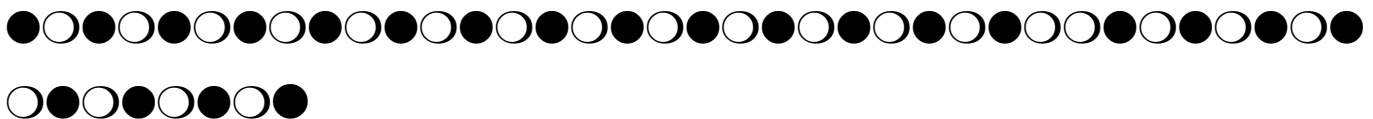


About Your Health

A Research Study Sponsored by
The National Institute on
Aging
Bethesda, Maryland

Conducted for
Dartmouth Medical School
Hanover, NH

Conducted by
The Center for Survey Research
University of Massachusetts
Boston



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All responses are confidential. No information shall be presented or published in any way that would permit identification of any individual.

Survey Instructions

- ◆ Answer all the questions by checking the box to the left of your answer.
- ◆ You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:
 - Yes → **If Yes, Go to Question A1**
 - No

Your Doctors

A1. When you answer the questions that follow, please do not include care you got when you stayed overnight in a hospital. Do not include the times you went for dental care visits.

In the last 12 months, how many times did you go to an emergency room to get care for yourself?

- None
- 1 time
- 2 times
- 3 times
- 4 times
- 5 to 9 times
- 10 or more times

A2. In the last 12 months, how many times did you go to a doctor's office or clinic to get care for yourself?

- None
- 1 time
- 2 times
- 3 times
- 4 times
- 5 to 9 times
- 10 or more times

A3. In the last 12 months, how many different doctors did you see?

- None → **If None, Go to Question A5**

_____ # of Doctors

A4. In the past 12 months, how often did doctors spend enough time with you?

- Never
- Sometimes
- Usually
- Always

A5. In the last 12 months, was there any medical care, tests, or treatment you wanted, but didn't get?

- Yes
- No

A6. Your personal doctor is the one you would see if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?

- Yes
- No → **If No, Go to Question A9**

A7. Is your personal doctor a general doctor who treats many different types of problems, or a specialist doctor who focuses on one major area or problem?

- General doctor
- Specialist doctor

A8. In the last 12 months, did you see your personal doctor?

- Yes
- No → **If No, Go to Question A9**

A8a. About how long ago did you last see your personal doctor?

- Less than 1 month ago

_____ # of Months

A9. Prescription medicine includes anything a doctor writes a prescription for.

How many different prescription medicines are you currently using?

- None → **If None, Go to Question A13**

_____ # of Medicines

A9a. In the last 12 months, did you get any prescriptions for medicines that you had not taken before?

- Yes
- No → **If No, Go to Question A11**

A10. In the last 12 months, how often did doctors explain the purposes of these new medicines in a way that was easy to understand?

- Never
- Sometimes
- Usually
- Always

A11. Do you think any of your prescription medicines are causing you any side effects?

- Yes
- No → **If No, Go to Question A13**

A12. Do any of your doctors know about these side effects?

- Yes
- No

A13. In the last 12 months, was there ever a time when you wanted to see a specialist and didn't?

- Yes
- No

A14. We want to know your rating of all your health care in the last 12 months from all doctors and other health providers.

Using any number from 0 to 10 where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care?

- 0 Worst health care possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best health care possible

Your Health Care

B1. Do you have any physical or medical conditions that often cause you pain or discomfort?

- Yes
- No → **If No, Go to Question B3**

B2. Do any of your doctors know about this pain or discomfort?

- Yes
- No

B3. Do you think the quality of the health care you received in the last 12 months was better, worse, or about the same quality as most people your age get?

- Better
- Worse
- About the same

B4. In the past 12 months, how would you describe your use of specialists?

Would you say you have seen:

- More specialists than you needed to
- Fewer specialists than you needed to
- About the right number of specialists

B5. When you are ill, would you rate your role in managing the illness as:

- More important than the doctor's
- Equally as important as the doctor's
- Less important than the doctor's

B6. How confident are you that you can manage your health conditions?

- Very confident
- Somewhat confident
- Not very confident
- I have no health conditions

B7. Are you someone who worries about health more than other people your age?

- Yes
- No

B8. Are you someone who tries to avoid going to the doctor?

- Yes
- No

B9. How important are financial issues for you when you decide whether or not to get any medical care?

- Very important
- Important
- Somewhat important
- Not important

B10. In the last 12 months, did you ask a doctor for any medical care, tests or treatments because you heard that other people were getting them?

- Yes
- No

B11. In general, do you think it is better for a patient to have one general doctor who manages most of their medical problems, or to have each problem cared for by a specialist?

- One general doctor
- Specialists

B12. When people have illnesses, how important do you think it is for them to play a large part in planning their own treatment?

- Very important
- Somewhat important
- Not important

B13. Compared to the rest of the United States, do you think people in your community get:

- More medical care
- Less medical care
- About the same amount

B14. Compared to the rest of the United States, do you think people in your community get:

- Better quality medical care
- Worse quality medical care
- About the same quality

Cancer Screening Tests

C1. If there was a kind of cancer for which nothing could be done, would you want to be tested to see if you have it?

- Yes
- No

C2. Have you ever heard about cancers that grow so slowly that they are unlikely to cause you problems in your lifetime?

- Yes
- No

C3. Would you want to be tested to see if you had a slowly growing cancer like that?

- Yes
- No

C4. Colonoscopies and sigmoidoscopies are tests where a doctor inserts a tube into the rectum to look for signs of colon cancer.

Have you ever had one of these tests?

- Yes
- No → **If No, Go to Question C5a**
- Don't know → **If Don't Know, Go to Question C5a**

C5. Doctors order these tests either as a routine check for colon cancer, or because there is some kind of problem like bleeding or pain.

Did you ever have a colonoscopy or sigmoidoscopy as a routine check for colon cancer?

- Yes → **If Yes, Go to Question C6**
- No

C5a. Would you be interested in having either a colonoscopy or sigmoidoscopy to look for signs of colon cancer?

- Yes
- No

C6. How much do you think screening for colon cancer reduces the risk of dying from colon cancer?

- A lot
- Some
- A little
- Not at all

C7. A CAT scan of the lungs is different from a chest x-ray. It is a test where a patient lies on a table and a large machine takes a series of pictures of the lungs to check for cancer.

Have you ever had a test for lung cancer like this?

- Yes
- No → **If No, Go to Question C9**

C8. Was this a routine check for lung cancer, or were you having some kind of problem?

- Routine → **Go to Question C10**
- For a problem → **Go to Question C10**

C9. Would you be interested in having a test like this to look for signs of lung cancer?

- Yes
- No

C10. How much do you think screening for lung cancer reduces the risk of dying from lung cancer?

- A lot
- Some
- A little
- Not at all

Heart Disease Tests

D1. Has a doctor ever told you that you have heart disease?

- Yes
- No

D2. During the last 12 months, did you have any pain, discomfort, pressure or heaviness in your chest?

- Yes
- No

D3. During the last 12 months, were you bothered by shortness of breath?

- Yes
- No

D4. In the last 12 months, did you see a cardiologist or other heart specialist?

- Yes → **If Yes, Go to Question D6**
- No

D5. Do you think you should have seen a cardiologist or other heart specialist?

- Yes → **Go to Question D9**
- No → **Go to Question D9**

D6. Do you have regular appointments with a cardiologist or other heart specialist?

- Yes
- No → **If No, Go to Question D9**

D7. How often do you have an appointment with a cardiologist or other heart specialist?

- Every month
 - Every 3 months
 - Every 6 months
 - Once a year
 - Other (Please print.)
-

D8. Who decided how often these appointments should be scheduled?

- Mainly you
- Mainly the doctor
- Both you and the doctor

D9. An EKG is a test where electrodes and wires are hooked up to a person's chest.

In the last 12 months, have you had an EKG?

- Yes → **If Yes, Go to Question D11**
- No

D10. Do you think an EKG would have been a good idea for you?

- Yes
- No

D11. A stress test is a test to check a person's heart, while they are on a treadmill.

In the last 12 months, have you had a stress test?

- Yes → **If Yes, Go to Question D13**
- No

D12. Do you think a stress test would have been a good idea for you?

- Yes
- No

D13. An angiogram is a test where a small tube is inserted through a person's leg artery to look directly at the heart.

In the last 12 months, have you had an angiogram?

- Yes → **If Yes, Go to Question D15**
- No

D14. Do you think an angiogram would have been a good idea for you?

- Yes
- No

D15. In the last 12 months, do you think that you had too few, too many, or about the right number of tests for heart disease?

- Too few tests
- Too many tests
- About the right number of tests

Your Preferences

E1. Suppose you noticed a mild but definite chest pain when walking up stairs.

Do you think you'd be more likely to try to see a doctor right away or wait to see if the pain would go away?

- See a doctor → **If See a Doctor, Go to Question E3**
- Wait

E2. Suppose you noticed this pain for a week.

Would you be more likely to go to see a doctor or wait to see if the pain would go away?

- See a doctor
- Wait

E3. Suppose you went to your regular doctor for that chest pain and your doctor did not think you needed any special tests but said you could have some tests if you wanted.

If the tests did not have any health risks, do you think you would probably have the tests or probably not have them?

- Have the tests
- Not have the tests

E4. Suppose your doctor told you he or she did not think you needed to see a heart specialist, but you could see one if you wanted.

Do you think you would probably ask to see a specialist, or probably not see a specialist?

- Ask to see a specialist
- Not see a specialist

E5. Suppose you had had the flu and after the other symptoms were gone, you still had a severe cough.

If the cough lasted 2 days after your flu seemed to be over, would you be more likely to go see a doctor or wait longer to see if the cough went away?

- See a doctor → **If See a Doctor, Go to Question E7**
- Wait

Coping With Serious Illness

E6. If the cough lasted a week, do you think you'd be more likely to go see a doctor or wait longer to see if it went away?

- See a doctor
- Wait

E7. Suppose you went to your regular doctor for that cough. If he or she said you probably did not need a chest x-ray, but you could have one if you wanted, would you be more likely to have the x-ray or not have the x-ray?

- Have the x-ray
- Not have the x-ray

E8. If your regular doctor said you probably did not need to see a lung specialist, but you could if you wanted to, would you be more likely to go see a specialist or not to see the specialist?

- See a specialist
- Not see a specialist

E9. The next set of questions are about care a patient may receive during the last months of life. Remember, you can skip any question you don't want to answer.

Suppose that you had a very serious illness. Imagine that no one knew exactly how long you would live, but your doctors said you almost certainly would live less than 1 year.

In that situation, would you be more concerned that you would receive too little medical treatment, or too much medical treatment?

- Too little treatment
- Too much treatment

E10. If that illness got worse, where would you like to spend your last days?

- In a hospital
- In a nursing home
- At your own home

E11. To deal with that illness, do you think you would want drugs that would make you feel worse all the time but might prolong your life?

- Yes, I would want the drugs
- No, I would not want the drugs

E12. If you reached the point at which you were feeling bad all the time, would you want drugs that would make you feel better, even if they might shorten your life?

- Yes, I would want the drugs
- No, I would not want the drugs

Family and Friends

E13. If you needed a respirator to stay alive, and it would extend your life for a week, would you want to be put on a respirator?

- Yes → **If Yes, Go to Question E15**
- No

E14. If it would extend your life for a month, would you want to be put on a respirator?

- Yes
- No

E15. From what you know, about how many people who need a respirator to keep them alive are able to get back to their normal activities?

- More than half
- About half
- Less than half
- Almost none or none

F1. Is your home:

- A nursing home → **If Nursing Home, Go to Question F4**
- A private home
- An assisted living facility
- Other (Please print.)

F2. How many people live in your home, including you?

- I live alone → **If You Live Alone, Go to Question F4**

_____ Total # of People

F3. How are the people who live in your home related to you?

1st Person: _____

2nd Person: _____

3rd Person: _____

4th Person: _____

5th Person: _____

6th Person: _____

F4. Personal contact can be face to face, on the phone, by letters or by email.

In the last 12 months, about how often did you have personal contact with family members who do not live with you?

- Daily
- Weekly
- Monthly
- Less often
- Never

F5. In the last 12 months, about how often did you have personal contact with friends who do not live with you?

- Daily
- Weekly
- Monthly
- Less often
- Never

F6. When you are with other people, about how often does someone talk about their health or a health care issue?

- Daily
- Weekly
- Monthly
- Less often
- Never

F7. About how often do you attend church, synagogue or mosque?

- Daily
- Weekly
- Monthly
- Less often
- Never

F8. About how often do you attend social or community groups or activities?

- Daily
- Weekly
- Monthly
- Less often
- Never

F9. If you were very sick and could not take care of yourself at all, is there someone who could fix meals and take care of things around your house for a week?

- Yes
- No

About You

G1. In general, how would you rate your overall health?

- Poor
- Fair
- Good
- Very good
- Excellent

G2. In general, how would you rate your overall mental or emotional health?

- Poor
- Fair
- Good
- Very good
- Excellent

G3. How old were you on your last birthday?

_____ Age

G4. Are you male or female?

- Male
- Female

G5. What is the highest grade or level of school that you have completed?

- 8th grade or less
- Some high school, but did not graduate
- High school graduate or GED
- Some college or 2-year degree
- 4-year college graduate
- More than 4-year college degree

G6. Are you of Hispanic or Latino origin or descent?

- Yes, Hispanic or Latino
- No, not Hispanic or Latino

G7. What is your race? (Please mark one or more).

- White
 - Black or African-American
 - Asian
 - Native Hawaiian or Pacific Islander
 - American Indian or Alaska Native
 - Other (Please print.)
-

G8. Did someone help you complete this survey?

- Yes
- No → **If No, Go to Question H1**

G9. How did that person help you? (Please mark one or more.)

- Read the questions to me
 - Wrote down the answers I gave
 - Answered the questions for me
 - Translated the questions into my language
 - Helped in some other way (Please print.)
-

Continue to the next page →

H1. We may want to contact you sometime in the next few months to invite you to participate in another part of this study.

Please let us know the best way to get in touch with you.

Phone #: (_____) _____ – _____

Address: _____

City: _____

State: _____ Zip Code: _____

When we get this questionnaire back, we will remove this page so it is not connected with your other answers.

Thank you for participating in this important study!

Please return the questionnaire in the postage-paid envelope to:

The Center for Survey Research
University of Massachusetts Boston
100 Morrissey Boulevard
Boston, MA 02125