTION. |
PC03OV1

{PERSON'S FIRST MIDDLE AND LAST NAME}

CODE REASON FOR PROXY DCS.

DECEASED ........................................ 1 {PC03A}
INSTITUTIONALIZED ............................ 2 {PC03A}
OTHER .......................................... 3 {PC03OV2}

[Code One]

----------------------------------------------------
| THIS ITEM IS A SEPARATE SCREEN RATHER THAN AN     |
| OVERLAY AS IMPLIED BY THE ITEM NAME.              |
----------------------------------------------------

PC03OV2

{PERSON'S FIRST MIDDLE AND LAST NAME}

SPECIFY OTHER REASON FOR PROXY DCS.

[Enter Other Specify] ....................   {PC03A}

PC03A

{PERSON'S FIRST MIDDLE AND LAST NAME}

PID: {PID}  DOB: {MM/DD/YYYY}

PREPARE {SELF/PROXY} DIABETES CARE SUPPLEMENT (DCS): WRITE IN
PERSON NAME, PID, DATE OF BIRTH, AND RUID.

HAND PREPARED {SELF/PROXY} DCS TO RESPONDENT AND SAY:

We hope that {(PERSON)/you or someone else in the family} would
be able to fill out this short questionnaire on the care (PERSON)
get(s) for (PERSON)'s diabetes. {(PERSON)/You} can give it to me
before I leave today, or I can pick it up later.

PRESS ENTER OR SELECT NEXT PAGE TO CONTINUE.
| DISPLAY 'SELF' AND '(PERSON)' IF PC03 IS CODED '1' |
| (SELF). DISPLAY 'PROXY', 'you or someone else in |
| the family' AND 'You' IF PC03 IS CODED '2' (PROXY) |

| DISPLAY PID OF PERSON BEING ASKED ABOUT FOR 'PID'. |
| DISPLAY DATE OF BIRTH FOR PERSON BEING ASKED ABOUT |
| FOR 'MM/DD/YYYY'. |

PC04
====
OMITTED.

PC04A
====
OMITTED.

PC05
====
OMITTED.

BOX_01B
=======

| IF 'ASTHMA' ON PERSON'S-MEDICAL-CONDITIONS-ROSTER, |
| AND FLAGGED AS CREATED IN THE PE SECTION (IN ANY |
| ROUND), CONTINUE WITH PC04B |

| OTHERWISE, GO TO BOX_03 |
{PERSON'S FIRST MIDDLE AND LAST NAME}

(During an earlier interview, it was mentioned that (PERSON) (have/has) asthma.)

Now I would like to ask you a few questions about (PERSON)’s asthma and the course of treatment (PERSON) received.

SELECT ‘CONTINUE’ UNLESS RESPONDENT VOLUNTEERS ASTHMA REPORTED IN ERROR.

CONTINUE ........................................ 1 {PC05A}
(PERSON) DOES NOT HAVE ASTHMA .......... 2 {BOX_03}

[Code One]
I am going to ask you about two different kinds of asthma medicine. One is for quick relief. The other does not give quick relief but protects your lungs and prevents symptoms over the long term.

**During the past 3 months, (have/has) (PERSON) used the kind of prescription inhaler that you breathe in through your mouth that gives quick relief from asthma symptoms?**

YES .................................... 1 {PC05B}
NO ..................................... 2 {PC06A}
REF ................................... -7 {PC06A}
DK .................................... -8 {PC06A}

**During the past 3 months, did (PERSON) use more than three canisters of this type of inhaler?**

YES .................................... 1 {PC06A}
NO ..................................... 2 {PC06A}
REF ................................... -7 {PC06A}
DK .................................... -8 {PC06A}

(Have/Has) (PERSON) ever taken the preventive kind of asthma medicine used every day to protect your lungs and keep you from having attacks? Include both oral medicine and inhalers. This is different from inhalers used for quick relief.

YES .................................... 1 {PC06B}
NO ..................................... 2 {PC08}
REF ................................... -7 {PC08}
DK .................................... -8 {PC08}
(Are/Is) (PERSON) now taking this medication (that protects the lungs) daily or almost daily?

YES .................................... 1 {PC08}
NO ..................................... 2 {PC08}
REF ................................... -7 {PC08}
DK .................................... -8 {PC08}

OMITTED.

A peak flow meter measures how hard you can blow air out of your lungs. (Do/Does) (PERSON) currently have a peak flow meter at home?

YES .................................... 1 {PC08A}
NO ..................................... 2 {BOX_03}
REF ................................... -7 {BOX_03}
DK .................................... -8 {BOX_03}

OMITTED.

Did (PERSON) ever use the peak flow meter?

YES .................................... 1 {PC08B}
NO ..................................... 2 {BOX_03}
REF ................................... -7 {BOX_03}
DK .................................... -8 {BOX_03}
When did (PERSON) last use the peak flow meter? Was it within the last seven days, more than seven days ago but within the last thirty days, or more than thirty days ago?

- **Within last 7 days**: 1 {BOX_03}
- **More than 7, but within last 30 days**: 2 {BOX_03}
- **More than 30 days ago**: 3 {BOX_03}
- **Ref**: -7 {BOX_03}
- **DK**: -8 {BOX_03}

[Code One]
PC19
====

OMITTED.

PC20
====

OMITTED.

BOX_03
=====

----------------------------------------------------
| GO TO NEXT QUESTIONNAIRE SECTION                  |
----------------------------------------------------