APPENDIX III. QUESTIONNAIRE

The items below show the exact content and wording of the basic questionnaire used in the nationwide household survey of the U.S. National Health Survey. The actual questionnaire is designed for a household as a unit and includes additional spaces for reports on more than one person, condition, accident, or hospitalization. Such spaces are omitted in this illustration.

NOTICE – All information which would permit identification of the individual will be held in strict confidence, will be used only by persons engaged in and for the purposes of the survey, and will not be disclosed or released to others for any purposes.

BUDGET BUREAU NO. 68-R1600
APPROVAL EXPIRES MARCH 31, 1970

FORM HIS-1 (1969)
(11-6-68)
U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
ACTING AS COLLECTING AGENT FOR THE
U.S. PUBLIC HEALTH SERVICE

U.S. HEALTH INTERVIEW SURVEY

1. PSU	2a. Segment number	2b. Segment type (A, B, P, LSDP)	3. Serial number	4. Sample (B–)	5. R.O. number	6. I.D. code	7.
							Book ____ of ____ Books

8. Street address *(House No., Street, Apt. No. or other identification)*

City | State | ZIP code

Segment | Sheet No. ____ | Line No. ____

9. Year built – If "Ask" box is "X"d, complete this item **before** the interview
☐ Ask ☐ Do not ask
When was this structure originally built?
☐ Before 4-1-60 *Continue interview*
☐ After 4-1-60 *Go to Q. 13c, complete if required and end interview*

10. **What is your mailing address?** ☐ Same as 8

City | State | ZIP code

11. Special dwelling place name | Type

Description of sample unit *(Room No., Bed No., etc.)* | Sample unit number | Type code

12. Type of living quarters → 1☐ Housing unit 2☐ Other unit

13. Ask:
☐ a. **Are there any occupied or vacant living quarters besides your own in this building?**
☐ Yes *(fill Table X)* ☐ No
☐ b. **Are there any occupied or vacant living quarters besides your own on this floor?**
☐ Yes *(fill Table X)* ☐ No
☐ c. **Is there any other building on this property for people to live in – either occupied or vacant?**
☐ Yes *(fill Table X)* ☐ No
☐ d. None *(item L)*

Urban-rural 1 ☐ Rural *(14)* 1☐ All other *(16)*

14. **Do you own or rent this place?** ☐ Own *(15a)* ☐ Rent *(15b)* ☐ Rent free *(15a)*

15a. (Own or rent free) **Does this place have 10 or more acres?**
b. (Rent) **Does the place you rent have 10 or more acres?**
☐ Yes *(15c)* ☐ No *(15d)*

c. **During the past 12 months did sales of crops, livestock, and other farm products from the place amount to $50 or more?** 2☐ Yes *(16)* 4☐ No *(16)*

d. **During the past 12 months did sales of crops, livestock, and other farm products from the place amount to $250 or more?** 3☐ Yes 5☐ No

16. **What is the telephone number here?** _____ 2☐ None

17. **Was this interview observed?** 1☐ Yes 2☐ No

18. Interviewer's name | Code

Footnotes

19. Noninterview reason

TYPE A
1☐ Refusal *(Describe in a footnote)*
2☐ No one at home – repeated calls
3☐ Temporarily absent
4☐ Other *(Specify)* ↘

TYPE B
1☐ Vacant – nonseasonal 2☐ Vacant – seasonal
3☐ Usual residence elsewhere
4☐ Armed Forces
5☐ Other *(Specify)* ↘

TYPE C
1☐ Demolished 2☐ In sample by mistake
3☐ Eliminated in sub-sample
4☐ Built after April 1, 1960
5☐ Other *(Specify)* ↘

20. Record of calls at household

Item			1	Com.	2	Com.	3	Com.	4	Com.	5	Com.	6	Com.
Entire household		Date												
		Beginning time												
		Ending time												
Record of return calls for individual respondents	Person No. ____	Date												
		Beginning time												
		Ending time												
	Person No. ____	Date												
		Beginning time												
		Ending time												