

**Wave IV Section 6: Illness, Medications, and Physical Disabilities**

Number of observations: 15,701

**The next questions are about your general physical condition, including activity and illness.**

<b>H4ID1</b>		float	1. The following questions are about activities you might do during a typical day. How much does your health now limit you in these activities: moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, playing golf?
Frequency	Percent	Value	Label
14253	90.8%	1	not limited
1071	6.8%	2	limited a little
374	2.4%	3	limited a lot
1	0.0%	6	refused
2	0.0%	8	don't know

***If Q.1 = 1,6,8, then skip to Q.4***

<b>H4ID2</b>		float	2. How much does your health now limit you in: climbing several flights of stairs?
Frequency	Percent	Value	Label
446	2.8%	1	not limited
623	4.0%	2	limited a little
375	2.4%	3	limited a lot
14256	90.8%	7	legitimate skip
1	0.0%	8	don't know

<b>H4ID3</b>		float	3. Is your limitation in activities caused by a condition that has lasted more than a year, or by a condition that has developed recently?
Frequency	Percent	Value	Label
878	5.6%	1	lasted more than a year
558	3.6%	2	developed recently

14256	90.8%	7	legitimate skip
9	0.1%	8	don't know

<b>H4ID4</b>		float	4. Do you use a brace, cane, wheelchair or other device because of a physical condition?
Frequency	Percent	Value	Label
15014	95.6%	0	no
520	3.3%	1	yes
167	1.1%	5	not asked

<b>H4ID5A</b>		float	5A. Has a doctor, nurse or other health care provider ever told you that you have or had: cancer or lymphoma or leukemia? Don't include skin cancer, except melanoma?
Frequency	Percent	Value	Label
15490	98.7%	0	no
210	1.3%	1	yes
1	0.0%	6	refused

***If Q.5A not equal 1, then skip to Q.5B***

<b>H4ID6A</b>		float	6A. How old were you when the doctor, nurse or other health practitioner first told you? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
2	0.0%	0	0 years
4	0.0%	1	1 year
2	0.0%	2	2 years
3	0.0%	3	3 years
1	0.0%	4	4 years
169	1.1%	5-27	NOTE: Range of values omitted from display
11	0.1%	28	28 years
10	0.1%	29	29 years

7	0.0%	30	30 years
15491	98.7%	97	legitimate skip
1	0.0%	98	don't know

<b>H4ID5B</b>		float	5B. Has a doctor, nurse or other health care provider ever told you that you have or had: high blood cholesterol or triglycerides or lipids?
Frequency	Percent	Value	Label
14427	91.9%	0	no
1271	8.1%	1	yes
2	0.0%	6	refused
1	0.0%	8	don't know

***If Q.5B not equal 1, then skip to Q.5C***

<b>H4ID6B</b>		float	6B. How old were you when the doctor, nurse or other health practitioner diagnosed you with high blood cholesterol or triglycerides or lipids? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
2	0.0%	1	1 year
7	0.0%	2	2 years
3	0.0%	5	5 years
2	0.0%	7	7 years
5	0.0%	8	8 years
1204	7.7%	9-30	NOTE: Range of values omitted from display
35	0.2%	31	31 years
8	0.1%	32	32 years
1	0.0%	33	33 years
14430	91.9%	97	legitimate skip
4	0.0%	98	don't know

<b>H4ID5C</b>		float	5C. Has a doctor, nurse or other health care provider ever told you that you have or had: high blood pressure or hypertension {if female add, when you were not pregnant}?
Frequency	Percent	Value	Label
14036	89.4%	0	no
1662	10.6%	1	yes
2	0.0%	6	refused
1	0.0%	8	don't know

***If Q.5C not equal 1, then skip to Q.5D***

<b>H4ID6C</b>		float	6C. How old were you when the doctor, nurse or other health practitioner diagnosed you with blood pressure or hypertension? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
2	0.0%	0	0 years
20	0.1%	2	2 years
1	0.0%	4	4 years
2	0.0%	5	5 years
1	0.0%	6	6 years
1582	10.1%	7-30	NOTE: Range of values omitted from display
40	0.3%	31	31 years
5	0.0%	32	32 years
2	0.0%	33	33 years
14039	89.4%	97	legitimate skip
7	0.0%	98	don't know

<b>H4ID5D</b>		float	5D. Has a doctor, nurse or other health care provider ever told you that you have or had: high blood sugar or diabetes {if female add, when you were not pregnant}?
Frequency	Percent	Value	Label
15252	97.1%	0	no

447	2.8%	1	yes
2	0.0%	6	refused

***If Q.5D not equal 1, then skip to Q.5E***

<b>H4ID6D</b>		float	6D. How old were you when the doctor, nurse or other health practitioner diagnosed you with high blood sugar or diabetes? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
1	0.0%	0	0 years
2	0.0%	1	1 year
5	0.0%	2	2 years
3	0.0%	3	3 years
1	0.0%	5	5 years
397	2.5%	6-29	NOTE: Range of values omitted from display
18	0.1%	30	30 years
15	0.1%	31	31 years
2	0.0%	32	32 years
15254	97.2%	97	legitimate skip
3	0.0%	98	don't know

<b>H4ID5E</b>		float	5E. Has a doctor, nurse or other health care provider ever told you that you have or had: heart disease?
Frequency	Percent	Value	Label
15575	99.2%	0	no
124	0.8%	1	yes
2	0.0%	6	refused

***If Q.5E not equal 1, then skip to Q.5F***

<b>H4ID6E</b>		float	6E. How old were you when the doctor, nurse or other health practitioner diagnosed you with heart disease? NOTE: Smallest 5 and largest 5 values are displayed.
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Frequency	Percent	Value	Label
8	0.1%	0	0 years
9	0.1%	1	1 year
2	0.0%	2	2 years
4	0.0%	3	3 years
4	0.0%	5	5 years
89	0.6%	6-29	NOTE: Range of values omitted from display
4	0.0%	30	30 years
1	0.0%	32	32 years
1	0.0%	33	33 years
15577	99.2%	97	legitimate skip
2	0.0%	98	don't know

<b>H4ID5F</b>		float	5F. Has a doctor, nurse or other health care provider ever told you that you have or had: asthma, chronic bronchitis or emphysema?
Frequency	Percent	Value	Label
13376	85.2%	0	no
2323	14.8%	1	yes
2	0.0%	6	refused

***If Q.5F not equal 1, then skip to Q.5G***

<b>H4ID6F</b>		float	6F. How old were you when the doctor, nurse or other health practitioner diagnosed you with asthma, chronic bronchitis or emphysema? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
65	0.4%	0	0 years
172	1.1%	1	1 year
93	0.6%	2	2 years
73	0.5%	3	3 years

69	0.4%	4	4 years
1823	11.6%	5-30	NOTE: Range of values omitted from display
5	0.0%	31	31 years
3	0.0%	32	32 years
1	0.0%	96	refused
13378	85.2%	97	legitimate skip
19	0.1%	98	don't know

<b>H4ID5G</b>		float	5G. Has a doctor, nurse or other health care provider ever told you that you have or had: migraine headaches?
Frequency	Percent	Value	Label
13468	85.8%	0	no
2231	14.2%	1	yes
2	0.0%	6	refused

***If Q.5G not equal 1, then skip to Q.5H***

<b>H4ID6G</b>		float	6G. How old were you when the doctor, nurse or other health practitioner diagnosed you with migraine headaches? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
1	0.0%	0	0 years
9	0.1%	1	1 year
21	0.1%	2	2 years
10	0.1%	3	3 years
6	0.0%	4	4 years
2106	13.4%	5-29	NOTE: Range of values omitted from display
52	0.3%	30	30 years
12	0.1%	31	31 years
2	0.0%	32	32 years

13470	85.8%	97	legitimate skip
12	0.1%	98	don't know

<b>H4ID5H</b>		float	5H. Has a doctor, nurse or other health care provider ever told you that you have or had: depression?
Frequency	Percent	Value	Label
13292	84.7%	0	no
2406	15.3%	1	yes
2	0.0%	6	refused
1	0.0%	8	don't know

***If Q.5H not equal 1, then skip to Q.5I***

<b>H4ID6H</b>		float	6H. How old were you when the doctor, nurse or other health practitioner diagnosed you with depression? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
3	0.0%	1	1 year
21	0.1%	2	2 years
1	0.0%	3	3 years
1	0.0%	4	4 years
7	0.0%	5	5 years
2353	15.0%	6-31	NOTE: Range of values omitted from display
5	0.0%	32	32 years
3	0.0%	33	33 years
2	0.0%	96	refused
13295	84.7%	97	legitimate skip
10	0.1%	98	don't know

<b>H4ID5I</b>		float	5I. Has a doctor, nurse or other health care provider ever told you that you have or had: post-traumatic stress disorder or PTSD?
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Frequency	Percent	Value	Label
15245	97.1%	0	no
453	2.9%	1	yes
3	0.0%	6	refused

***If Q.5I not equal 1, then skip to Q.5J***

<b>H4ID6I</b>		float	6I. How old were you when the doctor, nurse or other health practitioner diagnosed you with post-traumatic stress disorder? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
1	0.0%	1	1 year
2	0.0%	2	2 years
1	0.0%	4	4 years
1	0.0%	5	5 years
1	0.0%	6	6 years
409	2.6%	7-28	NOTE: Range of values omitted from display
18	0.1%	29	29 years
13	0.1%	30	30 years
6	0.0%	31	31 years
1	0.0%	32	32 years
15248	97.1%	97	legitimate skip

<b>H4ID5J</b>		float	5J. Has a doctor, nurse or other health care provider ever told you that you have or had: anxiety or panic disorder?
Frequency	Percent	Value	Label
13872	88.4%	0	no
1827	11.6%	1	yes
2	0.0%	6	refused

***If Q.5J not equal 1, then skip to Q.5K***

<b>H4ID6J</b>		float	6J. How old were you when the doctor, nurse or other health practitioner diagnosed you with anxiety or panic disorder? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
1	0.0%	0	0 years
19	0.1%	2	2 year
2	0.0%	4	4 years
4	0.0%	5	5 years
1	0.0%	6	6 years
1766	11.2%	7-30	NOTE: Range of values omitted from display
25	0.2%	31	31 years
2	0.0%	32	32 years
1	0.0%	96	refused
13874	88.4%	97	legitimate skip
6	0.0%	98	don't know

<b>H4ID5K</b>		float	5K. Has a doctor, nurse or other health care provider ever told you that you have or had: epilepsy or another seizure disorder?
Frequency	Percent	Value	Label
15480	98.6%	0	no
219	1.4%	1	yes
2	0.0%	6	refused

***If Q.5K not equal 1, then skip to Q.5L***

<b>H4ID6K</b>		float	6K. How old were you when the doctor, nurse or other health practitioner diagnosed you with epilepsy or another seizure disorder? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
5	0.0%	0	0 years
17	0.1%	1	1 year

8	0.1%	2	2 years
8	0.1%	3	3 years
6	0.0%	4	4 years
163	1.0%	5-28	NOTE: Range of values omitted from display
4	0.0%	29	29 years
3	0.0%	30	30 years
1	0.0%	31	31 years
15482	98.6%	97	legitimate skip
4	0.0%	98	don't know

<b>H4ID5L</b>		float	5L. Has a doctor, nurse or other health care provider ever told you that you have or had: attention problems or ADD or ADHD?
Frequency	Percent	Value	Label
14924	95.1%	0	no
775	4.9%	1	yes
2	0.0%	6	refused

***If Q.5L not equal 1, then skip to Q.5M***

<b>H4ID6L</b>		float	6L. How old were you when the doctor, nurse or other health practitioner diagnosed you with attention problems or ADD or ADHD? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
3	0.0%	1	1 year
8	0.1%	2	2 years
4	0.0%	3	3 years
10	0.1%	4	4 years
47	0.3%	5	5 years
677	4.3%	6-29	NOTE: Range of values omitted from display
13	0.1%	30	30 years

1	0.0%	31	31 years
1	0.0%	32	32 years
14926	95.1%	97	legitimate skip
11	0.1%	98	don't know

<b>H4ID5M</b>		float	5M. Has a doctor, nurse or other health care provider ever told you that you have or had: HIV/AIDS?
Frequency	Percent	Value	Label
15487	98.6%	0	no
19	0.1%	1	yes
193	1.2%	5	not asked
2	0.0%	6	refused

***If Q.5M not equal 1, then skip to Q.5N***

<b>H4ID6M</b>		float	6M. How old were you when the doctor, nurse or other health practitioner diagnosed you with HIV/AIDS? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
1	0.0%	5	5 years
1	0.0%	12	12 years
1	0.0%	13	13 years
2	0.0%	18	18 years
1	0.0%	19	19 years
10	0.1%	20-25	NOTE: Range of values omitted from display
1	0.0%	26	26 years
1	0.0%	29	29 years
1	0.0%	30	30 years
193	1.2%	95	not asked
15489	98.6%	97	legitimate skip

<b>H4ID5N</b>		float	5N. Has a doctor, nurse or other health care provider ever told you that you have or had: Hepatitis C?
Frequency	Percent	Value	Label
15476	98.6%	0	no
30	0.2%	1	yes
193	1.2%	5	not asked
2	0.0%	6	refused

***If Q.5N not equal 1, then skip to Q.7***

<b>H4ID6N</b>		float	6N. How old were you when the doctor, nurse or other health practitioner diagnosed you with Hepatitis C? NOTE: Smallest 5 and largest 5 values are displayed.
Frequency	Percent	Value	Label
1	0.0%	4	4 years
1	0.0%	5	5 years
1	0.0%	14	14 years
2	0.0%	16	16 years
1	0.0%	17	17 years
19	0.1%	19-27	NOTE: Range of values omitted from display
1	0.0%	28	28 years
3	0.0%	29	29 years
1	0.0%	30	30 years
193	1.2%	95	not asked
15478	98.6%	97	legitimate skip

<b>H4ID7</b>		float	7. In the past 12 months, have you suffered any serious injuries? For example, broken bones, cuts or lacerations, burns, torn muscles, tendons or ligaments, or other injuries that interfered with your ability to perform daily tasks.
Frequency	Percent	Value	Label
13646	86.9%	0	no

2053	13.1%	1	yes
1	0.0%	6	refused
1	0.0%	8	don't know

<b>H4ID8</b>		float	8. In the past 12 months, were you involved in a motor vehicle accident?
Frequency	Percent	Value	Label
14097	89.8%	0	no
1603	10.2%	1	yes
1	0.0%	8	don't know

<b>H4ID9A</b>		float	9A. Have you had gum disease (gingivitis; periodontal disease) or tooth loss because of cavities in the last four weeks?*
Frequency	Percent	Value	Label
15209	96.9%	0	no
489	3.1%	1	yes
2	0.0%	6	refused
1	0.0%	8	don't know

<b>H4ID9B</b>		float	9B. Have you had active infection in the last four weeks?*
Frequency	Percent	Value	Label
15188	96.7%	0	no
511	3.3%	1	yes
2	0.0%	6	refused

<b>H4ID9C</b>		float	9C. Have you had injury in the last four weeks?*
Frequency	Percent	Value	Label
15145	96.5%	0	no
554	3.5%	1	yes
2	0.0%	6	refused

<b>H4ID9D</b>		float	9D. Have you had acute illness in the last four weeks?*
Frequency	Percent	Value	Label
15435	98.3%	0	no
264	1.7%	1	yes
2	0.0%	6	refused

<b>H4ID9E</b>		float	9E. Have you had surgery in the last four weeks?*
Frequency	Percent	Value	Label
15385	98.0%	0	no
314	2.0%	1	yes
2	0.0%	6	refused

<b>H4ID9F</b>		float	9F. Have you had active seasonal allergies (hay fever) in last four weeks?*
Frequency	Percent	Value	Label
13306	84.7%	0	no
2393	15.2%	1	yes
2	0.0%	6	refused

<b>H4ID9G</b>		float	9G. Have you had none of the above in the last four weeks?*
Frequency	Percent	Value	Label
4016	25.6%	0	no
11683	74.4%	1	yes
2	0.0%	6	refused

<b>H4ID10A</b>		float	10A. Have you had cold or flu-like symptoms such as sore throat, runny nose, or cough in the last two weeks?*
Frequency	Percent	Value	Label
12211	77.8%	0	no

3489	22.2%	1	yes
1	0.0%	6	refused

<b>H4ID10B</b>		float	10B. Have you had fever in the last two weeks?*
Frequency	Percent	Value	Label
15033	95.7%	0	no
667	4.2%	1	yes
1	0.0%	6	refused

<b>H4ID10C</b>		float	10C. Have you had night sweats in the last two weeks?*
Frequency	Percent	Value	Label
15065	95.9%	0	no
635	4.0%	1	yes
1	0.0%	6	refused

<b>H4ID10D</b>		float	10D. Have you had nausea or vomiting or diarrhea in the last two weeks?*
Frequency	Percent	Value	Label
14421	91.8%	0	no
1279	8.1%	1	yes
1	0.0%	6	refused

<b>H4ID10E</b>		float	10E. Have you had blood in stool (feces) or in urine in the last two weeks?*
Frequency	Percent	Value	Label
15566	99.1%	0	no
134	0.9%	1	yes
1	0.0%	6	refused

<b>H4ID10F</b>		float	10F. Have you had frequent urination in the last two weeks?*
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Frequency	Percent	Value	Label
15132	96.4%	0	no
568	3.6%	1	yes
1	0.0%	6	refused

<b>H4ID10G</b>		float	10G. Have you had skin rash or abscess in the last two weeks?*
Frequency	Percent	Value	Label
15168	96.6%	0	no
532	3.4%	1	yes
1	0.0%	6	refused

<b>H4ID10H</b>		float	10H. Have you had none of the above in the last two weeks?*
Frequency	Percent	Value	Label
5319	33.9%	0	no
10381	66.1%	1	yes
1	0.0%	6	refused

<b>H4ID11</b>		float	11. Regarding your current medication use: In the past 24 hours, have you taken aspirin or aspirin-containing medications including cold and allergy medications or headache powders? Do not include acetaminophen for example, Tylenol, or ibuprofen, for example, Advil, Motrin or Nuprin. Some examples of aspirin-containing medications include: Anacin, Aspirin, B C.Backache Relief Extra Strength, Bayer, Excedrin, Goody's™, Pain Relief, Pain Reliever Added Strength, Vanquish
Frequency	Percent	Value	Label
13302	84.7%	0	no
2392	15.2%	1	yes
1	0.0%	6	refused
6	0.0%	8	don't know

<b>H4ID12</b>		float	12. In the past 24 hours, have you taken other anti-inflammatory medications? Do not include acetaminophen, for example, Tylenol or
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			aspirin-containing medications. Some examples of those include: Advil, Aleve, Ibuprofen, Motrin, Naproxen, Nuprin
Frequency	Percent	Value	Label
12723	81.0%	0	no
2972	18.9%	1	yes
1	0.0%	6	refused
5	0.0%	8	don't know

<b>H4ID13</b>		float	13. Do you have total blindness in one or both eyes?
Frequency	Percent	Value	Label
15615	99.5%	2	no
61	0.4%	3	yes, one eye
24	0.2%	4	yes, both eyes
1	0.0%	6	refused

***If Q.13 = 4, then skip to Q.16***

<b>H4ID14</b>		float	14. Do you use eyeglasses, contact lenses, both, or neither for vision correction?
Frequency	Percent	Value	Label
3519	22.4%	1	eyeglasses
952	6.1%	2	contact lenses
2844	18.1%	3	both
8359	53.2%	4	neither
3	0.0%	6	refused
24	0.2%	7	legitimate skip

***If Q.14= 4, then skip to Q.16***

<b>H4ID15</b>		float	15. With eyeglasses or contact lenses, how is your eyesight?
Frequency	Percent	Value	Label

3524	22.4%	1	excellent
3211	20.5%	2	good
439	2.8%	3	fair
97	0.6%	4	poor
42	0.3%	5	very poor
3	0.0%	6	refused
8383	53.4%	7	legitimate skip
2	0.0%	8	don't know

<b>H4ID16</b>		float	16. Have you ever worn a hearing aid?
Frequency	Percent	Value	Label
15613	99.4%	0	no
88	0.6%	1	yes

<b>H4ID17</b>		float	17. Which statement best describes your hearing without a hearing aid or other assistive devices?
Frequency	Percent	Value	Label
9029	57.5%	1	excellent
5576	35.5%	2	good
883	5.6%	3	a little trouble
161	1.0%	4	moderate hearing trouble
43	0.3%	5	a lot of trouble
9	0.1%	6	deaf

<b>H4ID18</b>		float	18. Do you have a problem with stuttering or stammering?
Frequency	Percent	Value	Label
15037	95.8%	0	no
663	4.2%	1	yes
1	0.0%	8	don't know

***If Q.18 not equal 1, then skip to Q.20***

<b>H4ID19</b>		float	19. How would you describe your stuttering or stammering at this time?
Frequency	Percent	Value	Label
581	3.7%	1	mild
72	0.5%	2	moderate
9	0.1%	3	severe
1	0.0%	6	refused
15038	95.8%	7	legitimate skip

<b>H4ID20</b>		float	20. In the past 12 months have you been bothered by ringing, roaring, or buzzing in your ears or head (tinnitus) that lasts for 5 minutes or more?
Frequency	Percent	Value	Label
14701	93.6%	0	no
998	6.4%	1	yes
1	0.0%	6	refused
1	0.0%	8	don't know

***If Q.20 not equal 1, then skip to Q.23***

<b>H4ID21</b>		float	21. How long have you been bothered by this ringing, roaring, or buzzing in your ears or head?
Frequency	Percent	Value	Label
298	1.9%	1	<3 months
121	0.8%	2	3-11 months
126	0.8%	3	1-2 years
124	0.8%	4	3-4 years
124	0.8%	5	5-9 years
66	0.4%	6	10-14 years

133	0.8%	7	15 years or more
14703	93.6%	97	legitimate skip
6	0.0%	98	don't know

<b>H4ID22</b>		float	22. In the past 12 months, how often have you had this ringing, roaring, or buzzing in your ears or head?
Frequency	Percent	Value	Label
178	1.1%	1	almost always
134	0.9%	2	at least once a day
207	1.3%	3	at least once a week
161	1.0%	4	at least once a month
317	2.0%	5	less frequently than once a month
14703	93.6%	7	legitimate skip
1	0.0%	8	don't know

<b>H4ID23</b>		float	23. In the past 12 months, have you had any problem with your voice? By any problem, we mean was there any time when your voice was hoarse, raspy, breathy, weak, or, generally, did not work, perform, or sound as you feel it normally would?*
Frequency	Percent	Value	Label
12592	80.2%	0	no
2186	13.9%	1	yes, but the problem only lasted 1 or 2 days
869	5.5%	2	yes, and the problem lasted 3 or more days
47	0.3%	3	yes, but unknown - how long lasted
1	0.0%	6	refused
6	0.0%	8	don't know

***If Q.23 not equal 2,3, then skip to next section***

<b>H4ID24</b>		float	24. In the past 12 months, how often has your voice been hoarse, raspy, or breathy?*
Frequency	Percent	Value	Label

94	0.6%	0	none
343	2.2%	1	1 or 2 days in the past 12 months
289	1.8%	2	once a month or less (3-12 days in the past 12 months)
80	0.5%	3	2 or 3 days a month
29	0.2%	4	1 or 2 days a week
49	0.3%	5	3 to 5 days a week
30	0.2%	6	every day, or almost every day
14785	94.2%	97	legitimate skip
2	0.0%	98	don't know

<b>H4ID25</b>		float	25. In the past 12 months, how often have you had difficulty being heard or trouble projecting your voice?*
Frequency	Percent	Value	Label
452	2.9%	0	none
222	1.4%	1	1 or 2 days in the past 12 months
156	1.0%	2	once a month or less (3-12 days in the past 12 months)
23	0.1%	3	2 or 3 days a month
23	0.1%	4	1 or 2 days a week
20	0.1%	5	3 to 5 days a week
19	0.1%	6	every day, or almost every day
14785	94.2%	97	legitimate skip
1	0.0%	98	don't know

<b>H4ID26</b>		float	26. How often does a problem with your voice affect your personal, social, or working (professional) life?*
Frequency	Percent	Value	Label
635	4.0%	0	none
149	0.9%	1	1 or 2 days in the past 12 months
82	0.5%	2	once a month or less (3-12 days in the past 12 months)

17	0.1%	3	2 or 3 days a month
8	0.1%	4	1 or 2 days a week
9	0.1%	5	3 to 5 days a week
15	0.1%	6	every day, or almost every day
14785	94.2%	97	legitimate skip
1	0.0%	98	don't know

**\*H4ID9A-N, H4ID10A-G**

Break off questions that were asked again in cases where at least 24 hours elapsed between the time the questions were first asked and the time of the biomarker collection.

**\*H4ID23**

Pretest allowed only yes/no responses so another category was created for 'yes, but unknown - how long lasted'.

**\*H4ID24, H4ID25, H4ID26**

These are the response categories as they were displayed in the PRETEST vs the MAIN study.

PRETEST	MAIN
Always	None
Usually	1 or 2 days in the past 12 months
Halftime	Once a month or less (3-12 days in the past 12 months)
Seldom	2 or 3 days a month
Never	1 or 2 days a week
	3 to 5 days a week
	Every day, or almost every day

**Resolution of pretest responses**

never = none

always = every day

usually = 3-5 d/wk

halftime = 1 or 2 d/wk

seldom = 1 or 2 days in the past 12 months (based on the most frequent response in main study among the responses '1 or 2 days in the past 12 months', 'once a month or less', '2 or 3 days a month')