

FALLS AND BALANCE INTERVIEW AND QUESTIONNAIRE.

Sections 1 and 2 are sleep-technician computer-assisted interviews.

**SECTION 1: BALANCE INTERVIEW—Questions prefixed “BAQ”
(FROM NHANES 2003-2004 “BALANCE” QUESTIONNAIRE)**

BAQ.010 During the **past 12 months**, have you had dizziness, difficulty with balance or difficulty with falling? past12_falling_ynr

YES..... Y
 NO..... N (BAQ.070)
 REFUSED..... R (BAQ.070)
 DON'T KNOW..... D (BAQ.070)

BAQ.020 Which of these problems have you had... CAPI INSTRUCTION: TEXT OF QUESTION SHOULD BE OPTIONAL AFTER THE FIRST TIME.	BAQ.030 How long did the . . . last? Would you say less than 2 weeks, 2 weeks to 3 months or more than 3 months?
a. dizziness? YES..... Y (ask question to right) _> NO..... N (goto b) REFUSED..... R (goto b) DON'T KNOW D (goto b)	Dizziness LESS THAN 2 WEEKS..... 1 (goto b) 2 WEEKS TO 3 MONTHS..... 2 (goto b) MORE THAN 3 MONTHS..... 3 (goto b) REFUSED..... R (goto b) DON'T KNOW..... D (goto b)
b. difficulty with balance? YES..... Y (ask question to right) _> NO..... N (goto c) REFUSED..... R (goto c) DON'T KNOW D (goto c)	difficulty with balance LESS THAN 2 WEEKS..... 1 (goto c) 2 WEEKS TO 3 MONTHS..... 2 (goto c) MORE THAN 3 MONTHS..... 3 (goto c) REFUSED..... R (goto c) DON'T KNOW..... D (goto c)
c. difficulty with falling? YES..... Y REFUSED..... R NO..... N DON'T KNOW D	

BAQ.040 Do you get dizzy when you turn over in bed?

YES..... Y
 NO..... N
 REFUSED..... R
 DON'T KNOW..... D

BAQ.060 Which of the things on this list, if any, were related to your dizziness or balance problem?
CODE ALL THAT APPLY

DISPLAY TABLE

A COLD OR THE FLU.....	YNRD
INJURIES OR ACCIDENTS.....	YNRD
USE OF DRUGS OR MEDICATIONS....	YNRD

AGE OR GETTING OLDER.....	YNRD	SURGERY.....
YNRD		
HEARING PROBLEMS, INCLUDING		
RINGING IN THE EARS.....	YNRD	
VISION OR SEEING PROBLEMS..	YNRD	

BAQ.070 Have you **ever** been treated by a doctor or other health professional for dizziness, a balance problem, or falling?

YES..... Y NO..... N

(BAQ.100)

REFUSED..... R(BAQ.100)

DON'T KNOW..... D (BAQ.100)

BAQ.075 How long ago were you treated? Would you say . . .

less than 1 year ago,..... 1

1 year to 5 years ago, or..... 2

5 years or more ago?..... 3

REFUSED..... R

DON'T KNOW..... D

BAQ.080 Did this treatment involve. . .

RESPONSES: YES = Y, NO = N, REFUSED = R, DON'T KNOW = D.

a. **medication?** _____

b. **surgery to the ear?** _____

c. **some other type of surgery?** _____

d. **exercises or physical therapy?** _____

BAQ.090 As a result of this treatment did your condition. . .

get better,..... 1

get worse, or..... 2

stay the same?..... 3

REFUSED..... R

DON'T KNOW..... D

SECTION 2: GENERAL FALLS INTERVIEW—Questions prefixed “BAL”
 (FROM NHIS 2008 “ADULT BALANCE AND DIZZINESS” QUESTIONNAIRE)

BAL.390_00.000 These next questions are about falls or falling. By falls or falling, we mean unexpectedly dropping to the floor or ground from a standing, walking or bending position. DURING THE PAST 5 YEARS have you fallen at least one time?

Y Yes (NEXT)

N No (QUIT)

R Refused (QUIT)

D Don't Know (QUIT)

SkipInstructions: <1> if all BTYPE_01-BTYPE_06 = N,R,D goto BFALL12

<N,R,D> DONE WITH BALANCE/FALLS INTERVIEW

(BFALL12)

BAL.410_00.000 DURING THE PAST 12 MONTHS, have you fallen at least once a month on average?

Y Yes (NEXT)

N No (Goto BFTIME)

R Refused (Goto BFTIME)

D Don't Know (Goto BFTIME)

SkipInstructions: < Y> go to BF12_NO] <N, R,D> [goto BFTIME]

(BF12_NO)

BAL.420_01.000 DURING THE PAST 12 MONTHS, about how many times per day, week, or month have you fallen?

0 (Goto BINJ)

001-199 1-199 (Next)

R Refused (Goto BINJ)

D Don't Know (Next)

SkipInstructions: <1-199,D> [goto BF12_TP] <R> [goto BINJ]

(BF12_TP)

BAL.420_02.000 * Enter time period for time fallen.

1 Day (Goto BINJ)

2 Week (Goto BINJ)

3 Month (Goto BINJ)

R Refused (Goto BINJ)

D Don't Know (Goto BINJ)

SkipInstructions: If (BF12_NO ge 10 and BF12_TP='1'), then [goto ERR_BF12_TP]; If (BF12_NO ge 50 and BF12_TP='2'), then [goto ERR_BF12_TP]; If (BF12_NO ge 200 and BF12_TP='3'), then [goto ERR_BF12_TP]; <1-3,R,D> [goto BINJ]

(BFTIME)

BAL.430_00.000 DURING THE PAST 12 MONTHS, how many times have you fallen?

*Read if necessary. If unsure, estimate as best you can.

0 None

1 1 time

2 2 times

3 3-4 times

4 5-7 times

5 8 or more times

R Refused

D Don't Know

SkipInstructions: <0> [goto next section <1-5, R,D> [goto BINJ]

(BINJ)

BAL.440_00.000 DURING THE PAST 12 MONTHS, did you have an injury as a result of a fall? For example, with a bruise, cut or wound, sprain, dislocation, fracture, broken bones, back pain, head or neck injury.

Y Yes (Next)

N No (Goto BFWHY_01)

R Refused (Goto BFWHY_01)

D Don't Know (Goto BFWHY_01)

SkipInstructions: <1> [goto BIJMS_NO] <N, R,D> [goto BFWHY_01]

(BIJMS_NO)

BAL.450_01.000 DURING THE PAST 12 MONTHS, how many days of work did you miss because of injury from falls? Please tell me the number of days, weeks, or months.

* Enter 'U' if doesn't work.

0 (Goto BFWHY_02)

1-365 (Goto BIJMS_TP)

U Doesn't work (Goto BFWHY_02)

R Refused (Goto BFWHY_02)

D Don't Know (Goto BFWHY_02)

SkipInstructions: <1-365, D > [goto BIJMS_TP] <0, R, U> [goto BFWHY_01]

(BIJMS_TP)

BAL.450_02.000 * Enter time period for time missed work.

1 Days (Next)

2 Weeks (Next)

3 Months (Next)

R Refused (Next)

SkipInstructions: <1-3, R,D> [goto BFWHY_01]

(BFWHY_01)

BAL.460_01.000 Have you fallen during the past 12 months due to any of the following reasons?

Please say yes or no to each.

...You tripped or stumbled

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_02]

(BFWHY_02)

BAL.460_02.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You slipped

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_03]

(BFWHY_03)

BAL.460_03.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You hurried too much

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_04]

(BFWHY_04)

BAL.460_04.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You were not paying attention

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_05]

(BFWHY_05)

BAL.460_05.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You had nothing to hold onto

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_06]

(BFWHY_06)

BAL.460_06.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You blacked out or fainted

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_07]

(BFWHY_07)

BAL.460_07.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You lost your balance

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_08]

(BFWHY_08)

BAL.460_08.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You were knocked over by someone or something

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_09]

(BFWHY_09)

BAL.460_09.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You were playing sports or exercising

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_10]

(BFWHY_10)

BAL.460_10.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You had a problem with hearing

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_11]

(BFWHY_11)

BAL.460_11.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You had a problem with vision

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_12]

(BFWHY_12)

BAL.460_12.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You were getting up after sitting or lying down

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_13]

(BFWHY_13)

BAL.460_13.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You were walking up or down stairs

* If respondent is unable to do this activity for reasons OTHER than dizziness or balance, Enter '2'

Examples include respondents who are in a wheelchair, are deaf, blind, don't have a driver's license, etc.

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_14]

(BFWHY_14)

BAL.460_14.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You had slow reactions or reflexes

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_15]

(BFWHY_15)

BAL.460_15.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You had weakness or numbness in one or both legs

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_16]

(BFWHY_16)

BAL.460_16.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You had not eaten recently or you had low blood sugar

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_17]

(BFWHY_17)

BAL.460_17.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You had a problem with medicine

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_18]

(BFWHY_18)

BAL.460_18.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You drank too much alcohol

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_19]

(BFWHY_19)

BAL.460_19.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You had a problem using a walker, cane, or other aid that helps you get around

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_20]

(BFWHY_20)

BAL.460_20.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You had a problem with shoes, sandals or socks

Y Yes

N No
R Refused
D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_21]

(BFWHY_21)

BAL.460_21.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...You had a health condition

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto BFWHY_22]

(BFWHY_22 We decided to omit this question.

BAL.460_22.000 * Read if necessary. Have you fallen during the past 12 months due to any of the following reasons? Please say yes or no to each.

...Some other reason

Y Yes

N No

R Refused

D Don't Know

SkipInstructions: <Y,N R,D> [goto next section]