

HCSUS 2nd Follow-up
6. Utilization
Section G: Other Health Care Visits

INTERVIEWER: RECORD TIME THIS SECTION BEGINS HERE: ,,.,,A.M./P.M.

IF A5<> 1, GO TO G11

G1. You told me you received care from another kind of medical practitioner. Since we last interviewed you on FU1DATE, have you visited an optometrist?

YES..... 1 (G06G01)
NO 2

IF G1 <> 1, GO TO G3

G2. How many visits since FU1DATE have you made to an optometrist?

” (G06G02)
Valid Values: 1-52
Soft Check: 53-99

G3. Since FU1DATE, did you visit a foot doctor?

YES..... 1 (G06G03)
NO 2

IF G3 <> 1, GO TO G5

G4. How many visits (since FU1DATE) have you made to a foot doctor?

” (G06G04)
Valid Values: 1-52
Soft Check: 53-99

HCSUS 2nd Follow-up
6. Utilization

G5. Since FU1DATE, did you visit a nutritionist?

YES..... 1 (G06G05)
NO 2

IF G5 <> 1, GO TO G7

G6. How many visits (since FU1DATE) have you made to a nutritionist?

” (G06G06)
Valid Values: 1-52
Soft Check: 53-99

G7. Since FU1DATE did you visit a chiropractor?

YES..... 1 (G06G07)
NO 2

IF G7 <> 1, GO TO G9

G8. How many visits (since FU1DATE) have you made to a chiropractor?

” (G06G08)
Valid Values: 1-52
Soft Check: 53-99

G9. Since FU1DATE did you visit some other practitioner?

YES..... 1 (G06G09)
NO 2

IF G9 <> 1, GO TO G11

HCSUS 2nd Follow-up

6. Utilization

G10. How many visits (since FU1DATE) have you made to some other practitioner?

””

(G06G10)

Valid Values: 1-52

Soft Check: 53-99

IF A6 <> 1, GO TO G12

G11. You said you visited alternative therapists such as practitioners of holistic medicine, massage therapists, acupuncturists, or herbalists. How many visits to alternative therapists did you make since we last interviewed you on FU1DATE?

””

(G06G11)

Valid Values: 1-52

Soft Check: 53-99

IF A7 <> 1, GO TO SECTION H

G12. (HAND CARD #29)

You told me you bought or replaced some medical equipment since FU1DATE. What kind of equipment did you buy or replace?

EYEGLASSES/CONTACT LENSES.....	1	(G06G1201)
CANE.....	2	(G06G1202)
WHEELCHAIR/WALKER	3	(G06G1203)
HOSPITAL BED	4	(G06G1204)
NEBULIZER	5	(G06G1205)
OTHER MEDICAL EQUIPMENT	6	(G06G1206)