

WEB SCREENER

OVERALL PROGRAMMING NOTES

- Display “Previous” and “Next” buttons at the bottom of the screen to navigate between questions.
- Do not display response option values.
- Do not display question numbers.
- If respondent proceeds without answering an item not marked as “DO NOT ADVANCE WITHOUT A RESPONSE” assign value -9 to question.
- If respondent leaves the form and returns later, send returning respondent to the last answered question after login.
- Display “Save & Continue Later” button at the bottom of the screen to save and exit form. If respondent clicks “Save & Continue Later” button before SCQ.800, go to SCQ.800-SCQ.850 before saving and exiting form. If respondent clicks “Save and Exit” on SCQ.800-850, save and exit form.
- If respondent exits form and sampling has not occurred, save form as Partially Worked.
- Display OMB No. 0920-0950 at top right corner of each page.
- Display buttons with “English” and “Español” options. Default each page to English selection with English text. Respondent may change selection to Spanish at any point in the form and all text will translate to Spanish. All future screens will remain in Spanish until respondent returns dropdown selection to English.

FORMATTING

- Text clarifying about whom the questions are being asked should be displayed in a slightly larger font and in bold.
- Question text and response options should be displayed in blue text in the standard font size. There should be a blank line between the question text and the response options.
- Explanatory text should be displayed in the standard font, in blue, and in italic. There should be a blank line between the question text and the explanatory text and a blank line between the explanatory text and the response options. If there are multiple lines of explanatory text, these should be displayed on separate lines but without blank lines between them.

SCQ.700 LANDING PAGE

DISPLAY HEADER - STUDY/GOVERNMENT LOGOS:

- CDC logo (with alt text “Centers for Disease Control and Prevention Logo”)
- NHANES logo (with alt text “National Health and Nutrition Examination Survey Logo”)

DISPLAY SECTION: WELCOME TO NHANES AND PASSCODE ENTRY

Welcome to NHANES

The National Health and Nutrition Examination Survey (NHANES) is designed to assess the health and nutritional status of adults and children in the United States. This short online form will help us learn more about the people that live at this address. Doing this will help us know who in your household can take part in the next step of NHANES.

To begin, please enter the passcode that was included in your invitation letter.

□□□□-□□□□-□□□□-□□

BUTTON: Begin

BUTTONS/TABS:

- Completion Guide
- FAQs
- Privacy
- Contact

DISPLAY SECTION: COMPLETION GUIDE

Completion Guide

1. **Passcode**
Log in using the unique passcode that was included in your invitation letter.
2. **Select an Answer**
Answer the questions to the best of your ability. There are no right or wrong answers.
3. **Next/Previous**
Use the Next or Previous button to navigate between questions.
4. **Submit**
When you have completed this online form, select "Submit Form."

[IMAGE OF MEC]

DISPLAY SECTION: FREQUENTLY ASKED QUESTIONS

Frequently Asked Questions

Why did you pick my household?

We want everyone to have an equal chance of being in the survey. We can't go to every household in the U.S., so we randomly choose homes to visit. We want our information to reflect the many different types of people and homes in the U.S. You have the chance to represent thousands of other people in the U.S. like you!

How will my information be used?

We will use the information from this short form to see if anyone in your household is able to take part in the next step of the NHANES.

How long will this take?

This online form takes about 10 minutes to complete.

How is NHANES useful?

For more than 60 years, thousands of people like you have been part of NHANES. The information NHANES gathers has helped improve our country's health. It showed us:

- What chemicals in food and gasoline were harming people's health.
- What a healthy growth rate is for babies and children.
- How many people in the U.S. have high blood pressure, high cholesterol, and diabetes.

NHANES data also help determine which health programs get funding and in which communities.

Who runs this study?

NHANES is run by the National Center for Health Statistics at the Centers for Disease Control and Prevention.

DISPLAY SECTION: PRIVACY

Privacy

About the Study

This survey is conducted by the National Center for Health Statistics - part of the Centers for Disease Control and Prevention (CDC). A letter was sent to you recently explaining a survey called the National Health and Nutrition Examination Survey and is about your family's health. Thank you for agreeing to answer a few questions online. Your answers will help us conduct the survey more efficiently. This will take about 10 minutes of your time.

This is a secure website. All information that you give us is voluntary and will be kept confidential. Your name will not be attached to any of your answers without your specific permission.

Assurance of Confidentiality

We take your privacy very seriously. All information that relates to or describes identifiable characteristics of individuals, a practice, or an establishment will be used only for statistical purposes. NCHS staff, contractors, and agents will not disclose or release responses in identifiable form without the consent of the individual or establishment in accordance with section 308(d) of the Public Health Service Act (42 U.S.C. 242m) and the Confidential Information Protection and Statistical Efficiency Act of 2018 (Title III of the Foundations for Evidence-Based Policymaking Act of 2018 (Pub. L. No. 115-435, 132 Stat. 5529 § 302)). In accordance with CIPSEA, every NCHS employee, contractor, and agent has taken an oath and is subject to a jail term of up to five years, a fine of up to \$250,000, or both if he or she willfully discloses ANY identifiable information about you.

Public Reporting Burden

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road, MS D-74, Atlanta, GA 30333, ATTN: PRA (0920-0950).

DISPLAY SECTION: CONTACT

Contact us with any questions or comments about NHANES!

If you need assistance, please contact 855-958-0631. For general questions about the survey, please visit www.cdc.gov/nhanes.

WEBSITE INSTRUCTIONS:

DISPLAY THE ABOVE CONTENT IN A 508-COMPLIANT DISPLAY USING THE NHANES COLOR PALETTE. BUTTONS Survey Guide, FAQs, Privacy AND Contact SHOULD NAVIGATE THE USER TO THE APPROPRIATE SECTIONS. A FLOATING MENU SHOULD ENABLE USERS TO NAVIGATE TO OTHER SECTIONS. DISPLAY PASSCODE FIELD WITH INPUT MASK THAT MIRRORS THE FORMAT OF THE PASSCODE.

HARD EDIT CHECK 1: IF PASSCODE IS INVALID, DISPLAY THE FOLLOWING MESSAGE:

"The passcode you entered is incorrect. If you lost your passcode or need assistance, please contact us at 855-958-0631."

ALLOW RESPONDENT TO RE-ENTER PASSCODE.

HARD EDIT CHECK 2: IF A COMPLETED FORM HAS ALREADY BEEN SUBMITTED FROM EITHER WEB OR PAPER, AND A RESPONDENT TRIED TO ENTER THE WEB FORM AGAIN, DISPLAY THE FOLLOWING MESSAGE,

Thank you! A completed form has already been submitted for this household.

If you have questions or concerns, please contact us at 855-958-0631. For general questions about the survey, visit www.cdc.gov/nhanes.

TIMEOUT EDIT CHECK: TRIGGER MESSAGE IF SESSION TIMES OUT. SESSION SHOULD TIME OUT AFTER 20 MINUTES OF INACTIVITY.

SURVEY TIMEOUT MESSAGE

Your session has timed out.

Please enter your pass code to sign-in again.

If you have questions or concerns, please contact us at 855-958-0631. For general questions about the survey, please visit www.cdc.gov/nhanes.

BOX 1

CHECK ITEM SCQ.700 IF INTERVIEWER_ADMINISTRATOR IS NOT EQUAL TO 58, CONTINUE. OTHERWISE, GO TO SCQ.725.

SCQ.710 **FIELD SUPPORT INSTRUCTION: SELECT INTERVIEW MODE. SELECT PHONE IF DATA COLLECTED FROM RESPONDENT OVER PHONE. SELECT PAPER IF RESPONDENT RETURNED PAPER SCREENER IN MAIL.**

PHONE..... 2

PAPER 3

SCQ.725 **NHANES SCREENING FORM**

THE MATERIAL EMBODIED IN THIS SOFTWARE IS PROVIDED TO YOU "AS-IS" AND WITHOUT WARRANTY OF ANY KIND, EXPRESS, IMPLIED OR OTHERWISE, INCLUDING WITHOUT LIMITATION, ANY WARRANTY OF FITNESS FOR A PARTICULAR PURPOSE. IN NO EVENT SHALL THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) OR THE UNITED STATES (U.S.) GOVERNMENT BE LIABLE TO YOU OR ANYONE ELSE FOR ANY DIRECT, SPECIAL, INCIDENTAL, INDIRECT OR CONSEQUENTIAL DAMAGES OF ANY KIND, OR ANY DAMAGES WHATSOEVER, INCLUDING WITHOUT LIMITATION, LOSS OF PROFIT, LOSS OF USE, SAVINGS OR REVENUE, OR THE CLAIMS OF THIRD PARTIES, WHETHER OR NOT CDC OR THE U.S. GOVERNMENT HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH LOSS, HOWEVER CAUSED AND ON ANY THEORY OF LIABILITY, ARISING OUT OF OR IN CONNECTION WITH THE POSSESSION, USE OR PERFORMANCE OF THIS SOFTWARE.

WEBSITE INSTRUCTIONS:

DISPLAY THE ABOVE HEADING AND TEXT AND REQUIRE THE RESPONDENT TO CLICK NEXT TO MOVE TO THE MAIN FORM.

SCQ.730 In this form, we will ask you a short series of questions about the people that live in your household. Taking part in this interview is voluntary. You may choose to skip any question you don't wish to answer or end the interview at any time.

Instructions for completing the form:

- Please do NOT use your browser's forward and back buttons to navigate through the form. If you do, the answers you have entered may be lost. Instead, please use the 'Previous' and 'Next' buttons on the bottom of each page.
- If you would like to leave the form before you are finished, please click on the 'Save and Continue Later' button. Exiting out of your browser window will cause your data to be lost.
- Once you complete the form, you will be asked to submit it. Once you click the 'Submit' button, you will not be able to re-enter your form.

To begin, please select 'Next'.

WEBSITE INSTRUCTIONS:

DISPLAY THE TEXT STARTING WITH "In this form..." IN THE STANDARD FONT AND COLOR.

SCQ.010 This form should be completed by an adult age 18 or older. Are you 18 years or older?

YES 3
 NO 1 (SCQ_END5)

WEBSITE INSTRUCTIONS:

DISPLAY ANSWERS AS RADIO BUTTONS. DO NOT ADVANCE WITHOUT A RESPONSE.

SCQ.015 Do you live at the address shown below? This is the address where the invitation letter was mailed to.

{#} {DIRECTION} {STREET NAME} {STREET/ROAD/AVENUE} {DIRECTION}
 {UNIT/APT/BLDG} {UNIT #} {PO BOX} {RURAL ROUTE #} {RURAL ROUTE BOX}
 {CITY} {STATE} {ZIP}

Yes 1 (SCQ.595)
 Yes, with corrections 3 (SCQ.070a)
 No 2 (SCQ_END5)

WEBSITE INSTRUCTIONS:

DISPLAY THE ADDRESS ASSOCIATED WITH THE RESPONDENT PASSCODE FROM ISIS DATABASE. DISPLAY ANSWERS AS RADIO BUTTONS. DO NOT ADVANCE WITHOUT A RESPONSE.

SCQ_END5 Thank you for your time! Please have an adult 18 years or older who lives at this address come back to complete this form. If you have any questions, please call 855-958-0631. For general questions about the survey, please visit www.cdc.gov/NHANES.

Click the 'Exit' button to exit the form.

EXIT (LANDING PAGE)

WEBSITE INSTRUCTIONS:

EXIT FORM ONCE EXIT BUTTON IS CLICKED. RETURN TO THE LANDING PAGE. KEEP SCREENER DISPOSITION AS NOT WORKED.

SCQ.070a **The physical address selected for this study is shown below. If necessary, please make any corrections and select 'Next' to continue, otherwise just select 'Next'.**

{#} {DIR PRE} {STREET NAME} {STREET/ROAD/AVENUE} {DIR POST}
{UNIT/APT/BLDG} {UNIT #}
{CITY} {STATE} {ZIP}

WEBSITE INSTRUCTIONS:

DISPLAY THE ADDRESS ASSOCIATED WITH RESPONDENT PASSCODE FROM ISIS DATABASE.
RESPONDENT SHOULD BE ABLE TO EDIT OR ENTER THROUGH EACH FIELD. DO NOT ALLOW THE FIELD FOR STATE TO BE UPDATED. DO NOT ALLOW THE ENTRY OF "PO BOX" OR SIMILAR INTO THE STREET FIELD. DO NOT ADVANCE WITHOUT A RESPONSE.

SCQ.595 **These first questions are about your general health. Please select 'Next' to continue.**

WEBSITE INSTRUCTIONS:

DISPLAY TEXT IN STANDARD FONT.

SCQ.600 **Would you say your health in general is...**

excellent,	1
very good,.....	2
good,	3
fair, or	4
poor?	5

WEBSITE INSTRUCTIONS:

DISPLAY ANSWERS AS RADIO BUTTONS.

SCQ.610 **Are you now taking any medications prescribed by a health professional such as a doctor or dentist?**

Yes	1
No.....	2 (SCQ.630)

WEBSITE INSTRUCTIONS:

DISPLAY ANSWERS AS RADIO BUTTONS.

SCQ.620 **How many prescription medications do you currently use or take? Would you say...**

1 to 2,	1
3 to 5, or	2
6 or more?	3

WEBSITE INSTRUCTIONS:

DISPLAY ANSWERS AS RADIO BUTTONS.

SCQ.630 **Has a doctor or other health professional ever told you that you had diabetes?**

If you had diabetes only during pregnancy, select 'No.'

- Yes 1
- No 2
- Borderline or prediabetes 3

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.

SCQ.640 **Has a doctor or other health professional ever told you that you had hypertension, also called high blood pressure?**

If you were told you had high blood pressure only during pregnancy, select 'No.' If you were told you had high normal blood pressure, borderline hypertension, or prehypertension, select 'No.'

- Yes 1
- No 2

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.

SCQ.085 **These next questions are about the people that live at this address.**

WEBSITE INSTRUCTIONS:
DISPLAY IN STANDARD FONT AND COLOR.

SCQ.090 **How many people live here? Please do not include anyone who usually lives somewhere else. Remember to include yourself.**

|_|_|

WEBSITE INSTRUCTION:
DISPLAY NUMBER FIELD AS TEXT ENTRY BOX. DO NOT ALLOW MORE THAN 2 DIGITS TO BE ENTERED. DO NOT ADVANCE WITHOUT A RESPONSE.

BOX 2
CHECK ITEM SCQ.735: CREATE HH ROSTER WITH NUMBER OF PEOPLE INDICATED IN SCQ.090.

SCQ.130 **List the first name, middle name, last name and suffix of each person that lives at this address in the table below. Please do not include anyone who lives somewhere else. Remember to include yourself.**

If you add a person by mistake, select 'Delete' to remove them. If you need to add other people, put their details in the last row and select 'Add.'

[First Names Last Name Suffix]

WEBSITE INSTRUCTION:

DISPLAY EACH NAME FIELD AS A TEXT ENTRY BOX. ALLOW BLANK ENTRIES, EXCEPT IN FIRST NAME FIELD. IF NOTHING IS ENTERED IN THE FIRST NAME FIELD, DISPLAY THE FOLLOWING HARD EDIT, "Please enter the first name for Person {#}." DO NOT ADVANCE WITHOUT A RESPONSE. ENSURE THAT EACH NAME (COMBINATION OF FIRST, MIDDLE INITIAL, LAST, SUFFIX) IS UNIQUE WITHIN THE HOUSEHOLD. IF A DUPLICATE NAME IS ENTERED, DISPLAY THE FOLLOWING HARD EDIT, "Names must be unique. Persons {#} and {#} have identical names recorded. Please correct the error to continue." DO NOT ADVANCE WITHOUT A RESPONSE.

SCQ.145 **These next questions ask about other possible residents that are sometimes missed.**

WEBSITE INSTRUCTIONS:

DISPLAY TEXT IN NORMAL STYLE.

SCQ.150 **Are there any babies or small children living at this address that you did not include?**

Yes 1
No..... 2

WEBSITE INSTRUCTIONS:

DISPLAY ANSWERS AS RADIO BUTTONS.

BOX 3
CHECK ITEM SCQ.150: IF SCQ.150 = 1, CONTINUE. OTHERWISE, GO TO SCQ.160.

SCQ.130.1 **Add any babies and small children living at this address to the table below.**

If you add a person by mistake, select 'Delete' to remove them. If you need to add other people, put their details in the last row and select 'Add.'

[First Name Middle Initial Last Name Suffix]

WEBSITE INSTRUCTION:

DISPLAY EACH NAME FIELD AS A TEXT ENTRY BOX. ALLOW BLANK ENTRIES, EXCEPT IN FIRST NAME FIELD. IF NOTHING IS ENTERED IN THE FIRST NAME FIELD, DISPLAY THE FOLLOWING HARD EDIT, "Please enter the first name for Person {#}." DO NOT ADVANCE WITHOUT A RESPONSE. ENSURE THAT EACH NAME (COMBINATION OF FIRST, MIDDLE INITIAL, LAST, SUFFIX) IS UNIQUE WITHIN THE HOUSEHOLD. IF A DUPLICATE NAME IS ENTERED, DISPLAY THE FOLLOWING HARD EDIT, "Names must be unique. Persons {#} and {#} have identical names recorded. Please correct the error to continue."

SCQ.160 **Are there any lodgers, boarders, or persons in your employ who live at this address that you did not include?**

Yes 1
No..... 2

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.

BOX 4

CHECK ITEM SCQ.160:
IF SCQ.160 = 1, CONTINUE.
OTHERWISE, GO TO SCQ.170.

SCQ.130.2 **Add any lodgers, boarders, or persons in your employ who live at this address to the table below.**

If you add a person by mistake, select 'Delete' to remove them. If you need to add other people, put their details in the last row and select 'Add.'

[First Name Middle Initial Last Name Suffix]

WEBSITE INSTRUCTION:
DISPLAY EACH NAME FIELD AS A TEXT ENTRY BOX. ALLOW BLANK ENTRIES, EXCEPT IN FIRST NAME FIELD. IF NOTHING IS ENTERED IN THE FIRST NAME FIELD, DISPLAY THE FOLLOWING HARD EDIT, "Please enter the first name for Person {#}." DO NOT ADVANCE WITHOUT A RESPONSE. ENSURE THAT EACH NAME (COMBINATION OF FIRST, MIDDLE INITIAL, LAST, SUFFIX) IS UNIQUE WITHIN THE HOUSEHOLD. IF A DUPLICATE NAME IS ENTERED, DISPLAY THE FOLLOWING HARD EDIT, "Names must be unique. Persons {#} and {#} have identical names recorded. Please correct the error to continue."

SCQ.170 **Is there anyone who usually lives at this address but is now away from home that you did not include?**

Yes 1
No 2

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.

BOX 5

CHECK ITEM SCQ.170:
IF SCQ.170 = 1, CONTINUE.
OTHERWISE, GO TO SCQ.180.

SCQ.130.3 **Add any people who usually live at this address but are now away from home to the table below.**

If you add a person by mistake, select 'Delete' to remove them. If you need to add other people, put their details in the last row and select 'Add.'

[First Name Middle Initial Last Name Suffix]

WEBSITE INSTRUCTION:

DISPLAY EACH NAME FIELD AS A TEXT ENTRY BOX. ALLOW BLANK ENTRIES, EXCEPT IN FIRST NAME FIELD. IF NOTHING IS ENTERED IN THE FIRST NAME FIELD, DISPLAY THE FOLLOWING HARD EDIT, "Please enter the first name for Person {#}." DO NOT ADVANCE WITHOUT A RESPONSE. ENSURE THAT EACH NAME (COMBINATION OF FIRST, MIDDLE INITIAL, LAST, SUFFIX) IS UNIQUE WITHIN THE HOUSEHOLD. IF A DUPLICATE NAME IS ENTERED, DISPLAY THE FOLLOWING HARD EDIT, "Names must be unique. Persons {#} and {#} have identical names recorded. Please correct the error to continue."

SCQ.180 **Is there anyone else living or staying at this address that you did not include?**

Yes 1
No 2

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.

BOX 6

CHECK ITEM SCQ.180:
IF SCQ.180 = 1, CONTINUE.
OTHERWISE, GO TO SCQ.193.

SCQ.130.4 **Add anyone else living or staying at this address to the table below.**

If you add a person by mistake, select 'Delete' to remove them. If you need to add other people, put their details in the last row and select 'Add.'

[First Name Middle Initial Last Name Suffix]

WEBSITE INSTRUCTION:
DISPLAY EACH NAME FIELD AS A TEXT ENTRY BOX. ALLOW BLANK ENTRIES, EXCEPT IN FIRST NAME FIELD. IF NOTHING IS ENTERED IN THE FIRST NAME FIELD, DISPLAY THE FOLLOWING HARD EDIT, "Please enter the first name for Person {#}." DO NOT ADVANCE WITHOUT A RESPONSE. ENSURE THAT EACH NAME (COMBINATION OF FIRST, MIDDLE INITIAL, LAST, SUFFIX) IS UNIQUE WITHIN THE HOUSEHOLD. IF A DUPLICATE NAME IS ENTERED, DISPLAY THE FOLLOWING HARD EDIT, "Names must be unique. Persons {#} and {#} have identical names recorded. Please correct the error to continue."

SCQ.193 **These next questions ask for other general information about your household. Please select 'Next' to continue.**

WEBSITE INSTRUCTIONS:
DISPLAY TEXT IN NORMAL STYLE.

SCQ.195 **Do any of the persons at this address have a home anywhere else?**

Students living away at school for a majority of the year are considered to have a home somewhere else.

Yes 1
No 2

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.

BOX 7

CHECK ITEM SCQ.785:
IF SCQ.195 = 1 (YES), ASK SCQ.210 FOR EACH PERSON IN THE HOUSEHOLD.
IF SCQ.195 = 2 (NO), GO TO SCQ.220.

SCQ.210 **We are now referring to {FIRST NAME LAST NAME}**

Does {PERSON} usually live at this address or somewhere else?

Students should select where they live for the majority of the calendar year.

This address 1
Somewhere else 2

WEBSITE INSTRUCTIONS:
DISPLAY ANSWER CHOICES AS RADIO BUTTONS.
DISPLAY "Does {FIRST NAME} {LAST NAME}" FOR THE PERSON REFERRED IN THE QUESTION.

BOX 8

CHECK ITEM SCQ.790:
ASK SCQ.210 FOR NEXT PERSON. IF NO NEXT PERSON, CONTINUE.

SCQ.220 **Are you or any of the persons in the household now on full-time active duty with the Armed Forces of the United States?**

Yes 1
No 2

WEBSITE INSTRUCTIONS:
DISPLAY ANSWER CHOICES AS RADIO BUTTONS.

BOX 9

CHECK ITEM SCQ.225:

IF SCQ.220 = 1 (YES), ASK SCQ.230-SCQ.240 FOR EACH PERSON IN THE HOUSEHOLD.

IF SCQ.220 = 2 (NO), GO TO SCQ.770.

SCQ.230 **We are now referring to {FIRST NAME LAST NAME}**

Is {PERSON} on full-time active duty with the Armed Forces of the United States?

Yes 1
No 2 (BOX 10)

WEB INSTRUCTIONS:

DISPLAY ANSWER CHOICES AS RADIO BUTTONS.

DISPLAY "Is {FIRST NAME} {LAST NAME}" FOR THE PERSON REFERRED IN THE QUESTION.

SCQ.240 **We are now referring to {FIRST NAME LAST NAME}**

Where does {PERSON} usually live and sleep; at this address or somewhere else?

At this address 1
Somewhere else 2

WEBSITE INSTRUCTIONS:

DISPLAY ANSWER CHOICES AS RADIO BUTTONS.

DISPLAY "does {FIRST NAME} {LAST NAME}" FOR THE PERSON REFERRED IN THE QUESTION.

BOX 10

CHECK ITEM SCQ.245:

ASK SCQ.230-240 FOR NEXT PERSON. IF NO NEXT PERSON, CONTINUE.

SCQ.770 **You have listed a total of {TOTAL # OF PERSONS ENUMERATED} {person/people} that usually live at this address.**

Please review the list below for accuracy.

{#} {FIRST NAME} {LAST NAME}

Is the list correct?

Yes 1 (SCQ.125)
No 2

WEBSITE INSTRUCTIONS:

DISPLAY {#} WITH THE SEQUENTIAL LOOP NUMBER FOR THE PERSON LISTED WHO LIVE IN THIS ADDRESS. DISPLAY {FIRST NAME}, and {LAST NAME} WITH CORRESPONDING PERSON #, FIRST NAME, AND LAST NAME.

DISPLAY "person" IF ONE PERSON ENUMERATED. DISPLAY "people" IF MORE THAN ONE PERSON ENUMERATED.

SCQ.130.5 **Add anyone else living or staying at this address to the table below.**

If you add a person by mistake, select 'Delete' to remove them. If you need to add other people, put their details in the last row and select 'Add.'

[First Name Middle Initial Last Name Suffix]

WEBSITE INSTRUCTION:

DISPLAY EACH NAME FIELD AS A TEXT ENTRY BOX. ALLOW BLANK ENTRIES, EXCEPT IN FIRST NAME FIELD. IF NOTHING IS ENTERED IN THE FIRST NAME FIELD, DISPLAY THE FOLLOWING HARD EDIT, "Please enter the first name for Person {#}." DO NOT ADVANCE WITHOUT A RESPONSE. ENSURE THAT EACH NAME (COMBINATION OF FIRST, MIDDLE INITIAL, LAST, SUFFIX) IS UNIQUE WITHIN THE HOUSEHOLD. IF A DUPLICATE NAME IS ENTERED, DISPLAY THE FOLLOWING HARD EDIT, "Names must be unique. Persons {#} and {#} have identical names recorded. Please correct the error to continue."

SCQ.125 **These next questions ask about the gender and age of the people you have listed. Please select 'Next' to continue.**

WEBSITE INSTRUCTIONS:

DISPLAY TEXT IN STANDARD FORMAT.

SCQ.131 **We are now referring to {FIRST NAME LAST NAME}**

{Are you/Is {PERSON}} male or female?

Male..... 1
Female 2

WEBSITE INSTRUCTIONS:

DISPLAY ANSWERS AS RADIO BUTTONS.

DISPLAY "Are you" IF ONLY ONE PERSON IN HOUSEHOLD. OTHERWISE, DISPLAY "Is {FIRST NAME} {LAST NAME}" FOR PERSON.

SCQ.740 **We are now referring to {FIRST NAME LAST NAME}, {GENDER}**

How old {are you/is {PERSON}}?

Enter '0' if less than 1 year old.

|_|_|_| year(s) old

WEBSITE INSTRUCTIONS:

DISPLAY "are you" IF ONLY ONE PERSON IN HOUSEHOLD. OTHERWISE, DISPLAY "is {FIRST NAME} {LAST NAME}, {GENDER}" FOR PERSON.

HARD EDIT: IF AGE IN YEARS >120 DISPLAY, "Age in years must be between 0-120. Click 'Go back' to enter a valid age."

BOX 11
CHECK ITEM SCQ.745:
IF SCQ.740 > 0, GO TO SCQ.255.
IF SCQ.740 IS BLANK, GO TO SCQ.310.
IF SCQ.740 = 0, CONTINUE.

SCQ.750 **We are now referring to {FIRST NAME LAST NAME}, {GENDER}**

How old is {PERSON} in months?

Enter '0' if less than 1 month old.

|_|_| month(s) old

WEBSITE INSTRUCTIONS:

DISPLAY "{FIRST NAME} {LAST NAME}, {GENDER}" FOR PERSON.

HARD EDIT: IF AGE IN MONTHS > 11 DISPLAY, "Age in months must be between 0-11."

BOX 12
CHECK ITEM SCQ.755:
IF SCQ.750 IS NOT BLANK, GO TO SCQ.255.
OTHERWISE, CONTINUE.

SCQ.310 **We are now referring to {FIRST NAME LAST NAME}, {GENDER}**

About how old {are you/is {PERSON}}?

- Less than 6 years, 1
- 6-11 years,..... 2
- 12-19 years,..... 3
- 20-39 years,..... 4
- 40-59 years,..... 5
- 60-79 years, or 6
- 80 years or older?..... 7

WEBSITE INSTRUCTIONS:

DISPLAY AGE RANGES AS RADIO BUTTONS.

DISPLAY "are you" IF ONLY ONE PERSON IN HOUSEHOLD. OTHERWISE, DISPLAY "is {FIRST NAME} {LAST NAME}, {GENDER}" FOR PERSON.

BOX 13

CHECK ITEM SCQ.310:
IF SCQ.310 = 3, CONTINUE.
OTHERWISE, GO TO SCQ.255.

SCQ.320 **We are now referring to {FIRST NAME LAST NAME}, {GENDER}**

{Are you/Is {PERSON}} 18 years or older?

YES, 18 YEARS OR OLDER..... 1
NO 2

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.
DISPLAY "are you" IF ONLY ONE PERSON IN HOUSEHOLD. OTHERWISE, DISPLAY "is {FIRST NAME}
{LAST NAME}" FOR PERSON.

SCQ.255 **These next questions ask about the race and ethnicity of the people you have listed. Please select 'Next' to continue.**

WEBSITE INSTRUCTIONS:
DISPLAY TEXT IN STANDARD FORMAT.

SCQ.260 **We are now referring to {FIRST NAME LAST NAME}, {GENDER}, {AGE/AGECAT} {years/months}**

{Do you/Does {PERSON}} consider {yourself/himself/herself/himself or herself} to be Hispanic, Latino, or of Spanish origin?

Yes 1
No 2

WEBSITE INSTRUCTIONS:
DISPLAY ANSWER CHOICES AS RADIO BUTTONS.
DISPLAY "Do you/yourself" IF ONLY ONE PERSON IN HOUSEHOLD. OTHERWISE, DISPLAY "Does {FIRST NAME} {LAST NAME}" FOR PERSON.
DISPLAY "himself" IF PERSON IS MALE AND "herself" IF PERSON IS FEMALE. IF NO GENDER SELECTED, DISPLAY 'himself or herself.'

SCQ.270 **We are now referring to {FIRST NAME LAST NAME}, {GENDER}, {AGE/AGECAT} {years/months}**

What race or races do you consider {yourself/{PERSON}} to be? Please select one or more.

American Indian or Alaska Native..... 1
Asian 2
Black or African American 3
Native Hawaiian or Pacific Islander 4

White 5
Other 6

WEBSITE INSTRUCTIONS:
DISPLAY ANSWER CHOICES AS CHECKBOXES.
DISPLAY "Do you/yourself" IF ONLY ONE PERSON IN HOUSEHOLD. OTHERWISE, DISPLAY "{FIRST NAME} {LAST NAME}" FOR PERSON.

BOX 14

CHECK ITEM SCQ.760:
LOOP THROUGH SCQ.130 – SCQ.270 FOR NEXT PERSON ON HH ROSTER. IF NO NEXT PERSON, CONTINUE.

SCQ.405 **Select the name of the person (or one of the persons) who is 18 years or older who owns or rents the home.**

{#} {FIRST NAME} {LAST NAME} / {GENDER}, {AGE/AGECAT} {years/months}

WEBSITE INSTRUCTIONS:
DISPLAY NAMES OF HH MEMBERS 18 YEARS OR OLDER IN DROPDOWN LIST.

SCQ.420 **Is {OWNER/RENTER}'s mailing address the same as his/her street address?**

YES 1 (SCQ.800)
NO 2

WEBSITE INSTRUCTIONS:
DISPLAY "{FIRST NAME} {LAST NAME}" FOR REFERENCE PERSON AS SELECTED IN SCQ.405.

SCQ.425 **Please update the address below to {OWNER/RENTER}'s complete mailing address.**

{#} {DIRECTION} {STREET NAME} {STREET/ROAD/AVENUE} {DIRECTION}
{UNIT/APT/BLDG} {CITY} {STATE} {ZIP}

WEBSITE INSTRUCTIONS:
DISPLAY "{FIRST NAME} {LAST NAME}" FOR REFERENCE PERSON AS SELECTED IN SCQ.405.
DISPLAY THE COMPLETE ADDRESS OF THE HOUSEHOLD AS COLLECTED IN SCQ.070A AND ALLOW UPDATES IN ALL FIELDS. IF UPDATES ARE MADE, STORE THIS ADDRESS AS THE MAILING

ADDRESS. IF NO UPDATES ARE MADE, RESET SCQ.420 TO "NO" AND CONTINUE TO RIQ.010.

HARD EDIT: IF "PO BOX" OR "P.O. BOX" IS ENTERED IN THE STREET #, OR STREET NAME FIELDS, DISPLAY "Do not enter P.O. Box information in this field. Delete P.O. Box from field and select "PO Box" from the Unit/Apt/Bldg drop down menu. Enter the P.O. Box number in the Unit # field." Click 'Go back' to correct address."

HARD EDIT: IF "PO BOX" IS SELECTED FROM THE UNIT/APT/BLDG DROP DOWN MENU AND TEXT IS ENTERED IN THE STREET #, OR STREET NAME FIELDS, OR AN ITEM IS SELECTED FROM DIR PRE, ST/RD/AVE OR DIR POST DROP DOWN MENUS, DISPLAY, "Do not include street address information when selecting PO box as the mailing address. Delete all street address information or remove P.O. Box information to continue. If the address is a box other than a P.O. box, select "Box" from the drop down menu." Click 'Go back' to correct address."

RIQ.010 **Select your name from the list of persons living at this address.**

{#} {FIRST NAME} {LAST NAME} / {GENDER}, {AGE/AGECAT} {years/months}}

WEBSITE INSTRUCTIONS:

DISPLAY IN RESPONSE DROP DOWN THE LIST OF HH MEMBERS 18 YEARS OR OLDER ON ROSTER WHO LIVE AT THE ADDRESS. DO NOT ADVANCE WITHOUT A RESPONSE.

SCQ.800 **What is the best telephone number to reach you in case we have any questions about your responses to this survey?**

This number will be used only if we need to contact you for the NHANES study. It will not be used or shared for any other purpose. Please enter the telephone number with the format 123-456-7890.

Telephone Number: (|_|_|_|) |_|_|_| - |_|_|_|_|

Extension: |_|_|_|_|

WEBSITE INSTRUCTIONS:

DISPLAY TELEPHONE FIELDS AS OPEN TEXT ENTRY. ONLY ACCEPT NUMBERS AND FULL 10 DIGIT PHONE NUMBERS. ALLOW BLANK ENTRIES. ONLY ACCEPT NUMBERS AND ALLOW BLANK ENTRIES IN EXTENSION FIELD AS WELL.

BOX 15

CHECK ITEM SCQ.805:
IF SCQ.800 BLANK, GO TO BOX18.
OTHERWISE, CONTINUE

SCQ.810 **Is this number a cell phone or landline?**

Cell phone 1
Landline 2 (SCQ.830)

WEBSITE INSTRUCTIONS:

DISPLAY ANSWERS AS RADIO BUTTONS.

SCQ.820 **May we send a text message to this number? We may need to follow up with you regarding your household's participation in this study.**

Yes 1
No 2

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.

SCQ.830 **Is there another number where you can be reached in case we have any questions about your responses to this survey?**

If there is no other number, leave blank and click 'Next.'

Telephone Number: (|_|_|_|) |_|_|_| - |_|_|_|_|

Extension: |_|_|_|_|

WEBSITE INSTRUCTIONS:
DISPLAY TELEPHONE FIELDS AS OPEN TEXT ENTRY. ONLY ACCEPT NUMBERS AND FULL 10 DIGIT PHONE NUMBERS. ALLOW BLANK ENTRIES. ONLY ACCEPT NUMBERS AND ALLOW BLANK ENTRIES IN EXTENSION FIELD AS WELL.

BOX 16

CHECK ITEM SCQ.835:
IF SCQ.830 BLANK, GO TO BOX 18.
OTHERWISE, CONTINUE

SCQ.840 **Is this number a cell phone or landline?**

Cell phone 1
Landline 2 (BOX 18)

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS..

SCQ.850 **May we send a text message about your participation in this study to this number as well?**

Yes 1
No 2

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.

BOX 17

CHECK ITEM SCQ.855:

IF THIS IS AN INELIGIBLE HOUSEHOLD, GO TO SCQ_END3.
OTHERWISE, CONTINUE.

BOX 18

CHECK ITEM SFQ.001:

IF ONLY 1 PERSON HOUSEHOLD, CODE PERSON AS "REFERENCE PERSON",
CODE RELATIONSHIP AS "SELF", ASSIGN FAMILY #1 TO PERSON AND GO TO
END OF SECTION.
OTHERWISE, CONTINUE.

BOX 19

CHECK ITEM SFQ.004:

CODE PERSON SELECTED IN SCQ.405 AS THE HOUSEHOLD "REFERENCE
PERSON", AND HEAD OF FAMILY #1 AND RELATIONSHIP AS "SELF". LIST THIS
PERSON AS THE FIRST LINE ON THE HOUSEHOLD MATRIX.

IF NO ONE WAS SELECTED IN SCQ.405, CODE FIRST PERSON LISTED ON HH
ROSTER WHOSE AGE IS ≥ 18 AND IS **NOT** FLAGGED AS LIVING "SOMEWHERE
ELSE" AS THE HOUSEHOLD "REFERENCE PERSON", AND HEAD OF FAMILY #1
AND RELATIONSHIP AS "SELF".

SFQ.001 **These next questions are about family relationships.**

WEBSITE INSTRUCTIONS:
DISPLAY TEXT IN STANDARD FORMAT.

BOX 20

LOOP 1:

ASK BOX 20A – SFQ.100 AS APPROPRIATE FOR EACH PERSON {PERSON}
LISTED BELOW REFERENCE PERSON ON THE HOUSEHOLD MATRIX.

BOX 20A

CHECK ITEM SFQ.005:

CHECK SEX OF {PERSON} FROM SCREENER. IF {PERSON} IS MALE, DISPLAY
SFQ.006. IF FEMALE, DISPLAY SFQ.007. IF GENDER WAS UNKNOWN, DISPLAY
SFQ.009.

SFQ.006 **We are now referring to {FIRST NAME LAST NAME}, {GENDER}, {AGE/AGECAT} {years/months}.**

How is {PERSON} related to {REFERENCE PERSON}?

- | <u>Related</u> | | <u>Not Related</u> | |
|---|--------------------------|--------------------------|--------------------------|
| Husband..... | <input type="radio"/> 01 | Housemate/roommate | <input type="radio"/> 12 |
| Partner | <input type="radio"/> 02 | Roomer/boarder..... | <input type="radio"/> 13 |
| Son (biological, son-in-law,
adoptive, foster, step) | <input type="radio"/> 03 | Other/non related..... | <input type="radio"/> 14 |
| Son of partner | <input type="radio"/> 04 | Legal guardian | <input type="radio"/> 15 |
| Grandson | <input type="radio"/> 05 | Ward | <input type="radio"/> 16 |
| Father | <input type="radio"/> 06 | | |
| Brother | <input type="radio"/> 07 | | |
| Grandfather..... | <input type="radio"/> 08 | | |
| Uncle..... | <input type="radio"/> 09 | | |
| Nephew..... | <input type="radio"/> 10 | | |
| Other relative | <input type="radio"/> 11 | | |

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.
DISPLAY ({FIRST NAME} {LAST NAME}) FOR PERSON AND REFERENCE PERSON.

SFQ.007 **We are now referring to {FIRST NAME LAST NAME}, {GENDER}, {AGE/AGECAT} {years/months}.**

How is {PERSON} related to {REFERENCE PERSON}?

- | <u>Related</u> | | <u>Not Related</u> | |
|---|--------------------------|--------------------------|--------------------------|
| Wife..... | <input type="radio"/> 01 | Housemate/roommate | <input type="radio"/> 12 |
| Partner | <input type="radio"/> 02 | Roomer/boarder..... | <input type="radio"/> 13 |
| Daughter (biological,
daughter-in-law, adoptive,
foster, step)..... | <input type="radio"/> 03 | Other/non related..... | <input type="radio"/> 14 |
| Daughter of partner..... | <input type="radio"/> 04 | Legal guardian | <input type="radio"/> 15 |
| Granddaughter..... | <input type="radio"/> 05 | Ward | <input type="radio"/> 16 |
| Mother..... | <input type="radio"/> 06 | | |
| Sister..... | <input type="radio"/> 07 | | |
| Grandmother..... | <input type="radio"/> 08 | | |
| Aunt | <input type="radio"/> 09 | | |
| Niece..... | <input type="radio"/> 10 | | |
| Other relative | <input type="radio"/> 11 | | |

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.
DISPLAY ({FIRST NAME} {LAST NAME}) FOR PERSON AND REFERENCE PERSON.

SFQ.009 We are now referring to {FIRST NAME LAST NAME}, {GENDER}, {AGE/AGECAT} {years/months}.

How is {PERSON} related to {REFERENCE PERSON}?

- | <u>RELATED</u> | <u>NOT RELATED</u> |
|---|--|
| SPOUSE (HUSBAND/WIFE)..... <input type="radio"/> 01 | HOUSEMATE/ROOMMATE..... <input type="radio"/> 12 |
| PARTNER..... <input type="radio"/> 02 | ROOMER/BOARDER..... <input type="radio"/> 13 |
| CHILD (BIOLOGICAL, IN-LAW, ADOPTIVE,
FOSTER, STEP)..... <input type="radio"/> 03 | OTHER/NON RELATED..... <input type="radio"/> 14 |
| CHILD OF PARTNER..... <input type="radio"/> 04 | LEGAL GUARDIAN..... <input type="radio"/> 15 |
| GRANDCHILD..... <input type="radio"/> 05 | WARD..... <input type="radio"/> 16 |
| PARENT..... <input type="radio"/> 06 | REFUSED..... <input type="radio"/> 77 |
| SIBLING (BROTHER/SISTER)..... <input type="radio"/> 07 | DON'T KNOW..... <input type="radio"/> 99 |
| GRANDPARENT (GRANDFATHER/
GRANDMOTHER)..... <input type="radio"/> 08 | |
| UNCLE/AUNT..... <input type="radio"/> 09 | |
| NEPHEW/NIECE..... <input type="radio"/> 10 | |
| OTHER RELATIVE..... <input type="radio"/> 11 | |

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.
DISPLAY ({FIRST NAME} {LAST NAME}) FOR PERSON AND REFERENCE PERSON.

BOX 21

CHECK ITEM SFQ.017:
IF {P} RELATIONSHIP IN SFQ.006, SFQ.007, OR SCQ.009 = SON, DAUGHTER, OR CHILD (CODE 3), CONTINUE.
OTHERWISE, SKIP TO BOX 22.

SFQ.020 We are now referring to {FIRST NAME LAST NAME}, {GENDER}, {AGE/AGECAT} {years/months}

Is {PERSON}, {REFERENCE PERSON'S}...

- biological (natural) {son/
daughter/child},..... 1
- adoptive {son/daughter/child}, 3
- step {son/daughter/child}, 4
- foster {son/daughter/child}, or..... 5
- {son/daughter/child}-in-law? 6

WEBSITE INSTRUCTIONS:
DISPLAY ANSWERS AS RADIO BUTTONS.
DISPLAY ({FIRST NAME} {LAST NAME}) FOR PERSON AND REFERENCE PERSON.
DISPLAY "son" IF GENDER = MALE, "daughter" IF GENDER = FEMALE, AND "child" IF GENDER WAS UNKNOWN.

BOX 22

CHECK ITEM SFQ.025:

IF {P} RELATIONSHIP IN SFQ.006, SFQ.007, OR SFQ.009 = FATHER, MOTHER,
OR PARENT (CODE 6), CONTINUE.
OTHERWISE, GO TO BOX 23.

SFQ.030 **We are now referring to {FIRST NAME LAST NAME}, {GENDER}, {AGE/AGECAT} {years/months}**

Is {PERSON}, {REFERENCE PERSON'S}...

- biological (natural) parent, 1
- adoptive parent, 3
- step parent, 4
- foster parent, or 5
- {mother/father/parent}-in-law? 6

WEBSITE INSTRUCTIONS:

DISPLAY ANSWERS AS RADIO BUTTONS.

DISPLAY "{FIRST NAME} {LAST NAME}" FOR PERSON AND REFERENCE PERSON.

DISPLAY "father" IF GENDER = MALE, "mother" IF GENDER = FEMALE, AND "parent" IF GENDER WAS UNKNOWN.

BOX 23

CHECK ITEM SFQ.035:

IF {P} RELATIONSHIP IN SFQ. 006, SFQ.007, OR SFQ.009 = BROTHER, SISTER,
OR SIBLING (BROTHER/SISTER) (CODE 7), CONTINUE.
OTHERWISE, GO TO BOX 24.

SFQ.100 **We are now referring to {FIRST NAME LAST NAME}, {GENDER}, {AGE/AGECAT} {years/months}**

Is {PERSON}, {REFERENCE PERSON'S}...

- full {brother/sister/sibling (brother/sister)} 1
- half {brother/sister/sibling (brother/sister)}, 2
- adopted {brother/sister/sibling (brother/sister)}, 3
- step {brother/sister/sibling (brother/sister)}, ... 4
- foster {brother/sister/sibling (brother/sister)}, or 5
- {brother/sister/sibling (brother/sister)-in-law? 6

WEBSITE INSTRUCTIONS:

DISPLAY ANSWERS AS RADIO BUTTONS.

DISPLAY "{FIRST NAME} {LAST NAME}" FOR PERSON AND REFERENCE PERSON.

DISPLAY "brother" IF GENDER = MALE, "sister" IF GENDER = FEMALE, AND "sibling (brother/sister)" IF GENDER = UNKNOWN.

BOX 24

END LOOP 1:

ASK BOX 20A – SFQ.100 AS APPROPRIATE FOR NEXT PERSON {PERSON} LISTED BELOW REFERENCE PERSON ON THE HOUSEHOLD MATRIX. IF NO NEXT PERSON, GO TO BOX 25.

BOX 25

CHECK ITEM SFQ.105:

- IF REFERENCE PERSON IS MARRIED (CODED AS 01 IN SFQ.006, SFQ.007, OR SFQ.009) OR LIVING WITH A PARTNER (CODED AS 02 (UNMARRIED PARTNER) IN SFQ.006 SFQ.007, OR SFQ.009).

AND

- REFERENCE PERSON HAS A CHILD OR THE **PARTNER** HAS A CHILD (CODED AS 03 OR 04 IN SFQ.006, SFQ.007, OR SFQ.009), CONTINUE.

OTHERWISE, GO TO SCQ_END3.

BOX 26

LOOP 2:

ASK SFQ.110 FOR EACH PERSON (CHILD OF REFERENCE PERSON – RELATIONSHIP CODE 3).

SFQ.110 **We are now referring to {FIRST NAME LAST NAME}, {GENDER}, {AGE/AGECAT} {years/months}**

I recorded that {REFERENCE PERSON} is the {father/mother/parent} of {NAME OF CHILD – THIS IS CHILD OF REFERENCE PERSON AND SPOUSE OR REFERENCE PERSON AND PARTNER} and is the {husband/wife/spouse/partner} of {SPOUSE OR PARTNER OF REFERENCE PERSON}. Is {NAME OF CHILD} the biological, adoptive, step, foster child, (son/daughter/child)-in-law or a non relative of {NAME OF SPOUSE OR PARTNER OF REFERENCE PERSON}?

- BIOLOGICAL CHILD 1
- ADOPTIVE CHILD..... 3
- STEP CHILD 4
- FOSTER CHILD 5
- (SON/DAUGHTER/CHILD)-IN-LAW..... 6
- NON RELATIVE 7
- REFUSED 77
- DON'T KNOW 99

CAPI INSTRUCTIONS:

IN QUESTION TEXT, DISPLAY "father" IF GENDER OF THE REFERENCE PERSON = MALE, "mother" IF GENDER OF THE REFERENCE PERSON = FEMALE, AND "parent" IF GENDER OF THE REFERENCE PERSON = DK/RF.

DISPLAY "husband" IF REFERENCE PERSON = MALE AND (SFQ.006, SFQ.007, OR SCQ.009) = 01;
DISPLAY "wife" IF REFERENCE PERSON = FEMALE AND (SFQ.006, SFQ.007, OR SCQ.009) = 01;
DISPLAY "spouse" IF REFERENCE PERSON = DK/RF AND (SFQ.006, SFQ.007, OR SCQ.009) = 01;
DISPLAY "partner" IF SFQ.006, SFQ.007, OR SCQ.009 = 02;

BOX 27

END LOOP 2:
ASK SFQ.110 FOR NEXT PERSON (CHILD).
IF NO NEXT PERSON, CONTINUE.

BOX 29A

LOOP 3:
IF PERSON'S AGE >= 14 AND SPOUSE OR UNMARRIED PARTNER HAS NOT BEEN IDENTIFIED, CONTINUE.
OTHERWISE, GO TO SCQ_END3.

SFQ.180 **We are now referring to {FIRST NAME LAST NAME}, {GENDER}, {AGE/AGECAT} {years/months}**

Is {PERSON'S NAME} now married, widowed, divorced, separated, never married or living with a partner?

- MARRIED 1
- WIDOWED 2 (BOX 30)
- DIVORCED..... 3 (BOX 30)
- SEPARATED..... 4 (BOX 30)
- NEVER MARRIED..... 5 (BOX 30)
- LIVING WITH PARTNER 6
- REFUSED 7 (BOX 30)
- DON'T KNOW 9 (BOX 30)

BOX 30

END LOOP 3:
ASK SFQ.180 FOR NEXT PERSON AGE >= 14 AND SPOUSE OR UNMARRIED PARTNER HAS NOT BEEN IDENTIFIED.
IF NO NEXT PERSON, CONTINUE.

SCQ_END3 Thank you for taking the time to answer these questions. By answering these questions, you are helping to protect the health of Americans.

Please click the 'Submit Form' button below.

SCQ_END4 **Your responses have been submitted.**

A health study representative will contact your household soon to tell you more about the study.

If you have questions or concerns, please contact us at [855-958-0631](tel:855-958-0631). For general questions about the survey, please visit www.cdc.gov/nhanes.