NHATS Round 8

	RH	[Rehabilitation]	Sequence: 26
RH1		rh8rehab	R8 RH1 RECEIVED REHAB IN LAST YEAR
	ISTRUCTIONS	: " in underlined text.	
QUESTION	TEXT:		
	activities. So received in o	ervices include physical therapy, occu	Ip you improve function and the ability to carry out daily pational therapy, and speech therapy. Rehab can be you are staying in the hospital, after a hospital stay in a erapist's office or clinic, or at home.
	In the last ye	ear, {have you/has SP} received any re	hab services?
CODES			
1		YES	
2		NO	
		REFUSED	
		DON'T KNOW	
BOX RH	11	BOX RH1	NOT ON FILE
	If RH1=1 (YE	ES) go to RH1A.	
	Otherwise,	go to Section SD – Smoking.	
RH1A	Otherwise,	go to Section SD – Smoking. rh8rehabmo	R8 RH1A MONTHS OF REHAB
DISPLAY	INSTRUCTION splay "last yea TEXT: In the last ye	rh8rehabmo	ether did {you/SP} receive rehab services?
DISPLAY Di	INSTRUCTION splay "last yea TEXT: In the last ye	rh8rehabmo	
DISPLAY Di	INSTRUCTION splay "last yea TEXT: In the last ye	rh8rehabmo	ether did {you/SP} receive rehab services?
DISPLAY Di QUESTION CODES 1	INSTRUCTION splay "last yea TEXT: In the last ye	rh8rehabmo	ether did {you/SP} receive rehab services? hs, four to five months, or six or more months?
DISPLAY Di QUESTION CODES 1 2	INSTRUCTION splay "last yea TEXT: In the last ye	rh8rehabmo IS: ar" in underlined text. ear, for about how many months altog ss than one month, one to three mont LESS THAN 1 MONTH 1 TO 3 MONTHS	ether did {you/SP} receive rehab services? hs, four to five months, or six or more months? RH2
DISPLAY Di QUESTION CODES 1 2 3	INSTRUCTION splay "last yea TEXT: In the last ye	rh8rehabmo	ether did {you/SP} receive rehab services? hs, four to five months, or six or more months? RH2 RH2
DISPLAY Di QUESTION CODES 1 2	INSTRUCTION splay "last yea TEXT: In the last ye	rh8rehabmo	ether did {you/SP} receive rehab services? hs, four to five months, or six or more months? RH2 RH2 RH2 RH2
DISPLAY Di QUESTION CODES 1 2 3	INSTRUCTION splay "last yea TEXT: In the last ye	rh8rehabmo	ether did {you/SP} receive rehab services? hs, four to five months, or six or more months? RH2 RH2 RH2 RH2 RH2
DISPLAY Di QUESTION CODES 1 2 3	INSTRUCTION splay "last yea TEXT: In the last ye	rh8rehabmo	ether did {you/SP} receive rehab services? hs, four to five months, or six or more months? RH2 RH2 RH2 RH2
DISPLAY Di QUESTION CODES 1 2 3	INSTRUCTION splay "last yea TEXT: In the last ye	rh8rehabmo	ether did {you/SP} receive rehab services? hs, four to five months, or six or more months? RH2 RH2 RH2 RH2 RH2
DISPLAY Di QUESTION CODES 1 2 3 4 4 RH1B DISPLAY IN	INSTRUCTION splay "last yea TEXT: In the last yea Was it for les	rh8rehabmo IS: ar" in underlined text. ear, for about how many months altog ss than one month, one to three mont LESS THAN 1 MONTH 1 TO 3 MONTHS 4 TO 5 MONTHS 6 OR MORE MONTHS REFUSED DON'T KNOW	ether did {you/SP} receive rehab services? hs, four to five months, or six or more months? RH2 RH2 RH2 RH2 RH2 RH2 RH2

CODES			
1	LESS THAN 1 WEEK		
2	1 TO 2 WEEKS		
3	3 TO 4 WEEKS		
	REFUSED		
	DON'T KNOW		
RH2	rh 8 rehabsur	R8 RH2 REHAB POST SURG	JERY
DISPLAY INSTR			
	, "last year" in underlined text.		
QUESTION TEXT	:		
We	are interested in the reasons {you/SP} received rel	ab in the last year.	
Did	{you/SP} receive rehab to help {you/him/her} recov	ver following surgery?	
CODES	VEC		
1	YES	RH4	
2	NO	RH4	
	REFUSED		
	DON'T KNOW	RH4	
RH3	rh8surgcond	R8 RH3 MAIN MED CONDI	TION FOR
2		SURGERY	
DISPLAY INSTR			
	"main medical condition" in underlined text.		
QUESTION TEXT			
-	W CARD RH1		
Blog	se look at this card and tell me, what was the mair	modical condition for which (vou/SD)	had curgory?
FIEd	se look at this cald and tell me, what was the main		nau surgery:
CODES			NU
1	A FRACTURE, SPRAIN, OR INJURY		RH5
2	A HIP, KNEE OR OTHER JOINT REF		RH5
3	ANOTHER MUSCULOSKELETAL CO	-	RH5
4	A STROKE OR TIA		RH5
5	A HEART ATTACK		RH5
6	ANOTHER HEART CONDITION OR	VASCULAR F	RH5
	DISEASE	-	
7	A BREATHING CONDITION	ŀ	RH5
8		r	
-	A NEUROLOGICAL CONDITION LIF		3H5
-	A NEUROLOGICAL CONDITION LIF		RH5 RH5
9	A NEUROLOGICAL CONDITION LIF	F	

	PARKINSON'S	
9	CANCER	RH5
94	ANOTHER CONDITION (SPECIFY)	
95	NO MEDICAL CONDITION (IF VOLUNTEERED)	RH5
	REFUSED	RH5
	DON'T KNOW	RH5

CODES

QUESTION TEXT:

ENTER TEXT

LEGNTH

PROGRAMMER INSTRUCTIONS:

Go to RH5.

RH4

rh8rehabcond

R8 RH4 MAIN MED CONDITION FOR REHAB

50

DISPLAY INSTRUCTIONS:

Display "main medical condition" in underlined text.

QUESTION TEXT:

SHOW CARD RH1

Please look at this card and tell me, what was the main medical condition for which {you/SP} received rehab in the last year?

CODES

1	A FRACTURE, SPRAIN, OR INJURY	RH5
2	A HIP, KNEE OR OTHER JOINT REPLACEMENT	RH5
3	ANOTHER MUSCULOSKELETAL CONDITION	RH5
4	A STROKE OR TIA	RH5
5	A HEART ATTACK	RH5
6	ANOTHER HEART CONDITION OR VASCULAR DISEASE	RH5
7	A BREATHING CONDITION	RH5
8	A NEUROLOGICAL CONDITION LIKE MS OR PARKINSON'S	RH5
9	CANCER	RH5
94	ANOTHER CONDITION (SPECIFY)	RH5
95	NO MEDICAL CONDITION (IF VOLUNTEERED) REFUSED DON'T KNOW	RH5 RH5 RH5

RH4B

NOT ON FILE

QUESTION TEXT:

SPECIFY OTHER MEDICAL CONDITION

RH4B

ENTER TEXT

	LEGNTH	50
RH5	rh8funcback	R8 RH5 IMPROVE FUNCTION IN BACK
	rh8funchips	R8 RH5 IMPROVE FUNCTION IN HIPS
	rh8funcknees	R8 RH5 IMPROVE FUNCTION IN KNEES
	rh8funcfeet	R8 RH5 IMPROVE FUNCTION IN FEET
	rh8funchands	R8 RH5 IMPROVE FUNCTION IN HANDS
	rh8funcwrist	R8 RH5 IMPROVE FUNCTION IN WRIST
	rh8funcshold	R8 RH5 IMPROVE FUNCTION IN SHOULDERS
<i>c</i>		

rh8funchead	R8 RH5 IMPROVE FUNCTION IN HEAD
rh8funcneck	R8 RH5 IMPROVE FUNCTION IN NECK
rh8funcarms	R8 RH5 IMPROVE FUNCTION IN ARMS
rh8funclegs	R8 RH5 IMPROVE FUNCTION IN LEGS
rh8funcstom	R8 RH5 IMPROVE FUNCTION IN STOMACH
rh8funcmouth	R8 RH5 IMPROVE FUNCTION IN MOUTH
rh8funcheart	R8 RH5 IMPROVE FUNCTION IN HEART
rh8funclungs	R8 RH5 IMPROVE FUNCTION IN LUNGS (From Other Specify)
rh8funcos	R8 RH5 IMPROVE FUNCTION OTHER SPECIFY
rh8funcnotsp	R8 RH5 IMPROVE FUNCTION NO SPECIFIC PLACE

Display "where" in underlined.

QUESTION TEXT:

SHOW CARD RH2

Next, please look at this card and tell me where {you were/SP was} trying to improve function?

PROBE: Anywhere else?

SELECT ALL THAT APPLY

CODES	Code All That Apply	
1	BACK	RH6
2	HIP(S)	RH6
3	KNEES(S)	RH6
4	FEET	RH6
5	HAND(S)	RH6
6	WRIST(S)	RH6 RH6
7	SHOULDER(S)	RH6
8	HEAD	RH6
9	NECK	RH6
10	ARM(S)	RH6
11	LEG(S)	RH6
12	STOMACH	RH6
13	MOUTH OR THROAT	RH6
14	HEART	RH6
15	LUNGS	RH6
94	OTHER PLACES (SPECIFY)	RH6
95	NO SPECIFIC PLACE (IF VOLUNTEERED) REFUSED DON'T KNOW	RH6 RH6 RH6
		NIIU

PROGRAMMER INSTRUCTIONS:

Response code 95 cannot be selected in combination with any other code. Display error message "INCONSISTENT ANSWER. 'NO SPECIFIC PLACE' CANNOT BE SELECTED WITH ANY OTHER CATEGORY" when leaving the screen.

QUESTION TEXT: SPECIFY OTHER BODY STRUCTURES TARGETED BY THERAPY		
ENTER TEXT		50
RH6	rh8impchew	R8 RH6 IMPROVE CHEWING SWALLOWING
	rh8impspeak	R8 RH6 IMPROVE SPEAKING BEING
	rh8impspain	UNDERSTOOD R8 RH6 IMPROVE PAIN LEVEL
	rh8impbreath	R8 RH6 IMPROVE BREATHING
	rh8impweak	R8 RH6 IMPROVE STRENGTH
	rh8impmove	R8 RH6 IMPROVE MOVEMENT RANGE OF MOTION
	rh8impenergy	R8 RH6 IMPROVE ENERGY LEVEL
	rh8impbal	R8 RH6 IMPROVE BALANCE COORDINATION
	rh8impfall	R8 RH6 IMPROVE PROBLEMS WITH FALLS
	rh8impmemory	R8 RH6 IMPROVE MEMORY
	rh8impnone	R8 RH6 IMPROVE NONE OF THESE PROBLEMS

Display "which of these problems" in underlined text.

QUESTION TEXT:

SHOW CARD RH3

Next, please look at this card and tell me which of these problems {were you/was SP} trying to improve?

PROBE: Any others?

SELECT ALL THAT APPLY

1	DIFFICULTY CHEWING OR SWALLOWING
2	DIFFICULTY SPEAKING OR BEING UNDERSTOOD
3	PAIN LEVEL
4	PROBLEM WITH BREATHING
5	PROBLEM WITH STRENGTH (MUSCLE WEAKNESS)
6	PROBLEM WITH MOVEMENT (RANGE OF MOTION)
7	LOW ENERGY LEVEL
8	PROBLEM WITH BALANCE OR COORIDNATION
9	PROBLEM WITH FALLS

PROBLEM WITH MEMORY
NONE OF THESE PROBLEMS
REFUSED
DON'T KNOW

RH6B	rh8impbed	R8 RH6B IMPROVE GETTING OUT OF BED
	rh8impwalk	R8 RH6B IMPROVE WALKING INSIDE HOME
	rh8impleave	R8 RH6B IMPROVE LEAVING HOME
	-	OUTSIDE
	rh8impdistnc	R8 RH6B IMPROVE WALKING DISTANCES
	•	OUTSIDE
	rh8impclimb	R8 RH6B IMPROVE CLIMBING STAIRS
	rh8impdrive	R8 RH6B IMPROVE DRIVING
	rh8imptransp	R8 RH6B IMPROVE USING OTHER
		TRANSPORTATION
	rh8impnotths	R8 RH6B IMPROVE NONE OF THESE MOBIL ACT

Display "which of these" in underlined text.

QUESTION TEXT:

10 95

SHOW CARD RH4

Sometimes rehab focuses on improving ways of moving or getting around. Please look at this card and tell me which of these {were you/was SP} trying to improve?

PROBE: Any others?

SELECT ALL THAT APPLY

CODES	Code All That Apply
1	GETTING OUT OF BED
2	WALKING AROUND INSIDE AT HOME
3	LEAVING HOME TO GO OUTSIDE
4	WALKING DISTANCES OUTSIDE (SEVERAL
	BLOCKS)
5	CLIMBING STAIRS
6	DRIVING
7	USING OTHER FORMS OF TRANSPORTATION
95	NONE OF THESE
	REFUSED
	DON'T KNOW

RH6C

rh8impsc

mompse	
rh8imphh	R8 RH6C IMPROVE HOUSEHOLD ACTIVITIES
rh8impcomp	R8 RH6C IMPROVE USING COMPUTER TABLET
rh8impwork	R8 RH6C IMPROVE WORKING VOLUNTEERING
rh8impcare	R8 RH6C IMPROVE PROVIDING CARE

R8 RH6C IMPROVE CARING FOR SELF

rh8impactiv

rh8impactnon

R8 RH6C IMPROVE PARTICIPATING ACTIVITIES R8 RH6C IMPROVE NONE OF THESE ACTIVITIES

DISPLAY INSTRUCTIONS:

Display "which of these" in underlined text.

QUESTION TEXT:

SHOW CARD RH5 Sometimes rehab focuses on improving the ability to carry out specific activities. Please look at this card and tell me which of these activities {were you/was SP} trying to improve? PROBE: Any others? SELECT ALL THAT APPLY

1	CARING FOR SELF (WASHING UP, TOILETING, DRESSING, EATING)
2	HOUSEHOLD TASKS (SHOPPING FOR GROCERIES,
	PREPARING MEALS, DOING LAUNDRY)
3	USING A COMPUTER, LAPTOP OR TABLET
4	WORKING OR VOLUNTEERING
5	PROVIDING CARE TO SOMEONE ELSE
6	PARTICIPATING IN SOCIAL, RELIGIOUS, OR COMMUNITY
	ACTIVITIES
95	NONE OF THESE ACTIVITIES
	REFUSED
	DON'T KNOW

RH6D	rh8devcane	R8 RH6D THERAPIST RECOMMEND CANE WALKER
	rh8devwhlch	R8 RH6D THERAPIST RECOMMEND WHEELCHR SCOOTER
	rh8devramp	R8 RH6D THERAPIST RECOMMEND ENTRANCE RAMP
	rh8devstair	R8 RH6D THERAPIST RECOMMEND STAIR LIFT GLIDE
	rh8devtub	R8 RH6D THERAPIST RECOMMEND GRABBAR TUB SEAT
	rh8devtoil	R8 RH6D THERAPIST RECOMMEND GRABBAR TOIL SEAT
	rh8deveat	R8 RH6D THERAPIST RECOMMEND ADAPTED UTENSIL
	rh8devdres	R8 RH6D THERAPIST RECOMMEND DRESSING DEV
	rh8devgrab	R8 RH6D THERAPIST RECOMMEND REACHER GRABBER
	rh8devcomp	R8 RH6D THERAPIST RECOMMEND COMPUTER DEVICE
	rh8devcar	R8 RH6D THERAPIST RECOMMEND CAR DEVICE
	rh8devother	R8 RH6D THERAPIST RECOMMEND OTHER CHANGES

Use "Same Question Stem" display.

If STRUCTURE flag = 2 (MULTI-UNIT) and HO2=1 (COMMON OR SHARED ENTRANCE), do not display RH6D3.

If STRUCTURE flag = 2 (MULTI-UNIT) or HO5=1 (ONE FLOOR), do not display RH6D4.

If HO11A= 2 (NO BATHTUB) and HO11B = 1 (YES, SHOWER STALL), display "shower" in RH6D5. Else if HO11a = 1 (YES, BATHTUB) and HO11b = 2 (NO SHOWER STALL), display "tub area" in RH6D5. Otherwise, display "shower or tub area" in RH6D5.

If DROVEINLASTYEAR flag <> 1 (YES), use null display in RH6D11. Otherwise, display "or {drive/drives}" in RH6D11.

If at RH6D1, do not display question text in brackets. Otherwise, display question text in brackets.

QUESTION TEXT:

{[]Rehab therapists sometimes recommend devices or equipment to make activities easier, safer or so patients can do them on their own.

In the last year did any of {your/SP's} therapists recommend... {]}

{variable text [a – I]}

RESPONSE [1] a. a cane or walker? RESPONSE [2] b. a wheelchair or scooter? RESPONSE [3] c. a ramp at the entrance to {your/SP's} home? RESPONSE [4] d. a stair lift or stair glide? RESPONSE [5] e. a grab bar or seat in the {{shower} or {tub area}}?

IF NEEDED: A grab bar is designed to help you steady yourself. It may be attached to the wall or built into the shower or tub. Do not include towel racks. A seat includes a chair, stool, or bench used in the shower or bathtub. Some seats are placed in the shower or tub, others are built in.

RESPONSE [6] f. grab bars or a raised seat for the toilet?

IF NEEDED: A grab bar is designed to help you steady yourself. It may be attached to the wall or built into the shower or tub. Do not include towel racks.

RESPONSE [7] g. adapted utensils to help with eating or cutting up food? RESPONSE [8] h. special items to help with dressing such as buttonhooks or clothes that are designed to get on and off easily? RESPONSE [9] i. a reacher or grabber to pick up things more easily? RESPONSE [10] j. adaptive devices for a computer, laptop or tablet? RESPONSE [11] k. adaptive devices for the car that {you ride /SP rides} in{ or {drive/drives}}? RESPONSE [12] l. other changes to the home environment to help with daily tasks?

CODES

1 2 YES NO REFUSED DON'T KNOW rh8place2 rh8place3 rh8place4 R8 RH7B RECEIVE REHAB OUTPATIENT

R8 RH7C RECEIVE REHAB HOME

R8 RH7D RECEIVE REHAB SOMEWHERE ELSE

DISPLAY INSTRUCTIONS:

Use "Same Question Stem" display.

Display "where" in underlined text.

Display "overnight" in underlined text in RH7a.

Display "outpatient" in underlined text in RH7b.

If at RH7A, do not display question text in brackets. Otherwise, display question text in brackets.

QUESTION TEXT:

{[]Next, we are interested in where {you/SP} received rehab services in the last year.

In the last year, did {you/SP} receive rehab ... {]}

RESPONSE [1] a. as an overnight patient in a hospital, nursing home, or rehab facility? RESPONSE [2] b. as an outpatient at a center, clinic, or facility, or at a doctor's or therapist's office?

IF NEEDED: Outpatient means you did not stay overnight.

RESPONSE [3] c. at home? RESPONSE [4] d. somewhere else?

1	YES
2	NO
	REFUSED
	DON'T KNOW

BOX RH	I7E BOX RH7E	NOT ON FILE		
	If RH7D=1 (YES) go to RH7E. Otherwise, go to Box RH8.			
RH7E	rh8place5	R8 RH7E RECEIVE REHAB OTHER SPECIFY PLACE TYPE		
QUESTION	SPECIFY WHERE SP RECEIVED REHAB			
ENTER TEX	ENTER TEXT			
	LENGTH	50		
BOX RH	I8 BOX RH8	NOT ON FILE		
	If more than one item at RH7A-D = 1 (YES), go to RH8. Otherwise, go to RH9.			
RH8	rh8placelast	R8 RH8 PLACE LAST RECEIVED REHAB		

Display "last" in underlined text.

If RH7A = 1 (YES), display "as an overnight patient in a hospital, nursing home, or rehab facility;" and response option 1. OVERNIGHT PATIENT IN HOSPITAL, NURSING HOME, OR REHAB FACILITY.

If RH7B = 1 (YES), display "as an outpatient at a center, clinic, or facility, or at a doctor's or therapist's office;" and response option 2. OUTPATIENT AT A CENTER, CLINIC, FACILITY, DOCTOR'S OR THERAPIST'S OFFICE.

If RH₇C = 1 (YES), display "at home;" and response option 3. HOME.

If RH7D = 1 (YES), display "at {TEXT FROM RH7E}" and response option 4. SOMEWHERE ELSE.

Display "or" between places received services.

QUESTION TEXT:

Which place did {you/SP} last receive these services?

IF NEEDED: Was it {as an overnight patient in a hospital, nursing home, or rehab facility;/as an outpatient at a center, clinic, or facility, or at a doctor's or therapist's office;/at home;/at {TEXT FROM RH7E}}?

1	OVERNIGHT PATIENT IN HOSPITAL, NURSING
	HOME, OR REHAB FACILITY
2	OUTPATIENT AT A CENTER, CLINIC, FACILITY,
	DOCTOR'S OR THERAPIST'S OFFICEHOME
3	SOMEWHERE ELSE
	REFUSED
	DON'T KNOW

RH9	rh8ability	R8 RH9 FUNCTIONING IMPROVE IN REHAB
QUESTION	TEXT: While {you were/SP was} receiving rehab services in the last to do activities improve, get worse, or stay about the same?	
CODES 1 2 3 4	IMPROVED GOT WORSE STAYED ABOUT THE SAME VARIED/UP AND DOWN (IF VOLUNTEER REFUSED DON'T KNOW	RH9B RH10 ED) RH10 RH10 RH10 RH10
RH9A	rh8abilimp	R8 RH9A HOW MUCH FUNCTIONING IMPROVE IN REHAB
QUESTION	TEXT: Did it improve a lot, somewhat, or a little?	
CODES 1	A LOT	
of 12		NHATS Bound 8 ·· B

2	SOMEWHAT
3	A LITTLE
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Go to RH10.

RH9B	rh8abilworse	R8 RH9B HOW MUCH FUNCTIONING WORSE IN REHAB
QUESTION TEXT:		
Did it ge	et a lot worse, somewhat worse or a little v	vorse?
CODES		
1	A LOT	
2	SOMEWHAT	
3	A LITTLE REFUSED	
	DON'T KNOW	
RH10	rh 8 rehabnow	R8 RH10 STILL RECEIVING REHAB
DISPLAY INSTRUCT Display "stil	IONS: II" in underlined text.	
QUESTION TEXT:		
	u/Is SP} still receiving rehab services?	
CODES		
1	YES	
2	NO	
	REFUSED	
	DON'T KNOW	
BOX RH11	BOX RH11	NOT ON FILE
	=2 (NO) go to RH11.	
Otherw	ise, go to Section SD – Smoking.	
RH11	rh8metgoals	R8 RH11 MET GOALS WHEN REHAB ENDED
QUESTION TEXT:		
	/our/SP's} rehab services ended, had {you/S	P} met all or most of {your/his/her} goals?
CODES		
1	YES	
2	NO	
	REFUSED DON'T KNOW	
RH12	rh8metinsur	
	mometinsur	R8 RH12 MET INSURANCE LIMIT WHEN REHA
13		NHATS Round 8 :

ENDED

QUESTION TEXT:

When {your/SP's} rehab services ended, had {you/SP} met the limit of {your/{his/her}} insurance coverage?

C

CODES		
1	YES	
2	NO	
	REFUSED DON'T KNOW	
	DON T KNOW	
RH13	rh8abilnow	R8 RH13 FUNCTIONING IMPROVE WHEN REHAB ENDED
QUESTION		
	Since {your/SP's} rehab services ended, have {your/his/her} f	functioning and ability to do activities improved,
	got worse, or stayed about the same?	
CODES		
1	IMPROVED	2.1
2	GOT WORSE	RH15 Section SD
3	STAYED ABOUT THE SAME	
4	VARIED/UP AND DOWN (IF VOLUNTEE	Section SD
	REFUSED DON'T KNOW	Section SD
	DON T KNOW	
RH14	rh8nowimp	R8 RH14 HOW MUCH FUNCTION IMPROVE
		AFTER REHAB
QUESTION		
	Did it improve a lot, somewhat, or a little?	
CODES		
1	A LOT SOMEWHAT	
2	A LITTLE	
3	REFUSED	
	DON'T KNOW	
	MMER INSTRUCTIONS: o Section SD – Smoking.	
RH15	rh8nowworse	R8 RH15 HOW MUCH FUNCTION WORSE AFTER REHAB

QUESTION TEXT:

Did it get a lot worse, somewhat worse, or a little worse?

1	A LOT
2	SOMEWHAT

A LITTLE REFUSED DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Go to Section SD – Smoking.