

Variable Name	MR Screen Name	Question Type	Question Text/Description	Code List	Routing
			INPATIENT UTILIZATION QUESTIONNAIRE SPECIFICATIONS <u>CRITERIA</u> INTTYPE=C001, C002, C004, C005, C006, C007, C008, C009, C010 SPALIVE=ALL SEASON=ALL SPPROXY=SP or PROXY Other: If INTTYPER in(C008), SP must have ongoing IP event. <u>PLACEMENT</u> If INTTYPER in(C008), administer after INQ. If INTTYPER in(C001, C002, C004, C005, C006, C007, C009, C010), administer after ERQ.		
	BOX IP1	routing	IF THE SP WAS STILL IN A HOSPITAL AT THE TIME OF THE PREVIOUS ROUND INTERVIEW, GO TO IPS1 - EVENDMM. ELSE IF SP IS IN THE EXIT SAMPLE AND ROUND IS NOT 71 AND PREVIOUS ROUND INTERVIEW WAS NOT SKIPPED, GO TO BOX IP6. ELSE GO TO BOX IP1AB.		
EVENDMM	IPS1	date	Last time [you/(SP)] had been admitted to (HOSPITAL NAME) on (ADMISSION DATE) and [were/was] still a patient there on (REFERENCE DATE). When [were you/was (SP)] discharged from (HOSPITAL NAME) for that stay?	(01) [Continuous answer.] (-7) Empty (-8) Don't Know (-9) Refused	IPS1 - EVENDDD
EVENDDD	IPS1	date	Last time [you/(SP)] had been admitted to (HOSPITAL NAME) on (ADMISSION DATE) and [were/was] still a patient there on (REFERENCE DATE). When [were you/was (SP)] discharged from (HOSPITAL NAME) for that stay?	(01) [Continuous answer.] (-7) Empty (-8) Don't Know (-9) Refused	IPS1 - EVENDYY
EVENDYY	IPS1	date	Last time [you/(SP)] had been admitted to (HOSPITAL NAME) on (ADMISSION DATE) and [were/was] still a patient there on (REFERENCE DATE). When [were you/was (SP)] discharged from (HOSPITAL NAME) for that stay?	(01) [Continuous answer.] (-7) Empty (-8) Don't Know (-9) Refused	IPS1 - STILLHOSP
STILLHOSP	IPS1	date		(01) SP IS STILL IN HOSPITAL (-7) Empty	BOX IP1A
	BOX IP1A	routing	IF SP WAS REPORTED AS STILL IN THE HOSPITAL AT IPS1, GO TO BOX IP6. ELSE GO TO IP7 - ANYOPERS.		
	BOX IP1AB	routing	IF THE SP HAD AT LEAST ONE EMERGENCY ROOM VISIT IN THE CURRENT ROUND THAT RESULTED IN THE SP BEING ADMITTED TO A HOSPITAL, GO TO BOX IP1AA. ELSE GO TO IP1 - IPPROBE.		
	BOX IP1AA	routing	CREATE EVENT FOR FIRST/NEXT ER VISIT ADDED WHERE SP WAS ADMITTED TO HOSPITAL GO TO IP1A - EVENDMM.		
EVENDMM	IP1A	date	You told me [you were/(SP) was] admitted to (HOSPITAL NAME) from the emergency room on (ADMISSION DATE). When [were you/was (SP)] discharged from (HOSPITAL NAME) for the stay that started on (ADMISSION DATE)?	(01) [Continuous answer.] (-7) Empty (-8) Don't Know (-9) Refused	IP1A - EVENDDD
EVENDDD	IP1A	date	You told me [you were/(SP) was] admitted to (HOSPITAL NAME) from the emergency room on (ADMISSION DATE). When [were you/was (SP)] discharged from (HOSPITAL NAME) for the stay that started on (ADMISSION DATE)?	(01) [Continuous answer.] (-7) Empty (-8) Don't Know (-9) Refused	IP1A - EVENDYY
EVENDYY	IP1A	date	You told me [you were/(SP) was] admitted to (HOSPITAL NAME) from the emergency room on (ADMISSION DATE). When [were you/was (SP)] discharged from (HOSPITAL NAME) for the stay that started on (ADMISSION DATE)?	(01) [Continuous answer.] (-7) Empty (-8) Don't Know (-9) Refused	IP1A - STILLHOSP
STILLHOSP	IP1A	date	You told me [you were/(SP) was] admitted to (HOSPITAL NAME) from the emergency room on (ADMISSION DATE). When [were you/was (SP)] discharged from (HOSPITAL NAME) for the stay that started on (ADMISSION DATE)?	(01) SP IS STILL IN HOSPITAL (-7) Empty	BOX IP1B
	BOX IP1B	routing	IF SP WAS REPORTED AS STILL IN THE HOSPITAL AT IP1A, GO TO BOX IP5. ELSE GO TO IP7 - ANYOPERS.		
IPPROBE	IP1	yes/no	[Since (REFERENCE DATE/UTILDATE)/Between (REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION/ENDUTILD)], [have you been/has (SP) been/was (SP)] [admitted to a hospital/admitted any other time to this or any other hospital] as an inpatient -- either for an overnight stay or for a "same day" procedure? IF HAD SAME DAY PROCEDURE AND IS NOT SURE IF ADMITTED OR NOT, TREAT AS OUTPATIENT EVENT AND ENTER WHEN YOU GET TO OP UTILIZATION. [ENTER A STAY AT A DRUG AND REHABILITATION CENTER AS AN IP EVENT, NOT AN IU EVENT.]	(01) YES (02) NO (03) INDICATED YES BY DATAPREP (-8) Don't Know (-9) Refused	(01) IP2 - PROVIDER_IP (02) BOX IP6 (03) DO NOT DISPLAY. DATA EDITING ONLY. (-8) BOX IP6 (-9) BOX IP6

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PROVIDER_IP	IP2	roster	Where [were you/was (SP)] admitted -- to which hospital? SELECT OR ADD ONLY ONE HOSPITAL. [PROBE TO OBTAIN THE COMPLETE AND FORMAL NAME OF THE HOSPITAL.]	[DISPLAY PROVIDER ROSTER AS RESPONSE OPTIONS: 1. [PROVIDER 1] 2. [PROVIDER 2] ... N. [PROVIDER N] N+1. ADD ANOTHER DISPLAY PROVIDER NAME, SPECIALITY, GROUP NAME FOR ALL PROVIDERS WHERE PROVNUM>02.	IF EXISTING PROVIDER SELECTED, GO TO BOX IP2. ELSE IF "ADD ANOTHER" SELECTED, GO TO IP2- PROVNAME
PROVNAME	IP2	verbatim	[PROVIDER LOOKUP CALLED FROM THIS SCREEN] ENTER THE NAME OF THE HOSPITAL BELOW YOU MUST ENTER A PROVIDER NAME IN THE 'NAME' FIELD. IF THE PROVIDER IS AN INDIVIDUAL BUT YOU DO NOT KNOW THE PROVIDER'S NAME, OR IF THE PROVIDER IS AN ORGANIZATION, ENTER THE GROUP OR PRACTICE NAME IN THE 'NAME' FIELD AND LEAVE THE 'GROUP' FIELD BLANK. NAME:		IP2-GROUPNAM
GROUPNAM	IP2	verbatim	GROUP:		BOX IP2
	BOX IP2	routing	IF (SP REPORTED RECEIVING HEALTH CARE SERVICES THROUGH V.A. IN THE CURRENT ROUND OR ANY PREVIOUS ROUND) AND (IF THIS PROVIDER IS ASSOCIATED WITH V.A. IS UNKNOWN), GO TO IP3 - VAPLACE. ELSE GO TO BOX IP2AA.		
VAPLACE	IP3	yes/no	Is (HOSPITAL NAME) a Department of Veterans Affairs, or V.A., facility?	(01) YES (02) NO (-8) Don't Know (-9) Refused	BOX IP2AA
	BOX IP2AA	routing	IF (SP COVERED BY A MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND) AND (IF THIS PROVIDER IS ASSOCIATED WITH A MANAGED CARE PLAN IS UNKNOWN), GO TO IP3A - HMOASSOC. ELSE IF (SP COVERED BY A MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND) AND (THIS PROVIDER IS NOT ASSOCIATED WITH A MANAGED CARE PLAN), GO TO IP3B - HMOREFER. ELSE GO TO IP4 - EVBEGMM.		
HMOASSOC	IP3A	yes/no	Is (HOSPITAL NAME) associated with [your/(SP's)] [READ MANAGED CARE PLAN NAME(S) BELOW] plan?	(01) YES (02) NO (-8) Don't Know (-9) Refused	(01) IP4 - EVBEGMM (02) IP3B - HMOREFER (-8) IP3B - HMOREFER (-9) IP3B - HMOREFER
HMOREFER	IP3B	yes/no	[Were you/Was (SP)] referred to (HOSPITAL NAME) by [READ MANAGED CARE PLAN NAME(S) BELOW]? [INCLUDE REFERRALS BY THE RESPONDENT'S PRIMARY CARE PHYSICIAN (PCP).]	(01) YES (02) NO (-8) Don't Know (-9) Refused	IP4 - EVBEGMM
EVBEGMM	IP4	date	When [were you/was (SP)] admitted to and discharged from (HOSPITAL NAME)? Admission Date:	MM:	IP4 - EVBEGDD
EVBEGDD	IP4	date	When [were you/was (SP)] admitted to and discharged from (HOSPITAL NAME)?	DD:	IP4 - EVBEGYY
EVBEGYY	IP4	date	When [were you/was (SP)] admitted to and discharged from (HOSPITAL NAME)?	YY:	IP4 - EVENDMM
EVENDMM	IP4	date	When [were you/was (SP)] admitted to and discharged from (HOSPITAL NAME)? Discharge Date:	MM:	IP4 - EVENDDD
EVENDDD	IP4	date	When [were you/was (SP)] admitted to and discharged from (HOSPITAL NAME)?	YY:	IP4 - EVENDYY
EVENDYY	IP4	date	When [were you/was (SP)] admitted to and discharged from (HOSPITAL NAME)?	(01) [Continuous answer.] (-7) Empty (-8) Don't Know (-9) Refused	IP4 - STILLHOSP
STILLHOSP	IP4	date	When [were you/was (SP)] admitted to and discharged from (HOSPITAL NAME)?	(01) SP IS STILL IN HOSPITAL (-7) Empty	BOX IP2A
	BOX IP2A	routing	IF INPATIENT ADMISSION AND DISCHARGE DATE OVERLAP AN EXISTING IP STAY, GO TO IP4_ERR - IPOVERLP. ELSE GO TO BOX IP3.		
IPOVERLP	IP4_ERR	code 1	INVALID DATE. THIS DATE OVERLAPS AN EXISTING IP STAY FROM (ADMISSION DATE) TO [(DISCHARGE DATE)/SP STILL IN HOSPITAL].	(01) CORRECT DATES (02) CONTINUE INTERVIEW	(01) IP4 - EVBEGMM (02) BOX IP3
IPADD	IP5		HAVE ALL DATES BEEN ENTERED? [DISPLAY ALL EVENTS ASSOCIATED WITH THIS PROVIDER]	(01) ADD ANOTHER (02) ALL DONE	(01) IP4-EVBEGMM (02) IP5-NAVIGATOR

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NAVIGATOR	IP5_IN	instance navigator	YOU HAVE ENTERED DATES FOR THE FOLLOWING EVENTS. SELECT AN EVENT TO DISCUSS WITH SP OR PRESS [PREVIOUS] TO GO BACK AND ADD MORE EVENTS. [DISPLAY ALL EVENTS ADDED AT IP4] [EVENT DATE, PROVIDER]	(01) EVENT1 (02) EVENT2 ... (N) EVENT N (N+1) CONTINUE INTERVIEW	(01-N) BOX IP3 (N+1) IP16-IPMORE
	BOX IP3	routing	IF SP WAS REPORTED AS STILL IN THE HOSPITAL AT IP4, GO TO BOX IP5. ELSE GO TO IP7 - ANYOPERS		
ANYOPERS	IP7	yes/no	Were any operations performed on [you/(SP)] during the hospital stay that was (ADMISSION DATE) to (DISCHARGE DATE)? [Operations include surgery and other surgical procedures like setting bones, stitching or removing growths, or any cutting of the skin.]	(01) YES (02) NO (-8) Don't Know (-9) Refused	(01) BOX IP4A (02) IP10 - SPECCOND (-8) IP10 - SPECCOND (-9) IP10 - SPECCOND
SPECCOND	IP10	yes/no	[Was this visit/Were any of these visits] to the outpatient department for any specific condition?	(01) YES (02) NO (-8) Don't Know (-9) Refused	BOX IP4A
	BOX IP4A	routing	IF CURRENTLY ADMINISTERING ST, GO TO BOX ST23B. ELSE IF CURRENTLY ADMINISTERING NS, GO TO BOX NS23B. ELSE IF SP IS IN THE EXIT SAMPLE AND ROUND IS NOT 71 AND PREVIOUS ROUND INTERVIEW NOT SKIPPED, GO TO BOX IP6. ELSE GO TO IP13 - PRESMDCN.		
PRESMDCN	IP13	yes/no	At the time [you were /(SP) was] discharged, were any medicines prescribed for [you/(SP)]?	(01) YES (02) NO (-8) Don't Know (-9) Refused	(01) IP14 - PRESFILL (02) BOX IP5 (-8) BOX IP5 (-9) BOX IP5
PRESFILL	IP14	yes/no	Were any of the prescriptions filled? [COUNT A MEDICINE AS "FILLED" REGARDLESS OF WHO OBTAINED IT FOR THE RESPONDENT, WHEN IT WAS OBTAINED, WHETHER OR NOT THE PRESCRIPTION COST ANYTHING, AND WHETHER OR NOT THE RESPONDENT ACTUALLY TOOK THE MEDICINE.]	(01) YES (02) NO (-8) Don't Know (-9) Refused	(01) BOX IP4B (02) NAVIGATOR (-8) BOX IP5 (-9) BOX IP5
	BOX IP4B	routing	IF THE PROBE FOR PRESCRIPTION MEDICINE BOTTLES HAS NOT BEEN ASKED IN THE CURRENT ROUND, GO TO IP14A - IPPMMEDS. ELSE GO TO IP15 - MEDICINE_IP.		
IPPMMEDS	IP14A	no entry	It would be helpful if I could look at any medicine bottle(s), container(s), or bag(s) that you have so that I can spell the medicine name correctly and enter the strength of the medicine. [Also, please take out [your/(SP's)] (MEDICARE PRESCRIPTION DRUG PLAN NAME) medicine statements, which should have that same information on them.] [IF RESPONDENT HAS BOTTLE, ASK:] I'll need that same information for all of the medicines [you/(SP)] obtained since the last interview, if you'd like to get those bottles, too.		IP15 - MEDICINE_IP
MEDICINE_IP	IP15	roster	Please tell me the names of these medicines. ENTER ALL MEDICINES. CHECK STATEMENT OR MEDICINE BOTTLE FOR SPELLING. [DISPLAY ROSTER WITH ALL MEDICINES FROM PRIOR ROUNDS (WHERE EVENT.EVNTTYPE='PM' AND EVNTDFLG^=1)] DISPLAY MEDICINE NAME (EVENT.PMEDNAME) AND STRENGTH (EVENT.PRMSTRUNI)	[DISPLAY MEDICINE ROSTER AS RESPONSE OPTIONS: 1. [MEDICINE 1] 2. [MEDICINE 2] ... N. [MEDICINE N] N+1. ADD ANOTHER [DISPLAY MEDICINE NAME AND STRENGTH FOR EACH. IF NO EXISTING MEDICINES DISPLAY "NO MEDICINES LISTED"]	IF ADD ANOTHER WAS SELECTED, ROUTE TO PM15-MED. IF ONLY PRELOADED MEDICINES SELECTED, ROUTE TO PM15B-ADDP.
MED	IP15	verbatim	[AT TOP OF SCREEN DISPLAY LINK TO PRESCRIBED MEDICINE LOOKUP WITH LABEL "Search Medicine"] Please tell me the names of these medicines. ENTER ALL MEDICINES. CHECK STATEMENT OR MEDICINE BOTTLE FOR SPELLING. [DISPLAY ROSTER WITH ALL MEDICINES FROM PRIOR ROUNDS (WHERE EVENT.EVNTTYPE='PM' AND EVNTDFLG^=1)] DISPLAY MEDICINE NAME (EVENT.PMEDNAME) AND STRENGTH (EVENT.PRMSTRUNI)		IP15-PMEDNAME
PMEDNAME	IP15	verbatim	NAME:		IP15-PMSTRUNI
PMSTRUNI	IP15	verbatim	STRENGTH:		IP15B-ADDP
MEDID	IP15	numeric	[THIS VARIABLE STORES THE UNIQUE IDENTIFIER FOR PRESCRIBED MEDICINES ADDED THROUGH THE LOOKUP. IT IS HIDDEN ON SCREEN.]		
ADDP	IP15B	roster	MEDICATIONS FILLED DURING THIS VISIT [DISPLAY ALL MEDICINES ADDED AT MED]	(01) ADD ANOTHER (02) ALL DONE	(01) IP15-MED (02) BOX IP5

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	BOX IP5	routing	IF ASKING ABOUT ONGOING IP STAY FROM THE PREVIOUS ROUND, GO TO BOX IP1AB. ELSE IF ASKING ABOUT AN EMERGENCY ROOM VISIT IN THE CURRENT ROUND THAT RESULTED IN AN IP STAY, THEN IF SP HAS ANOTHER EMERGENCY ROOM VISIT IN THE CURRENT ROUND THAT RESULTED IN AN IP STAY THAT HAS NOT BEEN ASKED ABOUT, GO TO BOX IP1AA. ELSE GO TO IP1 - IPPROBE. ELSE GO TO IP16 - IPMORE.		
IPMORE	IP16	yes/no	IF RESPONDENT HAS ALREADY MENTIONED ANOTHER INPATIENT STAY, ENTER "YES" WITHOUT ASKING. OTHERWISE, ASK: [Since (REFERENCE DATE/UTILDATE)/Between (REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION/ENDUTILD)], [have you had/has (SP) had/did (SP) have] any other admissions to this or any other hospital as an inpatient -- either for an overnight stay or for a "same day" procedure? IF HAD SAME DAY PROCEDURE AND IS NOT SURE IF ADMITTED OR NOT, TREAT AS OUTPATIENT EVENT AND ENTER WHEN YOU GET TO OP UTILIZATION. [ENTER A STAY AT A DRUG AND REHABILITATION CENTER AS AN IP EVENT, NOT AN IU EVENT.]	(01) YES (02) NO (-8) Don't Know (-9) Refused	(01) IP2 - PROVIDER_IP (02) BOX IP6 (-8) BOX IP6 (-9) BOX IP6
	BOX IP6	routing	IF INTTYPE in(C001, C002, C004, C005, C006, C007, C009), GO TO OPQ. IF INTTYPE in(C008), GO TO MBQ.		