
National Study of Caregiving

Section LL [LAST MONTH OF LIFE]

Sequence: 4

LL1PRE

LL1PRE

NOT ON FILE

QUESTION TEXT:

These next few questions are about the care you provided during {SP}'s last month of life.

PRESS 1 AND ENTER TO CONTINUE

LL1

cll7painhlp

C7 LL1 HELP SP MANAGE PAIN

QUESTION TEXT:

During the last month of {SP}'s life, were there times when you helped {him/her} manage {his/her} pain?

CODES

- 1 YES
 - 2 NO
REFUSED
DON'T KNOW
-

LL2

cll7brehlp

C7 LL2 HELP SP MANAGE BREATHING

QUESTION TEXT:

During the last month of {SP}'s life, were there times when you helped {him/her} manage {his/her} breathing?

CODES

- 1 YES
 - 2 NO
REFUSED
DON'T KNOW
-

LL3

cll7sadhlp

C7 LL3 HELP SP MANAGE SADNESS
ANXIETY

QUESTION TEXT:

During the last month of {SP}'s life, were there times when you helped {him/her} with feelings of anxiety or sadness?

CODES

- 1 YES
 - 2 NO
REFUSED
DON'T KNOW
-

BOX LL4

BOX LL4

NOT ON FILE

If LL1=1 (YES) or LL2=1 (YES) or LL3=1 (YES), go to LL4.
Otherwise, go to LL5.

LL4

cll7training

C7 LL4 MED PROVIDER GIVE TRAINING LML

QUESTION TEXT:

Did {SP}'s medical providers give you the training you needed to care for {him/her} in the last month of {his/her} life?

CODES

- 1 YES
- 2 NO OR NOT ENOUGH
- 3 DOES NOT APPLY
REFUSED
DON'T KNOW

LL5

cli7talkmed

C7 LL5 TALK TO SP ABOUT MEDICAL CARE

QUESTION TEXT:

During the last month of {SP}'s life, did you talk with {him/her} about the kind of medical care that {he/she} wanted or did not want?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

LL6

cli7makedecis

C7 LL6 MAKE MEDICAL DECISIONS FOR SP

QUESTION TEXT:

During the last month of {SP}'s life, did you make any medical decisions for {him/her}?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

LL7

cli7caredecis

C7 LL7 DEC ABOUT CARE WO INPUT

QUESTION TEXT:

During the last month of {SP}'s life, was there ever a decision made about {his/her} care or treatment without enough input from you?

CODES

- 1 YES
- 2 NO
REFUSED
DON'T KNOW

LL8

cli7carenowan

C7 LL8 DEC ABOUT CARE NOT WANTED

QUESTION TEXT:

During the last month of {SP}'s life, was there any decision made about care or treatment that you did not want?

CODES

- 1 YES
- 2 NO

REFUSED
DON'T KNOW

LL9**cli7respect**

C7 LL9 TREATED WITH RESPECT

QUESTION TEXT:

During the last month of {SP}'s life, how often were you treated with respect by those who were taking care of {him/her}. Would you say always, usually, sometimes, or never?

CODES

1	ALWAYS
2	USUALLY
3	SOMETIMES
4	NEVER
5	DOES NOT APPLY
	REFUSED
	DON'T KNOW

LL10**cli7informed**

C7 LL10 INFORMED ABOUT CONDITION

QUESTION TEXT:

During the last month of {SP}'s life, how often were you kept informed about {his/her} condition. Would you say always, usually, sometimes, or never?

CODES

1	ALWAYS
2	USUALLY
3	SOMETIMES
4	NEVER
5	DOES NOT APPLY
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Go to Section HC – Health Care Interactions.
