

HOSPITAL PAGE

	1.	Person number _____
You said that --- was in the hospital (nursing home) during the past year.	2.	USE YOUR CALENDAR Make sure the YEAR is correct
		Month _____ Day _____ Year 19 _____
2. When did -- enter the hospital (nursing home) (the last time)?	3.	Name _____
		Street _____
		City (or county) _____
		State _____
3. What is the name and address of this hospital (nursing home)?	4.	_____ Nights
4. How many nights was -- in the hospital (nursing home)?	5a.	_____ Nights
Complete question 5 from entries in questions 2 and 4; if not clear, ask the questions.	b.	_____ Nights
5a. How many of these -- nights were during the past 12 months?	c.	Y N
b. How many of these -- nights were during the past 2 weeks?		
c. Was -- still in the hospital (nursing home) last Sunday night for this hospitalization (stay)?		

