

# The Arizona Border Study

*An Extension of the  
Arizona National Human Exposure Assessment Survey (NHEXAS) Study  
Sponsored by the Environmental Health Workgroup of the Border XXI Program*

## Quality Systems and Implementation Plan for Human Exposure Assessment

The University of Arizona  
Tucson, Arizona 85721

Cooperative Agreement CR 824719

**Standard Operating Procedure**

**SOP-UA-D-20.0**

**Title:** Cleaning: Time Diary and Activity Questionnaire

**Source:** The University of Arizona

U.S. Environmental Protection Agency  
Office of Research and Development  
Human Exposure & Atmospheric Sciences Division  
Exposure & Dose Research Branch

**Notice:** The U.S. Environmental Protection Agency (EPA), through its Office of Research and Development (ORD), partially funded and collaborated in the research described here. This protocol is part of the Quality Systems Implementation Plan (QSIP) that was reviewed by the EPA and approved for use in this demonstration/scoping study. Mention of trade names or commercial products does not constitute endorsement or recommendation by EPA for use.

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Full SOP  Working SOP #pages

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On Site Principal Investigator:  
*Walter J. Kuehne*

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## Cleaning: Time Diary and Activity Questionnaire

### 1.0 Purpose and Applicability

The purpose of this procedure is to define the particular steps involved in cleaning the electronic data generated from data entry of the Time Diary and Activity Questionnaire. It applies to electronic data corresponding to the Time Diary and Activity Questionnaire that was scanned and verified by the Data Staff for NHEXAS Arizona, the Border Study, or other Health and the Environment projects.

### 2.0 Definitions

- 2.1 BORDER STUDY: An alias for "Total Human Exposure Arizona: A Comparison of the Border Communities and the State" conducted in Arizona by the University of Arizona/Battelle/Illinois Institute of Technology consortium.
- 2.2 DATA CLEANING: The process of locating and correcting data processing and field technician errors. They can be individual level errors in the electronic and physical data, or they can be system level errors in the data collection, packaging, coding, entry, and cleaning procedures themselves. This process is also referred to as "data validation."
- 2.3 DATA, ELECTRONIC: Data stored on some type of magnetic or optical medium (for example: floppy disk, hard disk).
- 2.4 DATA, ENTERED: Electronic data scanned into a data file using Teleform scanning software. Entered data are the product of "data entry."
- 2.5 DATA, VERIFIED: Electronic data that has cleared through the Teleform Verification process. In the Verification process Teleform reviews all of the entered data and displays any possible errors. These potential errors are reviewed by a Data Technician. Once all of the errors are fixed the data is saved to an ASCII file.
- 2.6 DATA CLEANING BATCH: A collection of electronic data, along with their corresponding physical forms. Data cleaning batches are formed after one or more data processing batches (see DATA PROCESSING BATCH below) are scanned. The data cleaning batches are then cleaned (see DATA CLEANING) and appended to the master database (as described in UA-D-44.X). Each data cleaning batch is assigned a numeric descriptor of the form MMDDYY, where MM is the month the batch was created, DD is the day the batch was created, and YY is the year the batch was created. If more than one batch is created on the same day, each batch after the first is assigned a descriptor of the form MMDDYY\_N, where N denotes the batch as being the Nth batch created that day.
- 2.7 HEALTH AND ENVIRONMENT PROJECTS (or H&E): An umbrella title for all

projects funded to M.D. Lebowitz and/or M.K. O'Rourke (or their designees) which examine purported or real relationships among environmental factors and any aspect of human health.

- 2.8 HRP SITE: The **Health Related Professions** building, located at 1435 North Fremont Avenue; Tucson, AZ 85719. This is an annex of the Arizona Prevention Center and the primary site of NHEXAS Arizona, the Border Study, or other Health and the Environment projects.
- 2.9 MASS DATA MASSAGE PROCESS (or MDM) = The data processing program used by NHEXAS Arizona, the Border Study, and other Health and Environment projects.
- 2.10 NHEXAS Arizona: Acronym for National Human EXposure Assessment Survey, a research project conducted in Arizona by the University of Arizona/Battelle/Illinois Institute of Technology consortium.

### **3.0 References**

SOP UA-D-44.X (Operation Manual of the Mass Data Massage Program) (This Volume)

### **4.0 Discussion**

A copy of the Time Diary and Activity Questionnaire is given in Appendix A. This copy has each variable labeled for easy reference. Questionnaires and Forms are reviewed for completeness and accuracy prior to being transferred to the data section of the project. These checks are designed to generate flawless forms and questionnaires prior to data entry. Once entered and verified the data is subject to logic checks through the application of Dictionaries and other projects. A copy of the Dictionary for the Time Diary and Activity Questionnaire is given in Appendix B. This dictionary defines the file structure for the Time Diary and Activity database, as well as the logic and range checks that are performed on each field. For further reference, see SOP# UA-D-4.X.

Sometimes despite all best efforts, errors are found in data. These errors must be corrected to produce a valid database. At this time, all anticipated problems have been addressed. "Cleaning" protocols are developed concurrently with data entry to address the unanticipated problems. Specific corrections will be documented as outlined in SOP # UA-D-38.X.

### **5.0 Responsibilities**

The Project Data Coordinator is responsible for writing the data cleaning instructions for the Time Diary and Activity Questionnaire when data problems are found during the data entry process.

## 6.0 Materials and Reagents

- 6.1 Local Area Network
- 6.2 Purple Pen
- 6.3 Copy of Data Dictionary for specific form.

## 7.0 Procedure

### 7.1 Steps Followed

#### I. Data Technicians

##### A. Entering data

- 1. Scan and verify the form as described in UA-D-34.X.

##### B. Cleaning Data

- 1. Log into UNIX environment.
- 2. Type "data" to run the Data Cleaning program.
- 3. Select form type:
  - a. The user will enter "3" for Questionnaires.
  - b. The MDM will then prompt the user for a specific questionnaire. The user will then enter "3" for Time Diary and Activity Qx.
- 4. The *MDM* shall prompt the user for an action. The user then selects an operation from a given list. Operations include:
  - a. Create a new batch
  - b. Clean existing batch
  - c. QA an existing batch
  - d. [Examine Descriptive Master Database]
- 5. The user will select the Clean existing batch option:
  - a. The *MDM* will list all possible batches to clean.
  - b. If there are no batches, the program will inform the user, and prompt the user to press the <enter> key, which will return the user to the previous menu.
  - c. If there are batches to be cleaned, the user will be prompted for a specific batch.
  - d. Once a batch is selected, it is preprocessed (checking for errors) for cleaning, and the user is given information regarding the status of the preprocessing.
  - e. If no errors are found within in the data, the *MDM* will send mail to the

- Data Coordinator informing him of the newly cleaned batch.
- f. If errors are found in the data, the user is informed as to the number of errors found within the batch.
  - i. For each error found in the batch, the user will be shown the key variables to locate the record containing the error, which is displayed between dashed lines.
  - ii. The user is then prompted for an action, the action being either the changing the erroneous value, the skipping of the error, a manual change to a different variable in the current record, a manual change to any variable in any record, or the user may quit.
- g. If the user wishes to change the erroneous value:
  - i. Then "C" must be entered.
  - ii. The variable name is then displayed, and the *MDM* prompts for a new value.
  - iii. Once a new value is given, the user is given the option to accept the value given, to accept a value formatted by the *MDM*, or to abort the operation.
  - iv. If the operation is not aborted, the user is prompted for a reason for the change. Once a reason is given, the update is completed.
- h. If the user wishes to skip the error:
  - i. He/she must enter "S".
  - ii. This will cause the *MDM* to skip the current error, but not the current record.
- i. If the user wishes to change the value of a different variable in the current record:
  - i. He/she must enter "M".
  - ii. The user will then be prompted for the number of changes to be made.
  - iii. Once this number is entered, the *MDM* will then prompt for the variable to be changed.
  - iv. Once a valid variable is specified, the user is prompted for the new value.
  - v. Once a new value is given, the user is given the following options:
    - aa. Accept the value given
    - bb. Accept a value formatted by the *MDM*
    - cc. Abort the operation.

- vi. If the operation is not aborted, the user is prompted for a reason for the change. Once a reason is given, the update is completed.
- j. If the user wishes to change the value of a variable in a different record:
  - i. He/she must enter "R".
  - ii. The user will then be prompted for the number of changes to be made.
  - iii. Once this number is entered, the *MDM* will then prompt for the key variable values of the record to be modified.
  - iv. Once valid values are given, the *MDM* prompts the user for the variable to be changed.
  - v. Once a valid variable is specified, the user is prompted for the new value.
  - vi. Once a new value is given, the user is given the following options:
    - aa. Accept the value given
    - bb. Accept a value formatted by the *MDM*,
    - cc. Abort the operation.
  - vii. If the operation is not aborted, the user is prompted for a reason for the change.
  - viii. Once a reason is given, the update is completed.
- k. If the user wishes to quit, he/she must hit the "Q" key. The user is then returned to the menu defined in I.B.4.

## 7.2 Steps which are unique to the Time Diary and Activity Questionnaire.

- 7.2.1 The QXV variable for all Spanish questionnaires is changed by Teleform during the verification process. Thus the QXV value in the database will differ from what is on the form. For all Spanish Time and Activity Questionnaires QXV= QTAS1.
- 7.2.2 The Date of Completion on page one is the date that the Questionnaires were collected.
- 7.2.3 If the questionnaires are picked up before noon, the day of the pick up and all following days are non-applicable. This is indicated by filling in the "Time\_Na" variable.
- 7.2.4 If an entire day is missing, the "Time\_Mis" bubble is filled in and the rest of the variables are left blank. All of the variables will be changed to missing in a global change performed at the master database level.
- 7.2.5 If an entire day is refused, the "Time\_Ref" bubble is filled in and the rest of the variables are left blank. All of the variables will be changed to refused in a global change performed at the master database level.

7.2.6 If an entire questionnaire is refused, the "Time\_Ref" bubble on each page must be filled.

## 8.0 Records

- 8.1 All records are automatically generated by the *data* processing program.
- 8.2 Records of all the forms in a cleaning batch are printed out when the batch is created. This list is then attached to the cleaning batch.
- 8.3 Records of the changes made to the data are located in the following directories tarred with their associated batch: /rsc53/NHEXAZdata/master/qx/tad/hdr/data and /rsc53/NHEXAZdata/master/qx/tad/days/data.
- 8.4 Records of the cleaning batches which have been appended to the master data base are located in the following directories: /rsc53/NHEXAZdata/master/qx/tad/hdr and /rsc53/NHEXAZdata/master/qx/tad/days. The list is kept in the file "read.me".
- 8.5 All changes to the hard copy of the form must be dated and completed in purple or red ink.

### Inclusions:

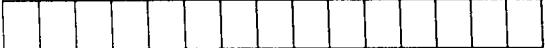
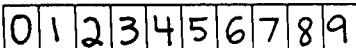
- Appendix A: Time Diary and Activity Questionnaire (19 pages)  
Appendix B: Time Diary and Activity Dictionary (34 pages)

## Appendix A: Time Diary and Activity Questionnaire

HHID	HHIDP	F.S.	IRN#
HHIDFS      IRN			

## ADULT TIME DIARY and ACTIVITY QUESTIONNAIRE

National Human Exposure Assessment Survey

FIRST Name (ONLY):	Fname 	Date of Completion: Evnt date  MO / DAY / YR
<b>INSTRUCTIONS</b>		
<ul style="list-style-type: none"> <li>• Please use the <b>black, felt tip pen</b> provided in the notebook when you complete this questionnaire.</li> <li>• Please follow the special guidelines typed in <b><i>bold italics</i></b>. They tell you to either <b>Continue</b> to the question below, or to <b>GO TO</b> a given question.</li> <li>• Please answer questions printed on a <b>white background</b> only. <b>Shaded areas</b> are for office use only.</li> <li>• <b>Multiple Choice Questions:</b> Please fill in the appropriate bubble(s) (<input type="radio"/>) that appear to the left of each response.            For example: How old is the puppy? <b>Fill in ONE bubble.</b> <input checked="" type="radio"/> 1 week      <input type="radio"/> 2 weeks      <input type="radio"/> 3 weeks         </li> </ul>		
<b>Please shade bubbles like this:</b>  and <b>not</b> like this:  		
<ul style="list-style-type: none"> <li>• <b>Open Ended Questions:</b> Please write your answer on the line(s) or in the box(es) provided. Please write your numbers in the boxes using a block style without touching the sides of the boxes.            For example:   week(s)</li> <li>• <b>If You Make a Mistake:</b> For multiple choice, cross out the incorrect answer(s). For open-ended questions, cross out the incorrect value(s) and write the correct value(s) above or beside the boxes.            For example: How old is the puppy? <b>Fill in ONE bubble.</b>  1 week      <input type="radio"/> 2 weeks      <input type="radio"/> 3 weeks    week(s)         </li> <li>• If you wish to not answer a question, then please draw a line through it, <i>but not through the answer space</i>.            For example: How old is the puppy?  week(s)         </li> </ul>		
<b>All data gathered in this questionnaire is kept strictly confidential. Thank you for your time and support!</b>		
<p>Public reporting burden for this collection of information is estimated to average 50 minutes per response, and to require 0 hours of recordkeeping. This includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Chief, Information Policy Branch, 2136, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington D.C. 20503. OMB Clearance #: 2080-0053   Expires: 07/31/98</p>		

Data Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			

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**Study Participants: Please begin on page 3 (next page).**

PAGE 2  
 Adult Time  
 Diary

### DESIGNATED PARTICIPANT

If the participant is LESS THAN 10 YEARS OLD, what is the first name of the individual who is providing the answers for the designated respondent?

G fname

FIRST Name (ONLY):

IRN #:  G - IRN

What is the relationship of this individual to the person for whom the responses are provided?  
 Fill in ONE bubble.

- 1. Self
- 2. Guardian G-relat
- 3. Other (Specify: \_\_\_\_\_)

- QC
- X's.R
- Y's.N
- Z's.M

- QC
- 5.R
- 8.N
- 9.M

- 55.R  Relat. Code
- 88.N
- 99.M

G-relato

Comments:

Chain of Custody initiated \_\_\_\_\_ Consigned to packet on [ ]: \_\_\_ / \_\_\_ / \_\_\_ Box UA-G-4-2.0

Itemnum		Study OFFICE USE ONLY			
Form Type:	04	Study	Stage	Collapsed?	Admin Method:
NHEXAS Form ID: UA-T-1.06.0		1. NHEXAS 2. Border 3. _____ 4. _____ 5. _____	Stage #:	Y N 8 ○ ○ ○	Admin by: _____ Tech. ID: <input type="text"/>
Form Status:	1.Cmp 2.N Cmp 3.P Cmp 4.Ro-ool 5.Ref 7.Dest 8.N/A 9.Miss	QC: QCBY <input type="text"/> QA: QA BY <input type="text"/> Init.	Tech. ID: <input type="text"/> QC DATE: <input type="text"/> / <input type="text"/> / <input type="text"/> QA DATE: <input type="text"/> / <input type="text"/> / <input type="text"/>	MO: <input type="text"/> DAY: <input type="text"/> YR: <input type="text"/>	DEBY Tech. ID: <input type="text"/> DE DATE: <input type="text"/> / <input type="text"/> / <input type="text"/> Init.
			DP Batch: DP BATCH	MO: <input type="text"/> DAY: <input type="text"/> YR: <input type="text"/>	QXV: Q T A A 1 QXV: <input type="text"/>

Data Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			

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HHID:      FS:      IRN:  

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PAGE 3  
Adult Time  
Diary

## TIME DIARY INSTRUCTIONS

At the end of each day, please take a few minutes to record the time you spent in each of the seven listed locations. There is one "time diary box" and set of questions for each day of the study. The numbers in the box stand for hours of the day. For example, 5 in the morning is 5:00 a.m. to 5:59 a.m.

For each hour of the day, shade a bubble for **EACH LOCATION** where you spent any time during the hour. **Make sure there is at least one bubble shaded for each hour of the day.**

The terms used in the time diary are defined as follows:

**Home:** The house or apartment where you live; the location where we are collecting samples.

**Work:** A place away from home where you work.

**School:** A place away from home where you attend school.

**Transit:** Any travel from one location to another, including all travel between such places as home, school, shopping centers, as well as all other travel on roads, paths, or trails.

**Other:** All other places you spend time besides home, work, school, and in transit between locations.

Act - date

DAY 1

Act - day

PAGE 4  
Adult Time  
Diary

Location	Today's Date:											Day of Week:						OFFICE USE ONLY		
	Sun	Mon	Tues	Wed	Thur	Fri	Sat	R	N	M	Time-ref	Time-act	Time-miss	R	N	M				
IN TRANSIT	Tran Morn	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	Tran Eve	Tran Earl	12 1 2 3 4													
INSIDE AT Home	Inh - Morn	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	Inh - Eve	Inh - Earl	12 1 2 3 4													
INSIDE AT Work or School	Inw - Morn	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	Inw - Eve	Inw - Earl	12 1 2 3 4													
INSIDE AT Other	Ino - Morn	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	Ino - Eve	Ino - Earl	12 1 2 3 4													
OUTSIDE AT Home	Outh Morn	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	Outh Eve	Outh Earl	12 1 2 3 4													
OUTSIDE AT Work or School	Outw Morn	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	Outw Eve	Outw Earl	12 1 2 3 4													
OUTSIDE AT Other	Outo Morn	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	Outo Eve	Outo Earl	12 1 2 3 4													

1. Questions 1 a - 1 m: For each question, please shade ONE bubble for YES or NO.

- |  |           | YES                       | NO                       |
|--|-----------|---------------------------|--------------------------|
| a. Did you <u>pump gas</u> today? .....  | Pumpgas   | <input type="radio"/> Yes | <input type="radio"/> No |
| b. Did you <u>spill gasoline</u> on your <u>skin</u> today? .....  | Spillgas  | <input type="radio"/> Yes | <input type="radio"/> No |
| c. Did you spend <u>at least 15 minutes</u> in an <u>enclosed garage</u> with a <u>parked car</u> today? ..... | Encl-gar  | <input type="radio"/> Yes | <input type="radio"/> No |
| d. Did you have <u>soil or dirt</u> from your <u>yard</u> in contact with the <u>skin</u> today? .....         | Soildirt  | <input type="radio"/> Yes | <input type="radio"/> No |
| e. Did you have <u>grass or leaves</u> from your <u>yard</u> in contact with the <u>skin</u> today? .....      | Grasleav  | <input type="radio"/> Yes | <input type="radio"/> No |
| f. Did you clean a <u>fireplace</u> or <u>wood stove</u> today? .....  | Clenfire  | <input type="radio"/> Yes | <input type="radio"/> No |
| g. Did you start or tend a <u>fire</u> in a <u>fireplace</u> or <u>wood stove</u> today? .....                 | Strtfire  | <input type="radio"/> Yes | <input type="radio"/> No |
| h. Did you use an <u>outdoor grill</u> or burn <u>wood, leaves, or trash</u> today? .....                      | Outgrill  | <input type="radio"/> Yes | <input type="radio"/> No |
| i. Were any <u>tobacco products</u> smoked in the <u>home</u> today? .....                                     | Tobi home | <input type="radio"/> Yes | <input type="radio"/> No |
| j. Did you take a <u>shower</u> today? .....   | Showr     | <input type="radio"/> Yes | <input type="radio"/> No |
| k. Did you take a <u>bath</u> today? .....   | Bath      | <input type="radio"/> Yes | <input type="radio"/> No |
| l. Did you <u>prepare</u> (pour, mix) <u>pesticides, insecticides, or herbicides</u> for use today? .....      | Preppest  | <input type="radio"/> Yes | <input type="radio"/> No |
| m. Did you <u>apply</u> pesticides, insecticides, or herbicides today? .....                                   | Applpest  | <input type="radio"/> Yes | <input type="radio"/> No |

Data Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			

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HHD	HHUD	HHUUS	TRN
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## DAY 1

PAGE 5  
Adult Time  
Diary

2. Questions 2 a - 2 e: For each question, please enter the number in the boxes provided.

- a. How many glasses or cups of water did you drink today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 drink(s)
- b. How many cigarettes did you smoke today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 cigarette(s)
- c. How many cigars or pipesful did you smoke today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 cigar(s) or pipesful
- d. How many times did you use smokeless tobacco today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 time(s)
- e. How many times did you wash your hands today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 time(s)

Watdrink

Cigsmoke

Cigar pip

Smokeles

Washhand

OFFICE USE ONLY

Page:

 QC - 5.R - 8.N - 9.M

Field Tech Use:

 Comp. Asst. Do

3. Questions 3 a - 3 j: For each question, please enter the time spent and shade ONE bubble for either minute(s) or hour(s). If the time spent was LESS THAN 1 HOUR, enter 15 min, 45 min, or 1 hour, whichever is closest to the time actually spent. If time was GREATER THAN 1 HOUR, round to the nearest hour.

- a. You traveled on roadways or highways today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 Travroad
- b. You spent indoors with someone who was smoking? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 Smokindr
- c. You spent in a vehicle with someone who was smoking? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 Smokvehi
- d. You spent swimming in indoor or outdoor pools today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 Swim
- e. You spent using cleaning supplies (cleaners, waxes, polishes) today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 Clensupp
- f. You spent laying down or sitting on the carpet or rugs at home today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 Sit-rugs
- g. You spent in an enclosed workshop or garage used as a workshop today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 Enclwshp
- h. Doors and windows at your house were left open for ventilation today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 Dooropen
- i. You spent performing vigorous exercise like digging or other heavy manual labor, running, bicycling, aerobic dancing, playing basketball or soccer today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 Vig-exer
- j. You spent performing moderate exercise like walking, gardening, working while on your feet, or playing softball or golf today? ..... 

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

 Mod-exer

Travunit

Smkunit

Smkvunit

Swimunit

Clenunit

Sitrunit

Enclwunit

Doorunit

Vig-unit

Mod-unit

R N M

R N M

R N M

R N M

R N M

R N M

R N M

R N M

R N M

R N M

Data Use Only:	<input type="radio"/> 0	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 7	<input type="radio"/> 8	<input type="radio"/> 9	A	B	C	D	E	F	G	H	I	J
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SAME AS DAY 1

## DAY 2

PAGE 6  
Adult Time  
Diary

Location	Today's Date:											Day of Week:						OFFICE USE ONLY						
	Sun	Mon	Tues	Wed	Thur	Fri	Sat	R	N	M														
IN TRANSIT	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
INSIDE AT Home	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
INSIDE AT Work or School	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
INSIDE AT Other	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
OUTSIDE AT Home	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
OUTSIDE AT Work or School	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
OUTSIDE AT Other	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○

## 1. Questions 1 a - 1 m: For each question, please shade ONE bubble for YES or NO.

- |  | YES                   | NO                        |                          |
|--|-----------------------|---------------------------|--------------------------|
| a. Did you <u>pump gas</u> today? .....  | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |
| b. Did you <u>spill gasoline</u> on your <u>skin</u> today? .....  | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |
| c. Did you <u>spend at least 15 minutes</u> in an <u>enclosed garage</u> with a <u>parked car</u> today? ..... | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |
| d. Did you have <u>soil or dirt</u> from your <u>yard</u> in contact with the <u>skin</u> today? .....         | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |
| e. Did you have <u>grass or leaves</u> from your <u>yard</u> in contact with the <u>skin</u> today? .....      | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |
| f. Did you clean a <u>fireplace</u> or <u>wood stove</u> today? .....  | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |
| g. Did you start or tend a <u>fire in a fireplace or wood stove</u> today? .....                               | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |
| h. Did you use an <u>outdoor grill</u> or burn <u>wood, leaves, or trash</u> today? .....                      | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |
| i. Were any <u>tobacco products</u> smoked in the <u>home</u> today? .....                                     | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |
| j. Did you take a <u>shower</u> today? .....   | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |
| k. Did you take a <u>bath</u> today? .....   | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |
| l. Did you <u>prepare</u> (pour, mix) <u>pesticides, insecticides, or herbicides</u> for use today? .....      | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |
| m. Did you <u>apply</u> pesticides, insecticides, or herbicides today? .....                                   | <input type="radio"/> | <input type="radio"/> Yes | <input type="radio"/> No |

Date Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			

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## DAY 2

PAGE 7  
Adult Time  
Diary

## 2. Questions 2 a - 2 e: For each question, please enter the number in the boxes provided.

- a. How many glasses or cups of water did you drink today? ..... 



 drink(s)
- b. How many cigarettes did you smoke today? ..... 



 cigarette(s)
- c. How many cigars or pipesful did you smoke today? ..... 



 cigar(s) or pipesful
- d. How many times did you use smokeless tobacco today? ..... 



 time(s)
- e. How many times did you wash your hands today? ..... 



 time(s)

## 3. Questions 3 a - 3 j: For each question, please enter the time spent and shade ONE bubble for either minute(s) or hour(s). If the time spent was LESS THAN 1 HOUR, enter 15 min, 45 min, or 1 hour, whichever is closest to the time actually spent. If time was GREATER THAN 1 HOUR, round to the nearest hour.

- a. You traveled on roadways or highways today? ..... 



 minute(s)  hour(s)
- b. You spent indoors with someone who was smoking? ..... 



 minute(s)  hour(s)
- c. You spent in a vehicle with someone who was smoking? ..... 



 minute(s)  hour(s)
- d. You spent swimming in indoor or outdoor pools today? ..... 



 minute(s)  hour(s)
- e. You spent using cleaning supplies (cleaners, waxes, polishes) today? ..... 



 minute(s)  hour(s)
- f. You spent laying down or sitting on the carpet or rugs at home today? ..... 



 minute(s)  hour(s)
- g. You spent in an enclosed workshop or garage used as a workshop today? ..... 



 minute(s)  hour(s)
- h. Doors and windows at your house were left open for ventilation today? ..... 



 minute(s)  hour(s)
- i. You spent performing vigorous exercise like digging or other heavy manual labor, running, bicycling, aerobic dancing, playing basketball or soccer today? ..... 



 minute(s)  hour(s)
- j. You spent performing moderate exercise like walking, gardening, working while on your feet, or playing softball or golf today? ..... 



 minute(s)  hour(s)

OFFICE USE ONLY

Page:

- 
- QC
- 
- 
- SR
- 
- 
- SN
- 
- 
- SM

Field Tech Use:

- 
- Comp.
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- Act.
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- Do

R N M

R N M

R N M

R N M

R N M

R N M

R N M

R N M

R N M

  Data Use  
Only:

0 1 2 3 4 5 6 7 8 9 A B C D E F G H I J

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Same as Day 1  
**DAY 3**

PAGE 8  
Adult Time  
Diary

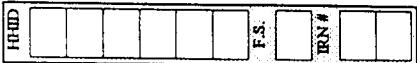
Location	Today's Date:					Day of Week:						OFFICE USE ONLY		
	Sun	Mon	Tues	Wed	Thur	Fri	Sat							
<b>IN TRANSIT</b>	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4										
<b>INSIDE AT Home</b>	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4										
<b>INSIDE AT Work or School</b>	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4										
<b>INSIDE AT Other</b>	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4										
<b>OUTSIDE AT Home</b>	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4										
<b>OUTSIDE AT Work or School</b>	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4										
<b>OUTSIDE AT Other</b>	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4										

1. Questions 1 a - 1 m: For each question, please shade ONE bubble for YES or NO.

- | a. Did you <u>pump gas</u> today? .....  | <u>YES</u>                | <u>NO</u>                |
|--|---------------------------|--------------------------|
| b. Did you <u>spill gasoline</u> on your <u>skin</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |
| c. Did you spend <u>at least 15 minutes</u> in an <u>enclosed garage</u> with a <u>parked car</u> today? ..... | <input type="radio"/> Yes | <input type="radio"/> No |
| d. Did you have <u>soil or dirt</u> from your <u>yard</u> in contact with the <u>skin</u> today? .....         | <input type="radio"/> Yes | <input type="radio"/> No |
| e. Did you have <u>grass or leaves</u> from your <u>yard</u> in contact with the <u>skin</u> today? .....      | <input type="radio"/> Yes | <input type="radio"/> No |
| f. Did you clean a <u>fireplace</u> or <u>wood stove</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |
| g. Did you start or tend a <u>fire in a fireplace or wood stove</u> today? .....                               | <input type="radio"/> Yes | <input type="radio"/> No |
| h. Did you use an <u>outdoor grill</u> or burn <u>wood, leaves, or trash</u> today? .....                      | <input type="radio"/> Yes | <input type="radio"/> No |
| i. Were any <u>tobacco products</u> smoked in the <u>home</u> today? .....                                     | <input type="radio"/> Yes | <input type="radio"/> No |
| j. Did you take a <u>shower</u> today? .....   | <input type="radio"/> Yes | <input type="radio"/> No |
| k. Did you take a <u>bath</u> today? .....   | <input type="radio"/> Yes | <input type="radio"/> No |
| l. Did you <u>prepare</u> (pour, mix) <u>pesticides, insecticides, or herbicides</u> for use today? .....      | <input type="radio"/> Yes | <input type="radio"/> No |
| m. Did you <u>apply</u> <u>pesticides, insecticides, or herbicides</u> today? .....                            | <input type="radio"/> Yes | <input type="radio"/> No |

Data Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			

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## DAY 3

PAGE 9  
 Adult Time  
 Diary

2. Questions 2 a - 2 e: For each question, please enter the number in the boxes provided.

a. How many glasses or cups of water did you drink today? ..... 



 drink(s)

b. How many cigarettes did you smoke today? ..... 



 cigarette(s)

c. How many cigars or pipesful did you smoke today? ..... 



 cigar(s) or pipesful

d. How many times did you use smokeless tobacco today? ..... 



 time(s)

e. How many times did you wash your hands today? ..... 



 time(s)

OFFICE USE ONLY

Page:

QC

- S.R

- 8.N

- 9.M

Field Tech Use:

Comp.

Asst.

Do

3. Questions 3 a - 3 j: For each question, please enter the time spent and shade ONE bubble for either minute(s) or hour(s). If the time spent was LESS THAN 1 HOUR, enter 15 min, 45 min, or 1 hour, whichever is closest to the time actually spent. If time was GREATER THAN 1 HOUR, round to the nearest hour.

a. You traveled on roadways or highways today? ..... 



 minute(s)  
 hour(s)

b. You spent indoors with someone who was smoking? ..... 



 minute(s)  
 hour(s)

c. You spent in a vehicle with someone who was smoking? ..... 



 minute(s)  
 hour(s)

d. You spent swimming in indoor or outdoor pools today? ..... 



 minute(s)  
 hour(s)

e. You spent using cleaning supplies (cleaners, waxes, polishes) today? ..... 



 minute(s)  
 hour(s)

f. You spent laying down or sitting on the carpet or rugs at home today? ..... 



 minute(s)  
 hour(s)

g. You spent in an enclosed workshop or garage used as a workshop today? ..... 



 minute(s)  
 hour(s)

h. Doors and windows at your house were left open for ventilation today? ..... 



 minute(s)  
 hour(s)

i. You spent performing vigorous exercise like digging or other heavy manual labor, running, bicycling, aerobic dancing, playing basketball or soccer today? ..... 



 minute(s)  
 hour(s)

j. You spent performing moderate exercise like walking, gardening, working while on your feet, or playing softball or golf today? ..... 



 minute(s)  
 hour(s)

Data Use Only:	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	7 <input type="radio"/>	8 <input type="radio"/>	9 <input type="radio"/>	A <input type="radio"/>	B <input type="radio"/>	C <input type="radio"/>	D <input type="radio"/>	E <input type="radio"/>	F <input type="radio"/>	G <input type="radio"/>	H <input type="radio"/>	I <input type="radio"/>	J <input type="radio"/>
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Same as Day 1 **DAY 4**

PAGE 10  
Adult Time  
Diary

Location	Today's Date:											Day of Week:							OFFICE USE ONLY					
							Sun	Mon	Tues	Wed	Thur	Fri	Sat	R	N	M								
<b>IN TRANSIT</b>	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
<b>INSIDE AT Home</b>	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
<b>INSIDE AT Work or School</b>	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
<b>INSIDE AT Other</b>	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
<b>OUTSIDE AT Home</b>	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
<b>OUTSIDE AT Work or School</b>	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
<b>OUTSIDE AT Other</b>	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○

1. Questions 1 a - 1 m: For each question, please shade ONE bubble for YES or NO.

- |  | <u>YES</u>                | <u>NO</u>                |
|--|---------------------------|--------------------------|
| a. Did you <u>pump gas</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |
| b. Did you <u>spill gasoline</u> on your <u>skin</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |
| c. Did you <u>spend at least 15 minutes</u> in an <u>enclosed garage</u> with a <u>parked car</u> today? ..... | <input type="radio"/> Yes | <input type="radio"/> No |
| d. Did you have <u>soil or dirt</u> from your yard in contact with the <u>skin</u> today? .....                | <input type="radio"/> Yes | <input type="radio"/> No |
| e. Did you have <u>grass or leaves</u> from your yard in contact with the <u>skin</u> today? .....             | <input type="radio"/> Yes | <input type="radio"/> No |
| f. Did you clean a <u>fireplace</u> or <u>wood stove</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |
| g. Did you start or tend a <u>fire in a fireplace or wood stove</u> today? .....                               | <input type="radio"/> Yes | <input type="radio"/> No |
| h. Did you use an <u>outdoor grill</u> or burn <u>wood, leaves, or trash</u> today? .....                      | <input type="radio"/> Yes | <input type="radio"/> No |
| i. Were any <u>tobacco products</u> smoked in the <u>home</u> today? .....                                     | <input type="radio"/> Yes | <input type="radio"/> No |
| j. Did you take a <u>shower</u> today? .....   | <input type="radio"/> Yes | <input type="radio"/> No |
| k. Did you take a <u>bath</u> today? .....   | <input type="radio"/> Yes | <input type="radio"/> No |
| l. Did you <u>prepare</u> (pour, mix) <u>pesticides, insecticides, or herbicides</u> for use today? .....      | <input type="radio"/> Yes | <input type="radio"/> No |
| m. Did you <u>apply</u> <u>pesticides, insecticides, or herbicides</u> today? .....                            | <input type="radio"/> Yes | <input type="radio"/> No |

Data Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			

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HHD					F.S.		R.H.	
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## DAY 4

PAGE 11  
Adult Time  
Diary

## 2. Questions 2 a - 2 e: For each question, please enter the number in the boxes provided.

a. How many glasses or cups of water did you drink today? ..... 



 drink(s)b. How many cigarettes did you smoke today? ..... 



 cigarette(s)c. How many cigars or pipesful did you smoke today? ..... 



 cigar(s) or pipesfuld. How many times did you use smokeless tobacco today? ..... 



 time(s)e. How many times did you wash your hands today? ..... 



 time(s)

## 3. Questions 3 a - 3 j: For each question, please enter the time spent and shade ONE bubble for either minute(s) or hour(s). If the time spent was LESS THAN 1 HOUR, enter 15 min, 45 min, or 1 hour, whichever is closest to the time actually spent. If time was GREATER THAN 1 HOUR, round to the nearest hour.

a. You traveled on roadways or highways today? ..... 





<input type="radio"/> R	<input type="radio"/> N	<input type="radio"/> M
<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O

minute(s)  
or  
hour(s)

b. You spent indoors with someone who was smoking? ..... 





<input type="radio"/> R	<input type="radio"/> N	<input type="radio"/> M
<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O

minute(s)  
or  
hour(s)

c. You spent in a vehicle with someone who was smoking? ..... 





<input type="radio"/> R	<input type="radio"/> N	<input type="radio"/> M
<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O

minute(s)  
or  
hour(s)

d. You spent swimming in indoor or outdoor pools today? ..... 





<input type="radio"/> R	<input type="radio"/> N	<input type="radio"/> M
<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O

minute(s)  
or  
hour(s)

e. You spent using cleaning supplies (cleaners, waxes, polishes) today? ..... 





<input type="radio"/> R	<input type="radio"/> N	<input type="radio"/> M
<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O

minute(s)  
or  
hour(s)

f. You spent laying down or sitting on the carpet or rugs at home today? ..... 





<input type="radio"/> R	<input type="radio"/> N	<input type="radio"/> M
<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O

minute(s)  
or  
hour(s)

g. You spent in an enclosed workshop or garage used as a workshop today? ..... 





<input type="radio"/> R	<input type="radio"/> N	<input type="radio"/> M
<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O

minute(s)  
or  
hour(s)

h. Doors and windows at your house were left open for ventilation today? ..... 





<input type="radio"/> R	<input type="radio"/> N	<input type="radio"/> M
<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O

minute(s)  
or  
hour(s)

i. You spent performing vigorous exercise like digging or other heavy manual labor, running, bicycling, aerobic dancing, playing basketball or soccer today? ..... 





<input type="radio"/> R	<input type="radio"/> N	<input type="radio"/> M
<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O

minute(s)  
or  
hour(s)

j. You spent performing moderate exercise like walking, gardening, working while on your feet, or playing softball or golf today? ..... 





<input type="radio"/> R	<input type="radio"/> N	<input type="radio"/> M
<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O

minute(s)  
or  
hour(s)

OFFICE USE ONLY

Page:

 QC - 5.R - 8.N - 9.M

Field Tech Use:

 Comp. Asst. Do

Data Use Only:	0 <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	6 <input type="radio"/>	7 <input type="radio"/>	8 <input type="radio"/>	9 <input type="radio"/>	A <input type="radio"/>	B <input type="radio"/>	C <input type="radio"/>	D <input type="radio"/>	E <input type="radio"/>	F <input type="radio"/>	G <input type="radio"/>	H <input type="radio"/>	I <input type="radio"/>	J <input type="radio"/>
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Same as Day / **DAY 5**

PAGE 12  
Adult Time  
Diary

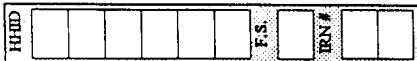
Location	Today's Date:											Day of Week:						OFFICE USE ONLY						
							Sun	Mon	Tues	Wed	Thur	Fri	Sat	R	N	M								
IN TRANSIT	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
INSIDE AT Home	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
INSIDE AT Work or School	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
INSIDE AT Other	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
OUTSIDE AT Home	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
OUTSIDE AT Work or School	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
OUTSIDE AT Other	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○

1. Questions 1 a - 1 m: For each question, please shade ONE bubble for YES or NO.

- |   | YES                       | NO                       |
|---|---------------------------|--------------------------|
| a. Did you <u>pump gas</u> today? .....   | <input type="radio"/> Yes | <input type="radio"/> No |
| b. Did you <u>spill gasoline on your skin</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |
| c. Did you spend <u>at least 15 minutes in an enclosed garage with a parked car</u> today? .....          | <input type="radio"/> Yes | <input type="radio"/> No |
| d. Did you have <u>soil or dirt</u> from your yard in contact with the <u>skin</u> today? .....           | <input type="radio"/> Yes | <input type="radio"/> No |
| e. Did you have <u>grass or leaves</u> from your yard in contact with the <u>skin</u> today? .....        | <input type="radio"/> Yes | <input type="radio"/> No |
| f. Did you clean a <u>fireplace</u> or <u>wood stove</u> today? .....                                     | <input type="radio"/> Yes | <input type="radio"/> No |
| g. Did you start or tend a <u>fire in a fireplace or wood stove</u> today? .....                          | <input type="radio"/> Yes | <input type="radio"/> No |
| h. Did you use an <u>outdoor grill</u> or burn <u>wood, leaves, or trash</u> today? .....                 | <input type="radio"/> Yes | <input type="radio"/> No |
| i. Were any <u>tobacco products</u> smoked in the <u>home</u> today? .....                                | <input type="radio"/> Yes | <input type="radio"/> No |
| j. Did you take a <u>shower</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |
| k. Did you take a <u>bath</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |
| l. Did you <u>prepare</u> (pour, mix) <u>pesticides, insecticides, or herbicides</u> for use today? ..... | <input type="radio"/> Yes | <input type="radio"/> No |
| m. Did you <u>apply</u> <u>pesticides, insecticides, or herbicides</u> today? .....                       | <input type="radio"/> Yes | <input type="radio"/> No |

Data Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			

53671



## DAY 5

PAGE 13  
Adult Time  
Diary

## 2. Questions 2 a - 2 e: For each question, please enter the number in the boxes provided.

a. How many glasses or cups of water did you drink today? ..... 

--	--

 drink(s)b. How many cigarettes did you smoke today? ..... 

--	--

 cigarette(s)c. How many cigars or pipesful did you smoke today? ..... 

--	--

 cigar(s) or pipesfuld. How many times did you use smokeless tobacco today? ..... 

--	--

 time(s)e. How many times did you wash your hands today? ..... 

--	--

 time(s)

## 3. Questions 3 a - 3 j: For each question, please enter the time spent and shade ONE bubble for either minute(s) or hour(s). If the time spent was LESS THAN 1 HOUR, enter 15 min, 45 min, or 1 hour, whichever is closest to the time actually spent. If time was GREATER THAN 1 HOUR, round to the nearest hour.

a. You traveled on roadways or highways today? ..... 

--	--

 minute(s)  hour(s)b. You spent indoors with someone who was smoking? ..... 

--	--

 minute(s)  hour(s)c. You spent in a vehicle with someone who was smoking? ..... 

--	--

 minute(s)  hour(s)d. You spent swimming in indoor or outdoor pools today? ..... 

--	--

 minute(s)  hour(s)e. You spent using cleaning supplies (cleaners, waxes, polishes) today? ..... 

--	--

 minute(s)  hour(s)f. You spent laying down or sitting on the carpet or rugs at home today? ..... 

--	--

 minute(s)  hour(s)g. You spent in an enclosed workshop or garage used as a workshop today? ..... 

--	--

 minute(s)  hour(s)h. Doors and windows at your house were left open for ventilation today? ..... 

--	--

 minute(s)  hour(s)i. You spent performing vigorous exercise like digging or other heavy manual labor, running, bicycling, aerobic dancing, playing basketball or soccer today? ..... 

--	--

 minute(s)  hour(s)j. You spent performing moderate exercise like walking, gardening, working while on your feet, or playing softball or golf today? ..... 

--	--

 minute(s)  hour(s)

OFFICE USE ONLY

Page:

 QC 5.R 8.N 9.M

Field Tech Use:

 Comp. Ass. Do

R N M

R N M

R N M

R N M

R N M

R N M

R N M

R N M

R N M

R N M

Data Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			

53671



Same as Day 1      **DAY 6**

PAGE 14  
Adult Time  
Diary

Location	Today's Date:											Day of Week:							OFFICE USE ONLY					
	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10		11	12	1	2	3
SUN	<input type="radio"/>																							
IN TRANSIT	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
INSIDE AT Home	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
INSIDE AT Work or School	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
INSIDE AT Other	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
OUTSIDE AT Home	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
OUTSIDE AT Work or School	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
OUTSIDE AT Other	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4

1. Questions 1 a - 1 m: For each question, please shade ONE bubble for YES or NO.

- |  | <u>YES</u>            | <u>NO</u>             |
|--|-----------------------|-----------------------|
| a. Did you <u>pump gas</u> today? .....  | <input type="radio"/> | <input type="radio"/> |
| b. Did you <u>spill gasoline</u> on your <u>skin</u> today? .....  | <input type="radio"/> | <input type="radio"/> |
| c. Did you spend <u>at least 15 minutes</u> in an <u>enclosed garage</u> with a <u>parked car</u> today? ..... | <input type="radio"/> | <input type="radio"/> |
| d. Did you have <u>soil or dirt</u> from your yard in contact with the <u>skin</u> today? .....                | <input type="radio"/> | <input type="radio"/> |
| e. Did you have <u>grass or leaves</u> from your yard in contact with the <u>skin</u> today? .....             | <input type="radio"/> | <input type="radio"/> |
| f. Did you clean a <u>fireplace</u> or <u>wood stove</u> today? .....  | <input type="radio"/> | <input type="radio"/> |
| g. Did you start or tend a <u>fire in a fireplace or wood stove</u> today? .....                               | <input type="radio"/> | <input type="radio"/> |
| h. Did you use an <u>outdoor grill</u> or burn <u>wood, leaves, or trash</u> today? .....                      | <input type="radio"/> | <input type="radio"/> |
| i. Were any <u>tobacco products</u> smoked in the <u>home</u> today? .....                                     | <input type="radio"/> | <input type="radio"/> |
| j. Did you take a <u>shower</u> today? .....   | <input type="radio"/> | <input type="radio"/> |
| k. Did you take a <u>bath</u> today? .....   | <input type="radio"/> | <input type="radio"/> |
| l. Did you <u>prepare</u> (pour, mix) <u>pesticides, insecticides, or herbicides</u> for use today? .....      | <input type="radio"/> | <input type="radio"/> |
| m. Did you <u>apply</u> <u>pesticides, insecticides, or herbicides</u> today? .....                            | <input type="radio"/> | <input type="radio"/> |

Data Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			

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HRID					F.S.	TRN#		
------	--	--	--	--	------	------	--	--

## DAY 6

PAGE 15  
Adult Time  
Diary

## 2. Questions 2 a - 2 e: For each question, please enter the number in the boxes provided.

a. How many glasses or cups of water did you drink today? ..... 



 drink(s)b. How many cigarettes did you smoke today? ..... 



 cigarette(s)c. How many cigars or pipesful did you smoke today? ..... 



 cigar(s) or pipesfuld. How many times did you use smokeless tobacco today? ..... 



 time(s)e. How many times did you wash your hands today? ..... 



 time(s)

## 3. Questions 3 a - 3 j: For each question, please enter the time spent and shade ONE bubble for either minute(s) or hour(s). If the time spent was LESS THAN 1 HOUR, enter 15 min, 45 min, or 1 hour, whichever is closest to the time actually spent. If time was GREATER THAN 1 HOUR, round to the nearest hour.

a. You traveled on roadways or highways today? ..... 



 minute(s)  hour(s)b. You spent indoors with someone who was smoking? ..... 



 minute(s)  hour(s)c. You spent in a vehicle with someone who was smoking? ..... 



 minute(s)  hour(s)d. You spent swimming in indoor or outdoor pools today? ..... 



 minute(s)  hour(s)e. You spent using cleaning supplies (cleaners, waxes, polishes) today? ..... 



 minute(s)  hour(s)f. You spent laying down or sitting on the carpet or rugs at home today? ..... 



 minute(s)  hour(s)g. You spent in an enclosed workshop or garage used as a workshop today? ..... 



 minute(s)  hour(s)h. Doors and windows at your house were left open for ventilation today? ..... 



 minute(s)  hour(s)i. You spent performing vigorous exercise like digging or other heavy manual labor, running, bicycling, aerobic dancing, playing basketball or soccer today? ..... 



 minute(s)  hour(s)j. You spent performing moderate exercise like walking, gardening, working while on your feet, or playing softball or golf today? ..... 



 minute(s)  hour(s)

OFFICE USE ONLY

Page:

 QC - 5.R - 8.N - 9.M

Field Tech Use:

 Comp. Ass. Do

R N M

R N M

R N M

R N M

R N M

R N M

R N M

R N M

R N M

R N M

54084

Data Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			



Same as Day 1 DAY 7

PAGE 16  
 Adult Time  
 Diary

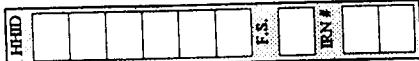
Location	Today's Date:											Day of Week:							OFFICE USE ONLY					
													Sun	Mon	Tues	Wed	Thur	Fri	Sat	R	N	M		
IN TRANSIT	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4
INSIDE AT Home	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
INSIDE AT Work or School	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
INSIDE AT Other	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
OUTSIDE AT Home	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
OUTSIDE AT Work or School	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
OUTSIDE AT Other	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○

1. Questions 1 a - 1 m: For each question, please shade ONE bubble for YES or NO.

- |  | YES                       | NO                       |
|--|---------------------------|--------------------------|
| a. Did you <u>pump gas</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |
| b. Did you <u>spill gasoline</u> on your <u>skin</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |
| c. Did you spend <u>at least 15 minutes</u> in an <u>enclosed garage</u> with a <u>parked car</u> today? ..... | <input type="radio"/> Yes | <input type="radio"/> No |
| d. Did you have <u>soil or dirt</u> from your <u>yard</u> in contact with the <u>skin</u> today? .....         | <input type="radio"/> Yes | <input type="radio"/> No |
| e. Did you have <u>grass or leaves</u> from your <u>yard</u> in contact with the <u>skin</u> today? .....      | <input type="radio"/> Yes | <input type="radio"/> No |
| f. Did you clean a <u>fireplace</u> or <u>wood stove</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |
| g. Did you start or tend a <u>fire</u> in a <u>fireplace</u> or <u>wood stove</u> today? .....                 | <input type="radio"/> Yes | <input type="radio"/> No |
| h. Did you use an <u>outdoor grill</u> or burn <u>wood, leaves, or trash</u> today? .....                      | <input type="radio"/> Yes | <input type="radio"/> No |
| i. Were any <u>tobacco products</u> smoked in the <u>home</u> today? .....                                     | <input type="radio"/> Yes | <input type="radio"/> No |
| j. Did you take a <u>shower</u> today? .....   | <input type="radio"/> Yes | <input type="radio"/> No |
| k. Did you take a <u>bath</u> today? .....   | <input type="radio"/> Yes | <input type="radio"/> No |
| l. Did you <u>prepare</u> (pour, mix) <u>pesticides, insecticides, or herbicides</u> for use today? .....      | <input type="radio"/> Yes | <input type="radio"/> No |
| m. Did you <u>apply</u> <u>pesticides, insecticides, or herbicides</u> today? .....                            | <input type="radio"/> Yes | <input type="radio"/> No |

Data Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			

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## DAY 7

PAGE 17  
 Adult Time  
 Diary

2. Questions 2 a - 2 e: For each question, please enter the number in the boxes provided.

- a. How many glasses or cups of water did you drink today? ..... 

--	--

 drink(s)
- b. How many cigarettes did you smoke today? ..... 

--	--

 cigarette(s)
- c. How many cigars or pipesful did you smoke today? ..... 

--	--

 cigar(s) or pipesful
- d. How many times did you use smokeless tobacco today? ..... 

--	--

 time(s)
- e. How many times did you wash your hands today? ..... 

--	--

 time(s)

OFFICE USE ONLY

Page:

- QC
- S.R
- 8.N
- 9.M

Field Tech Use:

- Comp.
- Asst.
- Do

3. Questions 3 a - 3 j: For each question, please enter the time spent and shade ONE bubble for either minute(s) or hour(s). If the time spent was LESS THAN 1 HOUR, enter 15 min, 45 min, or 1 hour, whichever is closest to the time actually spent. If time was GREATER THAN 1 HOUR, round to the nearest hour.

- a. You traveled on roadways or highways today? ..... 

--	--

 minute(s)  
 hour(s)
- b. You spent indoors with someone who was smoking? ..... 

--	--

 minute(s)  
 hour(s)
- c. You spent in a vehicle with someone who was smoking? ..... 

--	--

 minute(s)  
 hour(s)
- d. You spent swimming in indoor or outdoor pools today? ..... 

--	--

 minute(s)  
 hour(s)
- e. You spent using cleaning supplies (cleaners, waxes, polishes) today? ..... 

--	--

 minute(s)  
 hour(s)
- f. You spent laying down or sitting on the carpet or rugs at home today? ..... 

--	--

 minute(s)  
 hour(s)
- g. You spent in an enclosed workshop or garage used as a workshop today? ..... 

--	--

 minute(s)  
 hour(s)
- h. Doors and windows at your house were left open for ventilation today? ..... 

--	--

 minute(s)  
 hour(s)
- i. You spent performing vigorous exercise like digging or other heavy manual labor, running, bicycling, aerobic dancing, playing basketball or soccer today? ..... 

--	--

 minute(s)  
 hour(s)
- j. You spent performing moderate exercise like walking, gardening, working while on your feet, or playing softball or golf today? ..... 

--	--

 minute(s)  
 hour(s)

R	N	M
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Data Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			

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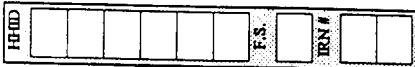
Same as Day 1  
**DAY 8**

PAGE 18  
 Adult Time  
 Diary

Location	Today's Date:					Day of Week:							OFFICE USE ONLY		
	Sun	Mon	Tues	Wed	Thur	Fri	Sat	R	N	M					
IN TRANSIT	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4											
INSIDE AT Home	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4											
INSIDE AT Work or School	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4											
INSIDE AT Other	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4											
OUTSIDE AT Home	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4											
OUTSIDE AT Work or School	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4											
OUTSIDE AT Other	5 6 7 8 9 10 11	12 1 2 3 4 5	6 7 8 9 10 11	12 1 2 3 4											

1. Questions 1 a - 1 m: For each question, please shade ONE bubble for YES or NO.

- |  |                           |                          |  |
|--|---------------------------|--------------------------|--|
| a. Did you <u>pump gas</u> today? .....  | <u>YES</u>                | <u>NO</u>                | <input type="radio"/> Yes <input type="radio"/> No<br><input type="radio"/> Yes <input type="radio"/> No |
| b. Did you <u>spill gasoline</u> on your <u>skin</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |  |
| c. Did you spend <u>at least 15 minutes</u> in an <u>enclosed garage</u> with a <u>parked car</u> today? ..... | <input type="radio"/> Yes | <input type="radio"/> No |  |
| d. Did you have <u>soil or dirt</u> from your <u>yard</u> in contact with the <u>skin</u> today? .....         | <input type="radio"/> Yes | <input type="radio"/> No |  |
| e. Did you have <u>grass or leaves</u> from your <u>yard</u> in contact with the <u>skin</u> today? .....      | <input type="radio"/> Yes | <input type="radio"/> No |  |
| f. Did you clean a <u>fireplace</u> or <u>wood stove</u> today? .....  | <input type="radio"/> Yes | <input type="radio"/> No |  |
| g. Did you start or tend a <u>fire</u> in a <u>fireplace</u> or <u>wood stove</u> today? .....                 | <input type="radio"/> Yes | <input type="radio"/> No |  |
| h. Did you use an <u>outdoor grill</u> or burn <u>wood, leaves, or trash</u> today? .....                      | <input type="radio"/> Yes | <input type="radio"/> No |  |
| i. Were any <u>tobacco products</u> smoked in the <u>home</u> today? .....                                     | <input type="radio"/> Yes | <input type="radio"/> No |  |
| j. Did you take a <u>shower</u> today? .....   | <input type="radio"/> Yes | <input type="radio"/> No |  |
| k. Did you take a <u>bath</u> today? .....   | <input type="radio"/> Yes | <input type="radio"/> No |  |
| l. Did you <u>prepare</u> (pour, mix) <u>pesticides, insecticides, or herbicides</u> for use today? .....      | <input type="radio"/> Yes | <input type="radio"/> No |  |
| m. Did you <u>apply</u> <u>pesticides, insecticides, or herbicides</u> today? .....                            | <input type="radio"/> Yes | <input type="radio"/> No |  |



## DAY 8

PAGE 19  
Adult Time  
Diary

2. Questions 2 a - 2 e: For each question, please enter the number in the boxes provided.

- a. How many glasses or cups of water did you drink today? ..... 



 drink(s)
- b. How many cigarettes did you smoke today? ..... 



 cigarette(s)
- c. How many cigars or pipesful did you smoke today? ..... 



 cigar(s) or pipesful
- d. How many times did you use smokeless tobacco today? ..... 



 time(s)
- e. How many times did you wash your hands today? ..... 



 time(s)

OFFICE USE ONLY

Page:

 QC - 5.R - 8.N - 9.M

Field Tech Use:

 Comp. Assl. Do

3. Questions 3 a - 3 j: For each question, please enter the time spent and shade ONE bubble for either minute(s) or hour(s). If the time spent was LESS THAN 1 HOUR, enter 15 min, 45 min, or 1 hour, whichever is closest to the time actually spent. If time was GREATER THAN 1 HOUR, round to the nearest hour.

- a. You traveled on roadways or highways today? ..... 



 minute(s)  
 hour(s)
- b. You spent indoors with someone who was smoking? ..... 



 minute(s)  
 hour(s)
- c. You spent in a vehicle with someone who was smoking? ..... 



 minute(s)  
 hour(s)
- d. You spent swimming in indoor or outdoor pools today? ..... 



 minute(s)  
 hour(s)
- e. You spent using cleaning supplies (cleaners, waxes, polishes) today? ..... 



 minute(s)  
 hour(s)
- f. You spent laying down or sitting on the carpet or rugs at home today? ..... 



 minute(s)  
 hour(s)
- g. You spent in an enclosed workshop or garage used as a workshop today? ..... 



 minute(s)  
 hour(s)
- h. Doors and windows at your house were left open for ventilation today? ..... 



 minute(s)  
 hour(s)
- i. You spent performing vigorous exercise like digging or other heavy manual labor, running, bicycling, aerobic dancing, playing basketball or soccer today? ..... 



 minute(s)  
 hour(s)
- j. You spent performing moderate exercise like walking, gardening, working while on your feet, or playing softball or golf today? ..... 



 minute(s)  
 hour(s)

Data Use Only:	0	1	2	3	4	5	6	7	8	9	A	B	C	D	E	F	G	H	I	J
	<input type="radio"/>																			

56231



## Appendix B: Time Diary and Activity Header Dictionary

\* Logic checkes review by Mary Kay on 05/07/96

\* Last updated by Jared on 06/25/97

\* This is the dictionary for pages 1&2

K HHID (F6.0) '', HHIDFS (A1) '', IRN (F2.0) '', Evndt\_m (F2.0) '', Evndt\_d (F2.0) '', Evndt\_y (F2.0) ''

Q HHID 1 1 I6  
T Household Identification

Q HHIDFS 1 7 A1  
T Family Schism  
Y 'A' Most frequent answer

Q IRN 1 8 I2  
T IRN #  
R (01,13)

Q Fname 1 10 A15  
T FIRST Name (ONLY):  
T FIRST Name of the respondent  
L X not(any(Fname,"YYYYYYYYYYYYYYYY"))

\* The following date field has been broken up into mm/dd/yy  
\* Q Evntdate 1 25 A8  
\* T Date of Completion

Q Evndt\_m 1 25 I2  
T Date of Completion, Month  
R (01,12)

Q Evndt\_d 1 28 I2  
T Date of Completion, Day  
R (01,31)

Q Evndt\_y 1 31 I2  
T Date of Completion, Year  
R (95,99)

Q Gfname 1 33 A15  
T If the participant is LESS THAN 10 YEARS OLD, what is the first name of the individual who is providing the answers for the designated respondent: FIRST Name (ONLY):

Q G\_IRN 1 48 I2  
T Guardian IRN  
P G\_relat (F3.0) '', Gfname (A15) ''  
R (01,10)

Y -8 Not applicable

Q G\_relat 1 50 I3

T What is the relationship of this individual to the person for whom the responses are provided?

Y 1 Self

Y 2 Guardian

Y 3 Othe

Y 55 Refused

Y 88 Not Applicable

Y 99 Missing

P Gfname (A15) '', G\_IRN (F2.0) ''

L X (any(Gfname,"YYYYYYYYYYYYYYYY")) and G\_IRN=-8) and G\_relat=088

L X (not(any(Gfname,"YYYYYYYYYYYYYYYY")) and not(any(G\_IRN,-8)) and  
+ F not(any(G\_relat,088)))

Q G\_relato 1 53 I2

T What is the relationship of this individual to the person for whom the responses are provided? O. Relat.  
Code

R (01,20)

Y -8 Defaul

P Gfname (A15) '', G\_relat (F3.0) ''

L X (G\_relat=003) and range(G\_relato,01,20)

L X (any(G\_relat,001,002,055,088,099) and (G\_relato=-8))

Q Itemnum 1 55 I2

T Form Type:

Y 04 Form type = Time/Activity Diary

Q Study 1 57 I3

T Study:

Y 001 NHEXAS

Y 002 Border

Y 003 \_\_\_\_\_

Y 004 \_\_\_\_\_

Y 005 \_\_\_\_\_

Q Stage 1 60 I1

T Stage #:

R (1,4)

Q Collapse 1 61 I2

T Collapsed?

Y 01 Y

Y 02 N

Y 08 8

P Stage (F1.0) ''

L X (any(Stage,1,4,8) and Collapse = 8)

L X (any(Stage,2,3) and any(Collapse,1,2))

Q Admnmeth 1 63 I2

T Admin. Method:

Y 01 Tech  
Y 02 Self  
Y 03 Guardian  
Y 04 Other

Q TechID 1 65 I2  
T Admin. by:  
P Admnmeth (F2.0) ''  
Y -8 Default (Not Applicable)  
Y -9 Missing

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Information intentionally withheld due to confidentiality issues.

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L X (any(Admnmeth,002,003,004) and TechID=-8)  
L X (Admnmeth=001) and not(any(TechID,-8))

Q Formstat 1 67 I2  
T Form Status:  
Y 01 Cmp  
Y 02 N Cmp  
Y 03 P Cmp  
Y 04 Re-col  
Y 05 Ref  
Y 07 Dest  
Y 08 N/A  
Y 09 Miss

Q QCBY 1 69 I2  
T QC: Tech ID

Information intentionally withheld due to confidentiality issues.

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\* The following date field has been broken up into mm/dd/yy

\* Q QCDATE 1 71 A8

\* T QC: Date

Q QCDATE\_M 1 71 I2

T QC Date: Month

R (01,12)

Q QCDATE\_D 1 74 I2

T QC Date: Day

R (01,31)

Q QCDATE\_Y 1 77 I2

T QC Date: Year

R (95,99)

Q QABY 1 79 I2

T QA: Tech ID

Information intentionally withheld due to confidentiality issues.

\* The following date field has been broken up into mm/dd/yy

\* Q QADATE 1 81 A8  
\* T QA: Date

Q QADATE\_M 1 81 I2  
T QA Date: Month  
R (01,12)

Q QADATE\_D 1 84 I2  
T QA Date: Day  
R (01,31)

Q QADATE\_Y 1 87 I2  
T QA Date: Year  
R (95,99)

Q DEBY 1 89 I2  
T DE: Tech ID

Information intentionally withheld due to confidentiality issues.

\* The following date field has been broken up into mm/dd/yy

\* Q DEDATE 1 91 A8  
\* T DE: Date

Q DEDATE\_M 1 91 I2  
T DE Date: Month  
R (01,12)

Q DEDATE\_D 1 94 I2  
T DE Date: Day  
R (01,31)

Q DEDATE\_Y 1 97 I2  
T DE Date: Year  
R (96,99)

Q DPBATCH 1 99 I3  
T DP Batch  
R (400,499)

\* The Spanish QXV will be different than what is on the form. This was done

\* to differentiate between the English and Spanish forms.

Q QXV 1 102 A5

Y 'QTAA1' Adult

Y 'QTAPI' Pediatric

Y 'QTAS1' Spanish

\* This dictionary is for each day for the Time/Activity

\* Logic checks reviewed by Mary Kay on 05/07/96

\* Last updated by Jared on 06/25/97

\* Day 8 is an extra day which may or may not be filled out. If it is not filled out,  
\* it may be N/A. The lower half of Day 7 is in the same situation. Other days  
\* will be marked as missing if they are not filled out. Missing applies to days  
\* when the subject had the QX and was supposed to complete it but failed to do so.  
\* Not applicable applies to days where the subject did not have the QX for that day  
\* or that part of the day.

\* If it is the day of collection and thus the subject is unable to answer any of the  
\* questions at the end, BOTH the questions and the time/activity sections are  
\* coded as Not-applicable. As per MK

K HHID (F6.0) '', HHIDFS (A1) '', IRN (F2.0) '', Actdt\_m (F2.0) '', Actdt\_d (F2.0) '', Actdt\_y (F2.0) ''

Q HHID 1 1 I6

T Household Identification

Q HHIDFS 1 7 A1

T Family Schism

Y 'A' Most frequent answer

Q IRN 1 8 I2

T IRN #

R (01,13)

\* The following date field has been broken up into mm/dd/yy

\* Q Act\_date 1 10 A8

\* T Today's Date

Q Actdt\_m 1 10 I2

T Date of Completion, Month

R (01,12)

Q Actdt\_d 1 13 I2

T Date of Completion, Day

R (01,31)

Q Actdt\_y 1 16 I2

T Date of Completion, Year

R (95,99)

Q Act\_Day 1 18 I3

T Day of Week:

Y 001 Sunday

Y 002 Monday

Y 003 Tuesday

Y 004 Wednesday

Y 005 Thursday

Y 006 Friday

Y 007 Saturday

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Actdt\_m (F2.0) '', Actdt\_d (F2.0) '', Actdt\_y (F2.0) ''

L X (range(Actdt\_m,01,12) and range(Actdt\_d,01,31) and range(Actdt\_y,95,99)) and  
+ F (range(Act\_day,001,007) or any(Act\_day,055,099))

Q Tran0500 1 21 I1

T In Transit: 5:00 Morning

Y 1 Checked

Y 0 No

Q Tran0600 1 22 I1

T In Transit: 6:00 Morning

Y 1 Checked

Y 0 No

Q Tran0700 1 23 I1

T In Transit: 7:00 Morning

Y 1 Checked

Y 0 No

Q Tran0800 1 24 I1

T In Transit: 8:00 Morning

Y 1 Checked

Y 0 No

Q Tran0900 1 25 I1

T In Transit: 9:00 Morning

Y 1 Checked

Y 0 No

Q Tran1000 1 26 I1

T In Transit: 10:00 Morning

Y 1 Checked

Y 0 No

Q Tran1100 1 27 I1

T In Transit: 11:00 Morning

Y 1 Checked

Y 0 No

Q Tran1200 1 28 I1

T In Transit: 12:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Tran1300 1 29 I1  
T In Transit: 13:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Tran1400 1 30 I1  
T In Transit: 14:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Tran1500 1 31 I1  
T In Transit: 15:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Tran1600 1 32 I1  
T In Transit: 16:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Tran1700 1 33 I1  
T In Transit: 17:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Tran1800 1 34 I1  
T In Transit: 18:00 Evening  
Y 1 Checked  
Y 0 No

Q Tran1900 1 35 I1  
T In Transit: 19:00 Evening  
Y 1 Checked  
Y 0 No

Q Tran2000 1 36 I1  
T In Transit: 20:00 Evening  
Y 1 Checked  
Y 0 No

Q Tran2100 1 37 I1  
T In Transit: 21:00 Evening  
Y 1 Checked  
Y 0 No

Q Tran2200 1 38 I1  
T In Transit: 22:00 Evening

Y 1 Checked  
Y 0 No

Q Tran2300 1 39 I1  
T In Transit: 23:00 Evening  
Y 1 Checked  
Y 0 No

Q Tran2400 1 40 I1  
T In Transit: 24:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Tran0100 1 41 I1  
T In Transit: 01:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Tran0200 1 42 I1  
T In Transit: 02:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Tran0300 1 43 I1  
T In Transit: 03:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Tran0400 1 44 I1  
T In Transit: 04:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Time\_Ref 1 45 I1  
T T/Act: R  
Y 1 Checked  
Y 0 No

Q Time\_Na 1 46 I1  
T T/Act: N  
Y 1 Checked  
Y 0 No

Q Time\_Mis 1 47 I1  
T T/Act: M  
Y 1 Checked  
Y 0 No

Q Inh\_0500 1 48 I1  
T Inside at Home: 5:00 Morning  
Y 1 Checked

Y 0 No

Q Inh\_0600 1 49 II  
T Inside at Home: 6:00 Morning  
Y 1 Checked  
Y 0 No

Q Inh\_0700 1 50 II  
T Inside at Home: 7:00 Morning  
Y 1 Checked  
Y 0 No

Q Inh\_0800 1 51 II  
T Inside at Home: 8:00 Morning  
Y 1 Checked  
Y 0 No

Q Inh\_0900 1 52 II  
T Inside at Home: 9:00 Morning  
Y 1 Checked  
Y 0 No

Q Inh\_1000 1 53 II  
T Inside at Home: 10:00 Morning  
Y 1 Checked  
Y 0 No

Q Inh\_1100 1 54 II  
T Inside at Home: 11:00 Morning  
Y 1 Checked  
Y 0 No

Q Inh\_1200 1 55 II  
T Inside at Home: 12:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Inh\_1300 1 56 II  
T Inside at Home: 13:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Inh\_1400 1 57 II  
T Inside at Home: 14:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Inh\_1500 1 58 II  
T Inside at Home: 15:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Inh\_1600 1 59 II  
T Inside at Home: 16:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Inh\_1700 1 60 II  
T Inside at Home: 17:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Inh\_1800 1 61 II  
T Inside at Home: 18:00 Evening  
Y 1 Checked  
Y 0 No

Q Inh\_1900 1 62 II  
T Inside at Home: 19:00 Evening  
Y 1 Checked  
Y 0 No

Q Inh\_2000 1 63 II  
T Inside at Home: 20:00 Evening  
Y 1 Checked  
Y 0 No

Q Inh\_2100 1 64 II  
T Inside at Home: 21:00 Evening  
Y 1 Checked  
Y 0 No

Q Inh\_2200 1 65 II  
T Inside at Home: 22:00 Evening  
Y 1 Checked  
Y 0 No

Q Inh\_2300 1 66 II  
T Inside at Home: 23:00 Evening  
Y 1 Checked  
Y 0 No

Q Inh\_2400 1 67 II  
T Inside at Home: 24:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Inh\_0100 1 68 II  
T Inside at Home: 01:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Inh\_0200 1 69 II  
T Inside at Home: 02:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Inh\_0300 1 70 II  
T Inside at Home: 03:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Inh\_0400 1 71 II  
T Inside at Home: 04:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Inw\_0500 1 72 II  
T Inside at Work or School: 5:00 Morning  
Y 1 Checked  
Y 0 No

Q Inw\_0600 1 73 II  
T Inside at Work or School: 6:00 Morning  
Y 1 Checked  
Y 0 No

Q Inw\_0700 1 74 II  
T Inside at Work or School: 7:00 Morning  
Y 1 Checked  
Y 0 No

Q Inw\_0800 1 75 II  
T Inside at Work or School: 8:00 Morning  
Y 1 Checked  
Y 0 No

Q Inw\_0900 1 76 II  
T Inside at Work or School: 9:00 Morning  
Y 1 Checked  
Y 0 No

Q Inw\_1000 1 77 II  
T Inside at Work or School: 10:00 Morning  
Y 1 Checked  
Y 0 No

Q Inw\_1100 1 78 II  
T Inside at Work or School: 11:00 Morning  
Y 1 Checked  
Y 0 No

Q Inw\_1200 1 79 II

T Inside at Work or School: 12:00 Afternoon

Y 1 Checked

Y 0 No

Q Inw\_1300 1 80 I1

T Inside at Work or School: 13:00 Afternoon

Y 1 Checked

Y 0 No

Q Inw\_1400 1 81 I1

T Inside at Work or School: 14:00 Afternoon

Y 1 Checked

Y 0 No

Q Inw\_1500 1 82 I1

T Inside at Work or School: 15:00 Afternoon

Y 1 Checked

Y 0 No

Q Inw\_1600 1 83 I1

T Inside at Work or School: 16:00 Afternoon

Y 1 Checked

Y 0 No

Q Inw\_1700 1 84 I1

T Inside at Work or School: 17:00 Afternoon

Y 1 Checked

Y 0 No

Q Inw\_1800 1 85 I1

T Inside at Work or School: 18:00 Evening

Y 1 Checked

Y 0 No

Q Inw\_1900 1 86 I1

T Inside at Work or School: 19:00 Evening

Y 1 Checked

Y 0 No

Q Inw\_2000 1 87 I1

T Inside at Work or School: 20:00 Evening

Y 1 Checked

Y 0 No

Q Inw\_2100 1 88 I1

T Inside at Work or School: 21:00 Evening

Y 1 Checked

Y 0 No

Q Inw\_2200 1 89 I1

T Inside at Work or School: 22:00 Evening

Y 1 Checked  
Y 0 No

Q Inw\_2300 1 90 I1  
T Inside at Work or School: 23:00 Evening  
Y 1 Checked  
Y 0 No

Q Inw\_2400 1 91 I1  
T Inside at Work or School: 24:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Inw\_0100 1 92 I1  
T Inside at Work or School: 01:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Inw\_0200 1 93 I1  
T Inside at Work or School: 02:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Inw\_0300 1 94 I1  
T Inside at Work or School: 03:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Inw\_0400 1 95 I1  
T Inside at Work or School: 04:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Ino\_0500 1 96 I1  
T Inside at Other: 5:00 Morning  
Y 1 Checked  
Y 0 No

Q Ino\_0600 1 97 I1  
T Inside at Other: 6:00 Morning  
Y 1 Checked  
Y 0 No

Q Ino\_0700 1 98 I1  
T Inside at Other: 7:00 Morning  
Y 1 Checked  
Y 0 No

Q Ino\_0800 1 99 I1  
T Inside at Other: 8:00 Morning  
Y 1 Checked

Y 0 No

Q Ino\_0900 1 100 I1  
T Inside at Other: 9:00 Morning  
Y 1 Checked  
Y 0 No

Q Ino\_1000 1 101 I1  
T Inside at Other: 10:00 Morning  
Y 1 Checked  
Y 0 No

Q Ino\_1100 1 102 I1  
T Inside at Other: 11:00 Morning  
Y 1 Checked  
Y 0 No

Q Ino\_1200 1 103 I1  
T Inside at Other: 12:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Ino\_1300 1 104 I1  
T Inside at Other: 13:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Ino\_1400 1 105 I1  
T Inside at Other: 14:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Ino\_1500 1 106 I1  
T Inside at Other: 15:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Ino\_1600 1 107 I1  
T Inside at Other: 16:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Ino\_1700 1 108 I1  
T Inside at Other: 17:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Ino\_1800 1 109 I1  
T Inside at Other: 18:00 Evening  
Y 1 Checked  
Y 0 No

Q Ino\_1900 1 110 I1  
T Inside at Other: 19:00 Evening  
Y 1 Checked  
Y 0 No

Q Ino\_2000 1 111 I1  
T Inside at Other: 20:00 Evening  
Y 1 Checked  
Y 0 No

Q Ino\_2100 1 112 I1  
T Inside at Other: 21:00 Evening  
Y 1 Checked  
Y 0 No

Q Ino\_2200 1 113 I1  
T Inside at Other: 22:00 Evening  
Y 1 Checked  
Y 0 No

Q Ino\_2300 1 114 I1  
T Inside at Other: 23:00 Evening  
Y 1 Checked  
Y 0 No

Q Ino\_2400 1 115 I1  
T Inside at Other: 24:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Ino\_0100 1 116 I1  
T Inside at Other: 01:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Ino\_0200 1 117 I1  
T Inside at Other: 02:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Ino\_0300 1 118 I1  
T Inside at Other: 03:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Ino\_0400 1 119 I1  
T Inside at Other: 04:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Outh0500 1 120 I1  
T Outside at Home: 5:00 Morning  
Y 1 Checked  
Y 0 No

Q Outh0600 1 121 I1  
T Outside at Home: 6:00 Morning  
Y 1 Checked  
Y 0 No

Q Outh0700 1 122 I1  
T Outside at Home: 7:00 Morning  
Y 1 Checked  
Y 0 No

Q Outh0800 1 123 I1  
T Outside at Home: 8:00 Morning  
Y 1 Checked  
Y 0 No

Q Outh0900 1 124 I1  
T Outside at Home: 9:00 Morning  
Y 1 Checked  
Y 0 No

Q Outh1000 1 125 I1  
T Outside at Home: 10:00 Morning  
Y 1 Checked  
Y 0 No

Q Outh1100 1 126 I1  
T Outside at Home: 11:00 Morning  
Y 1 Checked  
Y 0 No

Q Outh1200 1 127 I1  
T Outside at Home: 12:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outh1300 1 128 I1  
T Outside at Home: 13:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outh1400 1 129 I1  
T Outside at Home: 14:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outh1500 1 130 I1

T Outside at Home: 15:00 Afternoon

Y 1 Checked

Y 0 No

Q Outh1600 1 131 II

T Outside at Home: 16:00 Afternoon

Y 1 Checked

Y 0 No

Q Outh1700 1 132 II

T Outside at Home: 17:00 Afternoon

Y 1 Checked

Y 0 No

Q Outh1800 1 133 II

T Outside at Home: 18:00 Evening

Y 1 Checked

Y 0 No

Q Outh1900 1 134 II

T Outside at Home: 19:00 Evening

Y 1 Checked

Y 0 No

Q Outh2000 1 135 II

T Outside at Home: 20:00 Evening

Y 1 Checked

Y 0 No

Q Outh2100 1 136 II

T Outside at Home: 21:00 Evening

Y 1 Checked

Y 0 No

Q Outh2200 1 137 II

T Outside at Home: 22:00 Evening

Y 1 Checked

Y 0 No

Q Outh2300 1 138 II

T Outside at Home: 23:00 Evening

Y 1 Checked

Y 0 No

Q Outh2400 1 139 II

T Outside at Home: 24:00 Early Morning (Night Time)

Y 1 Checked

Y 0 No

Q Outh0100 1 140 II

T Outside at Home: 01:00 Early Morning (Night Time)

Y 1 Checked  
Y 0 No

Q Outh0200 1 141 I1  
T Outside at Home: 02:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Outh0300 1 142 I1  
T Outside at Home: 03:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Outh0400 1 143 I1  
T Outside at Home: 04:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Outw0500 1 144 I1  
T Outside at Work or School: 5:00 Morning  
Y 1 Checked  
Y 0 No

Q Outw0600 1 145 I1  
T Outside at Work or School: 6:00 Morning  
Y 1 Checked  
Y 0 No

Q Outw0700 1 146 I1  
T Outside at Work or School: 7:00 Morning  
Y 1 Checked  
Y 0 No

Q Outw0800 1 147 I1  
T Outside at Work or School: 8:00 Morning  
Y 1 Checked  
Y 0 No

Q Outw0900 1 148 I1  
T Outside at Work or School: 9:00 Morning  
Y 1 Checked  
Y 0 No

Q Outw1000 1 149 I1  
T Outside at Work or School: 10:00 Morning  
Y 1 Checked  
Y 0 No

Q Outw1100 1 150 I1  
T Outside at Work or School: 11:00 Morning  
Y 1 Checked

Y 0 No

Q Outw1200 1 151 I1  
T Outside at Work or School: 12:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outw1300 1 152 I1  
T Outside at Work or School: 13:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outw1400 1 153 I1  
T Outside at Work or School: 14:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outw1500 1 154 I1  
T Outside at Work or School: 15:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outw1600 1 155 I1  
T Outside at Work or School: 16:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outw1700 1 156 I1  
T Outside at Work or School: 17:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outw1800 1 157 I1  
T Outside at Work or School: 18:00 Evening  
Y 1 Checked  
Y 0 No

Q Outw1900 1 158 I1  
T Outside at Work or School: 19:00 Evening  
Y 1 Checked  
Y 0 No

Q Outw2000 1 159 I1  
T Outside at Work or School: 20:00 Evening  
Y 1 Checked  
Y 0 No

Q Outw2100 1 160 I1  
T Outside at Work or School: 21:00 Evening  
Y 1 Checked  
Y 0 No

Q Outw2200 1 161 I1  
T Outside at Work or School: 22:00 Evening  
Y 1 Checked  
Y 0 No

Q Outw2300 1 162 I1  
T Outside at Work or School: 23:00 Evening  
Y 1 Checked  
Y 0 No

Q Outw2400 1 163 I1  
T Outside at Work or School: 24:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Outw0100 1 164 I1  
T Outside at Work or School: 01:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Outw0200 1 165 I1  
T Outside at Work or School: 02:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Outw0300 1 166 I1  
T Outside at Work or School: 03:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Outw0400 1 167 I1  
T Outside at Work or School: 04:00 Early Morning (Night Time)  
Y 1 Checked  
Y 0 No

Q Outo0500 1 168 I1  
T Outside at Other: 5:00 Morning  
Y 1 Checked  
Y 0 No

Q Outo0600 1 169 I1  
T Outside at Other: 6:00 Morning  
Y 1 Checked  
Y 0 No

Q Outo0700 1 170 I1  
T Outside at Other: 7:00 Morning  
Y 1 Checked  
Y 0 No

Q Outo0800 1 171 I1  
T Outside at Other: 8:00 Morning  
Y 1 Checked  
Y 0 No

Q Outo0900 1 172 I1  
T Outside at Other: 9:00 Morning  
Y 1 Checked  
Y 0 No

Q Outo1000 1 173 I1  
T Outside at Other: 10:00 Morning  
Y 1 Checked  
Y 0 No

Q Outo1100 1 174 I1  
T Outside at Other: 11:00 Morning  
Y 1 Checked  
Y 0 No

Q Outo1200 1 175 I1  
T Outside at Other: 12:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outo1300 1 176 I1  
T Outside at Other: 13:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outo1400 1 177 I1  
T Outside at Other: 14:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outo1500 1 178 I1  
T Outside at Other: 15:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outo1600 1 179 I1  
T Outside at Other: 16:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outo1700 1 180 I1  
T Outside at Other: 17:00 Afternoon  
Y 1 Checked  
Y 0 No

Q Outo1800 1 181 I1

T Outside at Other: 18:00 Evening

Y 1 Checked

Y 0 No

Q Outo1900 1 182 I1

T Outside at Other: 19:00 Evening

Y 1 Checked

Y 0 No

Q Outo2000 1 183 I1

T Outside at Other: 20:00 Evening

Y 1 Checked

Y 0 No

Q Outo2100 1 184 I1

T Outside at Other: 21:00 Evening

Y 1 Checked

Y 0 No

Q Outo2200 1 185 I1

T Outside at Other: 22:00 Evening

Y 1 Checked

Y 0 No

Q Outo2300 1 186 I1

T Outside at Other: 23:00 Evening

Y 1 Checked

Y 0 No

Q Outo2400 1 187 I1

T Outside at Other: 24:00 Early Morning (Night Time)

Y 1 Checked

Y 0 No

Q Outo0100 1 188 I1

T Outside at Other: 01:00 Early Morning (Night Time)

Y 1 Checked

Y 0 No

Q Outo0200 1 189 I1

T Outside at Other: 02:00 Early Morning (Night Time)

Y 1 Checked

Y 0 No

Q Outo0300 1 190 I1

T Outside at Other: 03:00 Early Morning (Night Time)

Y 1 Checked

Y 0 No

Q Outo0400 1 191 I1

T Outside at Other: 04:00 Early Morning (Night Time)

Y 1 Checked

Y 0 No

Q Pumpgas 1 192 I3

T Did you pump gas today?

V q1a

Y 001 Yes

Y 002 No

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Pumpgas=088)

L X (Time\_Ref=1 or Time\_Mis=1) and any(Pumpgas,001,002,055,088,099)

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099))

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099))

Q Spillgas 1 195 I3

T Did you spill gasoline on your skin today?

V q1b

Y 001 Yes

Y 002 No

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Spillgas=088)

L X (Time\_Ref=1 or Time\_Mis=1) and any(Spillgas,001,002,055,088,099)

L X (Time\_Na=0 and any(Spillgas,001,002,055,099)) and any(Spillgas,001,002,055,099)

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099))

L X (Time\_Na=0 and Pumpgas=088) and Spillgas=088

Q Encl\_gar 1 198 I3

T Did you spend at least 15 minutes in an enclosed garage with a parked car today?

V q1c

Y 001 Yes

Y 002 No

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Encl\_gar=088)

L X (Time\_Ref=1 or Time\_Mis=1) and any(Encl\_gar,001,002,055,088,099)

L X (Time\_Na=0 and any(Encl\_gar,001,002,055,099)) and any(Encl\_gar,001,002,055,099)

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099))

L X (Time\_Na=0 and Pumpgas=088) and Encl\_gar=088

Q Soildirt 1 201 I3

T Did you have soil or dirt from your yard in contact with the skin today?

V q1d

Y 001 Yes

Y 002 No

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Soildirt=088)

L X (Time\_Ref=1 or Time\_Mis=1) and any(Soildirt,001,002,055,088,099)

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and any(Soildirt,001,002,055,099)

L X (Time\_Na=0 and Pumpgas=088) and Soildirt=088

Q Grasleav 1 204 I3

T Did you have grass or leaves from your yard in contact with the skin today?

V q1e

Y 001 Yes

Y 002 No

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Grasleav=088)

L X (Time\_Ref=1 or Time\_Mis=1) and any(Grasleav,001,002,055,088,099)

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and any(Grasleav,001,002,055,099)

L X (Time\_Na=0 and Pumpgas=088) and Grasleav=088

Q Clenfire 1 207 I3

T Did you clean a fireplace or wood stove today?

V q1f

Y 001 Yes

Y 002 No

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Clenfire=088)

L X (Time\_Ref=1 or Time\_Mis=1) and any(Clenfire,001,002,055,088,099)

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and any(Clenfire,001,002,055,099)

L X (Time\_Na=0 and Pumpgas=088) and Clenfire=088

Q Strtfire 1 210 I3

T Did you start or tend a fire in a fireplace or wood stove today?

V q1g

Y 001 Yes

Y 002 No

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Strtfire=088)

L X (Time\_Ref=1 or Time\_Mis=1) and any(Strtfire,001,002,055,088,099)

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and any(Strtfire,001,002,055,099)

L X (Time\_Na=0 and Pumpgas=088) and Strtfire=088

Q Outgrill 1 213 I3

T Did you use an outdoor grill or burn wood, leaves or trash today?

V q1h

Y 001 Yes

Y 002 No

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Outgrill=088)

L X (Time\_Ref=1 or Time\_Mis=1) and any(Outgrill,001,002,055,088,099)

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and any(Outgrill,001,002,055,099)

L X (Time\_Na=0 and Pumpgas=088) and Outgrill=088

Q Tobihome 1 216 I3

T Were any tobacco products smoked in the home today?

V q1i

Y 001 Yes

Y 002 No

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Tobihome=088)

L X (Time\_Ref=1 or Time\_Mis=1) and any(Tobihome,001,002,055,088,099)

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and any(Tobihome,001,002,055,099)

L X (Time\_Na=0 and Pumpgas=088) and Tobihome=088

Q Shower 1 219 I3

T Did you take a shower today?

V q1j

Y 001 Yes

Y 002 No

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Shower=088)

L X (Time\_Ref=1 or Time\_Mis=1) and any(Shower,001,002,055,088,099)

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and any(Shower,001,002,055,099)

L X (Time\_Na=0 and Pumpgas=088) and Shower=088

Q Bath 1 222 I3

T Did you take a bath today?

V q1k

Y 001 Yes

Y 002 No

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Bath=088)

L X (Time\_Ref=1 or Time\_Mis=1) and any(Bath,001,002,055,088,099)  
L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and any(Bath,001,002,055,099)  
L X (Time\_Na=0 and Pumpgas=088) and Bath=088

Q Prepest 1 225 I3  
T Did you prepare (pour,mix) pesticides, insecticides, or herbicides for use today?  
V q11  
Y 001 Yes  
Y 002 No  
Y 055 Refused  
Y 088 Not Applicable  
Y 099 Missing  
P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''  
L X (Time\_Na=1 and Prepest=088)  
L X (Time\_Ref=1 or Time\_Mis=1) and any(Prepest,001,002,055,088,099)  
L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and any(Prepest,001,002,055,099)  
L X (Time\_Na=0 and Pumpgas=088) and Prepest=088

Q Aplypest 1 228 I3  
T Did you apply persitices, insecticides, or herbicides today?  
V q1m  
Y 001 Yes  
Y 002 No  
Y 055 Refused  
Y 088 Not Applicable  
Y 099 Missing  
P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''  
L X (Time\_Na=1 and Aplypest=088)  
L X (Time\_Ref=1 or Time\_Mis=1) and any(Aplypest,001,002,055,088,099)  
L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and any(Aplypest,001,002,055,099)  
L X (Time\_Na=0 and Pumpgas=088) and Aplypest=088

Q Watdrink 1 231 I2  
T How many glasses or cups of water did you drink today?  
V q2a  
Y -5 Refused  
Y -8 Default  
Y -9 Missing  
R (00,40)  
P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''  
L X (Time\_Na=1 and Watdrink=-8)  
L X (Time\_Ref=1 or Time\_Mis=1) and (range(Watdrink,00,40) or  
+ F any(Watdrink,-5,-8,-9))  
L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Watdrink,00,40) or  
+ F any(Watdrink,-5,-9))

Q Cigsmoke 1 233 I2  
T How many cigarettes did you smoke today?  
V q2b  
Y -5 Refused  
Y -8 Default

Y -9 Missing

R (00,63)

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Cigsmoke=-8)

L X (Time\_Ref=1 or Time\_Mis=1) and (range(Cigsmoke,00,63) or  
+ F any(Cigsmoke,-5,-8,-9))

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Cigsmoke,00,63) or  
+ F any(Cigsmoke,-5,-9))

Q CigarPip 1 235 I2

T How many cigars or pipefuls did you smoke today?

V q2c

Y -5 Refused

Y -8 Default

Y -9 Missing

R (00,18)

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and CigarPip=-8)

L X (Time\_Ref=1 or Time\_Mis=1) and (range(CigarPip,00,18) or  
+ F any(CigarPip,-5,-8,-9))

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(CigarPip,00,18) or  
+ F any(CigarPip,-5,-9))

Q Smokeles 1 237 I2

T How many times did you use smokeless tobacco today?

V q2d

Y -5 Refused

Y -8 Default

Y -9 Missing

R (00,15)

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Smokeles=-8)

L X (Time\_Ref=1 or Time\_Mis=1) and (range(Smokeles,00,15) or  
+ F any(Smokeles,-5,-8,-9))

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Smokeles,00,15) or  
+ F any(Smokeles,-5,-9))

Q Washhand 1 239 I2

T How many times did you wash your hands today?

V q2e

Y -5 Refused

Y -8 Default

Y -9 Missing

R (00,50)

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Washhand=-8)

L X (Time\_Ref=1 or Time\_Mis=1) and (range(Washhand,00,50) or  
+ F any(Washhand,-5,-8,-9))

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Washhand,00,50) or  
+ F any(Washhand,-5,-9))

- \* If the entire day is missing, all variables that are left as N/A for ease of processing, will be change to missing at a later time. Thus if the entire days is missing it is OK to have the amount of time spent doing an activity as N/A and the unit as missing. The amount of time will be changed to missing at a later time.

Q Travroad 1 241 I2  
T You traveled on the roadways or highways today?  
V q3a1  
Y -5 Refused  
Y -8 Default  
Y -9 Missing  
R (00,99)  
P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''  
L X (Time\_Na=1 and Travroad=-8)  
L X (Time\_Ref=1 or Time\_Mis=1) and (range(Travroad,00,99) or  
+ F any(Travroad,-5,-8,-9))  
L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Travroad,00,99) or  
+ F any(Travroad,-5,-9))  
L X (Time\_Na=0 and Pumpgas=088) and Travroad=-8

Q Travunit 1 243 I3  
T You traveled on the roadways or highways today?: Units  
V q3a2  
Y 001 Minutes  
Y 002 Hours  
Y 055 Refused  
Y 088 Not Applicable  
Y 099 Missing  
P Travroad (F3.0) ''  
L X (range(Travroad,00,99) and any(Travunit,001,002,055,099))  
L X (Travroad=-5 and Travunit=055)  
L X (Travroad=-8 and any(Travunit,088,099))  
L X (Travroad=-9 and Travunit=099)

Q Smokindr 1 246 I2  
T You spent indoors with someone who was smoking?  
V q3b1  
Y -5 Refused  
Y -8 Default  
Y -9 Missing  
R (00,99)  
P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''  
L X (Time\_Na=1 and Smokindr=-8)  
L X (Time\_Ref=1 or Time\_Mis=1) and (range(Smokindr,00,99) or  
+ F any(Smokindr,-5,-8,-9))  
L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Smokindr,00,99) or  
+ F any(Smokindr,-5,-9))  
L X (Time\_Na=0 and Pumpgas=088) and Smokindr=-8

Q Smkiunit 1 248 I3

T You spent indoors with someone who was smoking?: Units

V q3b2

Y 001 Minutes

Y 002 Hours

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Smokindr (F3.0) ''

L X (range(Smokindr,00,99) and any(Smkiunit,001,002,055,099))

L X (Smokindr=-5 and Smkiunit=055)

L X (Smokindr=-8 and any(Smkiunit,088,099))

L X (Smokindr=-9 and Smkiunit=099)

Q Smokvehi 1 251 I2

T You spent in a vehicle with someone who was smoking?

V q3c1

Y -5 Refused

Y -8 Default

Y -9 Missing

R (00,99)

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Smokvehi=-8)

L X (Time\_Ref=1 or Time\_Mis=1) and (range(Smokvehi,00,99) or

+ F any(Smokvehi,-5,-8,-9))

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Smokvehi,00,99) or

+ F any(Smokvehi,-5,-9))

L X (Time\_Na=0 and Pumpgas=088) and Smokvehi=-8

Q Smkvunit 1 253 I3

T You spent in a vehicle with someone who was smoking?: Units

V q3c2

Y 001 Minutes

Y 002 Hours

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Smokvehi (F3.0) ''

L X (range(Smokvehi,00,99) and any(Smkvunit,001,002,055,099))

L X (Smokvehi=-5 and Smkvunit=055)

L X (Smokvehi=-8 and any(Smkvunit,088,099))

L X (Smokvehi=-9 and Smkvunit=099)

Q Swim 1 256 I2

T You spent swimming in indoor or outdoor pools today?

V q3d1

Y -5 Refused

Y -8 Default

Y -9 Missing

R (00,99)

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Swim=-8)

L X (Time\_Ref=1 or Time\_Mis=1) and (range(Swim,00,99) or  
+ F any(Swim,-5,-8,-9))  
L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Swim,00,99) or  
+ F any(Swim,-5,-9))  
L X (Time\_Na=0 and Pumpgas=088) and Swim=-8

Q Swimunit 1 258 I3  
T You spent swimming in indoor or outdoor pools today?: Units  
V q3d2  
Y 001 Minutes  
Y 002 Hours  
Y 055 Refused  
Y 088 Not Applicable  
Y 099 Missing  
P Swim (F3.0) ''  
L X (range(Swim,00,99) and any(Swimunit,001,002,055,099))  
L X (Swim=-5 and Swimunit=055)  
L X (Swim=-8 and any(Swimunit,088,099))  
L X (Swim=-9 and Swimunit=099)

Q Clensupp 1 261 I2  
T You spent using cleaning supplies (cleaners, waxes, polishes) today?  
V q3e1  
Y -5 Refused  
Y -8 Default  
Y -9 Missing  
R (00,99)  
P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''  
L X (Time\_Na=1 and Clensupp=-8)  
L X (Time\_Ref=1 or Time\_Mis=1) and (range(Clensupp,00,99) or  
+ F any(Clensupp,-5,-8,-9))  
L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Clensupp,00,99) or  
+ F any(Clensupp,-5,-9))  
L X (Time\_Na=0 and Pumpgas=088) and Clensupp=-8

Q Clenunit 1 263 I3  
T You spent using cleaning supplies (cleaners, waxes, polishes) today?: Units  
V q3e2  
Y 001 Minutes  
Y 002 Hours  
Y 055 Refused  
Y 088 Not Applicable  
Y 099 Missing  
P Clensupp (F3.0) ''  
L X (range(Clensupp,00,99) and any(Clenunit,001,002,055,099))  
L X (Clensupp=-5 and Clenunit=055)  
L X (Clensupp=-8 and any(Clenunit,088,099))  
L X (Clensupp=-9 and Clenunit=099)

Q Sit\_rugs 1 266 I2  
T You spent laying down or sitting on the carpet or rugs at home today?

V q3f1  
Y -5 Refused  
Y -8 Default  
Y -9 Missing  
R (00,99)  
P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''  
L X (Time\_Na=1 and Sit\_rugs=-8)  
L X (Time\_Ref=1 or Time\_Mis=1) and (range(Sit\_rugs,00,99) or  
+ F any(Sit\_rugs,-5,-8,-9))  
L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Sit\_rugs,00,99) or  
+ F any(Sit\_rugs,-5,-9))  
L X (Time\_Na=0 and Pumpgas=088) and Sit\_rugs=-8

Q Sitrunit 1 268 I3  
T You spent laying down or sitting on the carpet or rugs at home today?: Units  
V q3f2  
Y 001 Minutes  
Y 002 Hours  
Y 055 Refused  
Y 088 Not Applicable  
Y 099 Missing  
P Sit\_rugs (F3.0) ''  
L X (range(Sit\_rugs,00,99) and any(Sitrunit,001,002,055,099))  
L X (Sit\_rugs=-5 and Sitrunit=055)  
L X (Sit\_rugs=-8 and any(Sitrunit,088,099))  
L X (Sit\_rugs=-9 and Sitrunit=099)

Q Enclwshp 1 271 I2  
T You spent in an enclosed workshop or garage used as a workshop today?  
V q3g1  
Y -5 Refused  
Y -8 Default  
Y -9 Missing  
R (00,99)  
P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''  
L X (Time\_Na=1 and Enclwshp=-8)  
L X (Time\_Ref=1 or Time\_Mis=1) and (range(Enclwshp,00,99) or  
+ F any(Enclwshp,-5,-8,-9))  
L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Enclwshp,00,99) or  
+ F any(Enclwshp,-5,-9))  
L X (Time\_Na=0 and Pumpgas=088) and Enclwshp=-8

Q Encwunit 1 273 I3  
T You spent in an enclosed workshop or garage used as a workshop today?: Units  
V q3g2  
Y 001 Minutes  
Y 002 Hours  
Y 055 Refused  
Y 088 Not Applicable  
Y 099 Missing  
P Enclwshp (F3.0) ''

L X (range(Enclwshp,00,99) and any(Encwunit,001,002,055,099))  
L X (Enclwshp=-5 and Encwunit=055)  
L X (Enclwshp=-8 and any(Encwunit,088,099))  
L X (Enclwshp=-9 and Encwunit=099)

Q Dooropen 1 276 I2

T Doors and windows at your house were left open for ventilation today?  
V q3h1

Y -5 Refused

Y -8 Default

Y -9 Missing

R (00,99)

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Dooropen=-8)

L X (Time\_Ref=1 or Time\_Mis=1) and (range(Dooropen,00,99) or  
+ F any(Dooropen,-5,-8,-9))

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Dooropen,00,99) or  
+ F any(Dooropen,-5,-9))

L X (Time\_Na=0 and Pumpgas=088) and Dooropen=-8

Q Doorunit 1 278 I3

T Doors and windows at your house were left open for ventilation today?: Units  
V q3h2

Y 001 Minutes

Y 002 Hours

Y 055 Refused

Y 088 Not Applicable

Y 099 Missing

P Dooropen (F3.0) ''

L X (range(Dooropen,00,99) and any(Doorunit,001,002,055,099))

L X (Dooropen=-5 and Doorunit=055)

L X (Dooropen=-8 and any(Doorunit,088,099))

L X (Dooropen=-9 and Doorunit=099)

Q Vig\_exer 1 281 I2

T You spent performing vigorous exercise like digging or other heave muscular labor, running, bicycling, aerobic dancing, playing basketball or soccer today?

V q3i1

Y -5 Refused

Y -8 Default

Y -9 Missing

R (00,99)

P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''

L X (Time\_Na=1 and Vig\_exer=-8)

L X (Time\_Ref=1 or Time\_Mis=1) and (range(Vig\_exer,00,99) or  
+ F any(Vig\_exer,-5,-8,-9))

L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Vig\_exer,00,99) or  
+ F any(Vig\_exer,-5,-9))

L X (Time\_Na=0 and Pumpgas=088) and Vig\_exer=-8

Q Vig\_unit 1 283 I3

T You spent performing vigorous exercise like digging or other heave muscular labor, running, bicycling, aerobic dancing, playing basketball or soccer today?: Units

V q3i2  
Y 001 Minutes  
Y 002 Hours  
Y 055 Refused  
Y 088 Not Applicable  
Y 099 Missing  
P Vig\_exer (F3.0) ''  
L X (range(Vig\_exer,00,99) and any(Vig\_unit,001,002,055,099))  
L X (Vig\_exer=-5 and Vig\_unit=055)  
L X (Vig\_exer=-8 and any(Vig\_unit,088,099))  
L X (Vig\_exer=-9 and Vig\_unit=099)

Q Mod\_exer 1 286 I2

T You spent performing moderate exercise like walking, gardening, working while on your feet, or playing softball or golf today?

V q3j1  
Y -5 Refused  
Y -8 Default  
Y -9 Missing  
R (00,99)  
P Time\_Ref (F1.0) '', Time\_Na (F1.0) '', Time\_Mis (F1.0) ''  
L X (Time\_Na=1 and Mod\_exer=-8)  
L X (Time\_Ref=1 or Time\_Mis=1) and (range(Mod\_exer,00,99) or  
+ F any(Mod\_exer,-5,-8,-9))  
L X (Time\_Na=0 and any(Pumpgas,001,002,055,099)) and (range(Mod\_exer,00,99) or  
+ F any(Mod\_exer,-5,-9))  
L X (Time\_Na=0 and Pumpgas=088) and Mod\_exer=-8

Q Mod\_unit 1 288 I3

T You spent performing moderate exercise like walking, gardening, working while on your feet, or playing softball or golf today?: Units

V q3j2  
Y 001 Minutes  
Y 002 Hours  
Y 055 Refused  
Y 088 Not Applicable  
Y 099 Missing  
P Mod\_exer (F3.0) ''  
L X (range(Mod\_exer,00,99) and any(Mod\_unit,001,002,055,099))  
L X (Mod\_exer=-5 and Mod\_unit=055)  
L X (Mod\_exer=-8 and any(Mod\_unit,088,099))  
L X (Mod\_exer=-9 and Mod\_unit=099)

Q Comphelp 1 291 I2

Y 01 Comp.  
Y 02 Asst.  
Y 03 Do