

**PRESCRIPTION DRUG STUDY
SCREENER**

1. Hello, this is (INTERVIEWER NAME) calling for the U.S. Food and Drug Administration. The FDA is conducting an important study about the information people get from their doctor and pharmacist about medicines. *Buenos dias/tardes/noches, mi nombre es (INTERVIEWER NAME) y estoy llamando de parte de la Administracion de Alimentos y Drogas de los Estados Unidos. Estamos conduciendo un estudio muy importante acerca de la informacion de medicinas que las personas reciben de sus doctores o farmaceuticos..*

(IF RESPONDENT ASKS IF WE ARE EMPLOYEES OF FDA OR WHERE WE'RE CALLING FROM, READ PAT RESPONSE ON HARD COPY SHEET)

Am I speaking to an adult member of the household at least 18 years of age?
(IF NO, ASK FOR ADULT AND REINTRODUCE)

Estoy hablando con un miembro adulto de la familia, de por lo menos 18 anos de edad?
(IF NO, ASK FOR ADULT AND REINTRODUCE)

(21) SP

Yes - Continue (Si - Continue)..... 1
No 2 6 (ASK FOR AN ADULT. RE-READ INTRO)

2. **THERE IS NO QUESTION 2**
3. **THERE IS NO QUESTION 3**
4. **THERE IS NO QUESTION 4**

5. The FDA wants to make sure that people get proper information when medicines are prescribed. To help the FDA learn more about this, we would like to ask you about your experiences. Your participation is voluntary, your answers are anonymous, and we greatly appreciate your cooperations

First, how long has it been since the LAST TIME you had a prescription filled FOR YOURSELF at a pharmacy? Was it . . . ?

(READ LIST)

La administracion de alimentos y Drogas esta interesada en que el publico consumidor obtenga adecuada informacion cuando se les recetan medicinas. Su numero fue seleccionado scientificamente. Su cooperacion es muy importante. Su opinion representa miles de casas en su area y no puede ser cambiada por otra.

Primeramente, ¿que tiempo hace desde la ULTIMA VEZ que obtuvo una receta en la farmacia para USTED PERSONALMENTE? Hace ...?

(LEA LA LISTA)

	(26) SP	
Within the last week (<i>Poco menos de una semana</i>)	1	
1 - 4 weeks ago (<i>De 1 a 4 semanas</i>)	2	
5 weeks - 2 months ago (<i>De 5 semanas a 2 meses</i>)	3	6 (GO TO QU. 9)
3 - 6 months ago (<i>De 3 a 6 meses</i>)	4	6 (GO TO QU. 9)
7 - 11 months ago (<i>De 7 a 11 meses</i>)	5	6 (GO TO QU. 9)
1 year ago (<i>Un ano</i>)	6	6 (GO TO QU. 9)
More than 1 year ago, or (<i>Mas de un ano, o</i>)	7	6 (GO TO QU. 9)
Never (<i>Nunca</i>)	8	6 (GO TO QU. 9)
Don't know	Y	6 (GO TO QU. 9)
Refused	}	6 (GO TO QU. 9)

6. When you last had a prescription filled for yourself, was it for only one medicine or for more than one?

Cuando obtuvo esta receta para usted mismo(a), ¿fue para una medicina o mas de una?

	(27) SP	
One (<i>Una</i>)	1	
More than one (<i>Mas de una</i>)	2	6 (GO TO QU. 8)
Don't know	Y	6 (GO TO QU. 9)
Refused	}	6 (GO TO QU. 9)

7. When this prescription was filled, was it a new prescription or a refill of an old prescription?

La ultima vez que obtuvo una receta ¿era esta una receta nueva o le volvieron a llenar una receta vieja?

	(28) SP	
New prescription (<i>Receta nueva</i>)	1	6 (GO TO QU. 15)
Refill (<i>Receta vieja</i>)	2	6 (GO TO QU. 9)
Don't know	Y	6 (GO TO QU. 9)
Refused	}	6 (GO TO QU. 9)

8. When these prescriptions were filled, were they all new prescriptions, all refills of old prescriptions, or were some new and some refills?

Cuando usted obtuvo estas recetas, ¿eran todas estas recetas nuevas, le volvieron a llenar recetas viejas, o eran algunas nuevas y algunas recetas viejas?

	(29) SP	
All new prescriptions (<i>Todas recetas nuevas</i>).....	1	6 (GO TO QU. 15)
All refills (<i>Todas recetas viejas</i>).....	2	
Some new and some refills (<i>Algunas nuevas,</i> <i>algunas viejas</i>)	3	6 (GO TO QU. 15)
Don't know	Y	
Refused.....	}	

9. How long has it been since the LAST TIME you had a prescription filled at a pharmacy FOR SOMEONE ELSE in your household? Was it . . .?

(READ LIST.)

¿Que tiempo hace desde la ULTIMA VEZ que usted obtuvo una receta en una farmacia para otra persona en su casa? Hace ...?

(LEA LA LISTA)

	(30) SP	
Within the last week (<i>Poco menos de una semana</i>)	1	
1 - 4 weeks ago (<i>De 1 a 4 semanas</i>)	2	
5 weeks - 2 months ago (<i>De 5 semanas a 2 meses</i>).....	3	} - (TERMINATE)
3 - 6 months ago (<i>De 3 a 6 meses</i>).....	4	
7 - 11 months ago (<i>De 7 a 11 meses</i>).....	5	
1 year ago (<i>Un año</i>).....	6	
More than 1 year ago, or (<i>Mas de un año, o</i>).....	7	
Never (<i>Nunca</i>)	8	
Don't know	Y	
Refused.....	}	

(INTERVIEWER: THIS RESPONDENT IS NO LONGER QUALIFIED, SAY:) Those are all the questions I have for you. Thank you very much for your time and have a nice day/evening.

(INTERVIEWER: THIS RESPONDENT IS NO LONGER QUALIFIED, SAY:) *Estas son todas as preguntas que tengo. Muchimas gracias por haberlas contestado y que pase usted un buen dis/unas buenas noches.*

	(31) SP
NQ - NO PRESCRIPTION FILLED FOR SOMEONE ELSE IN PAST 4 WEEKS	1

10. When you last had a prescription filled for someone else in your household, was it for one medicine or for more than one?

La ultima vez que usted obtuvo una receta para otra persona en su casa, ¿fue para una medicina o mas de una?

	(32) SP
One (<i>Una</i>).....	1
More than one (<i>Mas de una</i>).....	2
Don't know	Y
Refused.....	}

11. When this prescription was filled, was it a new prescription or a refill of an old prescription?

Cuando usted obtuvo esta receta, ¿era esta una receta nueva o le volvieron a llenar una receta vieja?

	(33) SP	
New prescription (<i>Receta nueva</i>).....	1	} 6 (GO TO QU.13) - (TERMINATE)
Refill (<i>Receta vieja</i>)	2	
Don't know	Y	
Refused.....	}	

(INTERVIEWER: THIS RESPONDENT IS NO LONGER QUALIFIED, SAY:) Those are all the questions I have for you. Thank you very much for your time and have a nice day/evening.

(INTERVIEWER: THIS RESPONDENT IS NO LONGER QUALIFIED, SAY:) *Estas son todas as preguntas que tengo. Muchimas gracias por haberlas contestado y que pase usted un buen dis/unas buenas noches.*

	(34) SP
NQ - REFILL	1

12. When these prescriptions were filled, were they all new prescriptions, all refills of old prescriptions, or were some new and some refills?

Cuando usted obtuvo estas recetas, ¿eran todas estas recetas nuevas, le volvieron a llenar recetas viejas, o eran algunas nuevas y algunas recetas viejas?

	(35) SP	
All new prescriptions (<i>Todas recetas nuevas</i>).....	1	} 6 (GO TO QU. 13) 6 (TERMINATE)
All refills (<i>Todas recetas viejas</i>).....	2	
Some new and some refills (<i>Algunas nuevas, algunas viejas</i>)	3	
Don't know	Y	
Refused.....	}	6 (TERMINATE)

(INTERVIEWER: THIS RESPONDENT IS NO LONGER QUALIFIED, SAY:) Those are all the questions I have for you. Thank you very much for your time and have a nice day/evening.

(INTERVIEWER: THIS RESPONDENT IS NO LONGER QUALIFIED, SAY:) *Estas son todas as preguntas que tengo. Muchimas gracias por haberlas contestado y que pase usted un buen dis/unas buenas noches.*

	(36) SP
NQ - ALL REFILLS	1

13. From now on, please think only of the new prescriptions you had filled MOST RECENTLY at a pharmacy for a HOUSEHOLD MEMBER. When you had the prescription filled, was the prescription for...

De ahora en adelante, por favor solamente piense en las recetas NUEVAS, LAS QUE NO SE PUEDEN VOLVER A LLENAR que usted obtuvo MAS RECIENTEMENTE en una farmacia para un MIEMBRO DE SU CASA.

(READ LIST. INTERVIEWER NOTE: IF NECESSARY, STRESS "NOT A REFILL".)

(LEA LA LISTA)

	(37) SP
A child or grandchild (<i>Un hijo(a) o nieto(a)</i>)	1
Your spouse (<i>Su esposo(a)</i>)	2
Your parent or grandparent (<i>Sus padres o abuelos, o</i>)	3
Or some other household member (<i>Algun otro miembro de su casa</i>)	4
Don't know	Y
Refused.....	}

14. When the medicine was prescribed for the household member ...

(READ LIST)

Cuando la medicina le fue recetada a ese otro miembro de su casa ...

(LEA LA LISTA)

	(38) SP	
Were you in the same room with the doctor and the household member (<i>Estaba usted presente en el mismo cuarto con el doctor y el miembro de su casa?</i>).....	1	6 (GO TO QU. 55)
Did you speak with the doctor over the phone only, or (<i>Hablo usted solamente por telefono con el doctor, o?</i>)	2	6 (GO TO QU. 55)
Were you involved in none of these? (<i>No participo usted en nada de esto?</i>).....	3	} 6 (TERMINATE)
Don't know.....	Y	
Refused.....	}	

(INTERVIEWER: THIS RESPONDENT IS NO LONGER QUALIFIED, SAY:) Those are all the questions I have for you. Thank you very much for your time and have a nice day/evening.

(INTERVIEWER: THIS RESPONDENT IS NO LONGER QUALIFIED, SAY:) *Estas son todas as preguntas que tengo. Muchismas gracias por haberlas contestado y que pase usted un buen dis/unas buenas noches.*

	(39) SP
NQ - NOT INVOLVED.....	1

**PRESCRIPTION DRUG STUDY
MAIN QUESTIONNAIRE
QUESTIONNAIRE A (PRESCRIPTION FOR SELF)**

Questionnaire A (Prescription for Self)

(14) SP

Version 1 1
Version 2 2

From now on please think only of the new prescription you had filled MOST RECENTLY AT A PHARMACY.

De ahora en adelante, por favor solamente piense en las recetas NUEVAS, LAS QUE NO SE PUEDEN VOLVER A LLENAR EN LA FARMACIA, QUE USTED OBTUVO MAS RECIENTEMENTE.

Still thinking of the most recent NEW prescriptions you had filled.

Continúe pensando en las recetas NUEVAS mas recientes que usted haya obtenido.

15. When you received the medicine, was the medicine handed to you by the pharmacist, handed to you by a clerk or cashier, picked up by someone else, or was the medicine delivered?

(INTERVIEWER NOTE: IF NECESSARY, STRESS "NOT A REFILL")

Cuando usted recibió la medicina, ¿se la dio el farmacéutico en su mano, se la dio el dependiente o cajero, la recogió otra persona, o le entregaron la medicina en su casa?

(16) SP

Handed to you by the pharmacist
(*Se la dio el farmacéutico*) 1
Handed to you by a clerk or cashier
(*Se la dio el dependiente o cajero*) 2
Picked up by someone else
(*La recogió otra persona*) 3 6 (GO TO QU. 22)
Was delivered (*Fue entregada*) 4 6 (GO TO QU. 22)
Don't know Y
Refused }

SCRAMBLE START QU. 16 ITEMS

16. Did you talk about ...

Hablo usted acerca de ...

(IF YES:) Were you told about this or did you have to ask about this?

(IF "SI":) *Se lo dijeron o tuvo usted que preguntar?*

- a. What this medicine would do for you? (Lo qué la medicina haría para Usted?)
- b. How much of the medicine to take or use? (*Que cantidad de medicina tomar usar?*)
- c. How often to take or use the medicine? (*Cuan a menudo tomar o usar la medicina?*)
- d. Whether or not the medicine could be refilled? (*Si la receta se puede repetir o no?*)
- e. Any precautions to take while using the medicine? (*Que precauciones tomar mientras usa la medicina?*)
- f. Any possible side effects? (*Posibilidad de algun efecto secundario perjudicial?*)

	-1- (17)	-2- (18)	-3- (19)	-4- (20)	-5- (21)	SP
Yes, told about it <i>(Si, me lo dijeron)</i>	1	1	1	1	1	
Yes, had to ask about it <i>(Si, tuve que preguntar)</i>	2	2	2	2	2	
No.....	3	3	3	3	3	
Don't know	Y	Y	Y	Y	Y	
Refused.....	}	}	}	}	}	

(NO QUESTION 17)

18. Did anyone in the pharmacy TELL you anything else about the medicine?

Alguien mas en la farmacia le DIJO algo mas acerca de la medicina?

Yes (<i>Si</i>).....	1	(22) SP
No.....	2	
Don't know	Y	
Refused.....	}	
		6 (GO TO QU. 21)

19. What else did they tell you about the medicine? (**PROBE TO CLARIFY**)

?Que mas le dijeron acerca de la medicina? (PROBE TO CLARIFY)

(23-26)

19.1. Was this information told to you or did you ask about it?

?Le dieron esta informacion a usted o tuvo que preguntar?

Told (<i>Se la dieron</i>).....	1	(27) SP
Asked (<i>Tuvo que preguntar</i>).....	2	
Don't know	Y	
Refused.....	}	

19.2. What else did they tell you about the medicine? **(PROBE TO CLARIFY)**

?Que mas le dijeron a usted acerca de la medicina? (PROBE TO CLARIFY)

(28)

No additional response..... 1 6 **(GO TO QU. 21)**
 Other (specify) 2

19.3. Was this information told to you or did you ask about it?

Le dieron a usted esta informacion o tuvo usted que preguntar?

(32) SP

Told (*Se la dieron*)..... 1
 Asked (*Tuvo que preguntar*)..... 2
 Don't know Y
 Refused..... }

19.4 What else did they tell you about the medicine? **(PROBE TO CLARIFY)**

?Que mas le dijeron a usted acerca de la medicina? (PROBE TO CLARIFY)

(33)

No additional response..... 1 6 **(GO TO QU. 21)**
 Other (specify) 2

19.5. Was this information told to you or did you ask about it?

Le dieron a usted esta informacion o tuvo usted que preguntar?

(37) SP

Told (*Se la dieron*)..... 1
 Asked (*Tuvo que preguntar*)..... 2
 Don't know Y
 Refused..... }

(NO QUESTION 20.)

SCRAMBLE START QU. 21 ITEMS

21. Did anyone in the pharmacy say anything that caused you to ...

Alguien en la farmacia le dijo algo lo cual causo que usted ...

- a. Check with your doctor before taking or using the medicine? (*Comprobara con su doctor antes de tomar la medicina?*)
- b. Consider not taking or using the medicine? (*Considerara no tomar ousar la medicina?*)
- c. Feel better about taking or using the medicine? (*Se sienta mejor acerca de tomar o usar la medicina?*)

		-1-	-2-	-3-				
		(38)	(39)	(40)	SP			
2	Yes (Si).....	1	1	1		No	2	2
	Don't know	Y	Y	Y				
	Refused.....	}	}	}				

22. Thinking about WRITTEN information, in addition to the label on the medicine container, was there any OTHER WRITTEN information furnished with the medicine?

Piense en la informacion escrita, ademas de lo que decia la etiqueta del frasco de la medicina, ?le dieron cualquier OTRA INFORMACION ESCRITA con la medicina?

				(41)	SP		
	Yes (Si).....	1					
	No	2					
	Don't know	Y	[6	(GO TO QU. 26)		
	Refused.....	}	N				

DO NOT SCRAMBLE START QU. 23 ITEMS

23. What kind of information was this? Was it ...

?Que clase de informacion fue esta? Fue ...

- a. Brochures or pamphlets (*Folletos o panfletos*)
- b. Instruction sheets (*Hojas de instrucciones*)
- c. Stickers on the medicine with instructions such as "May cause drowsiness," etc. (*Etiqueta, pegada al frasco de la medicina, con instrucciones, como por ejemplo "Puede que cause somnolencia (adormecimiento)", etc.)*)
- d. Some other type of written information (*Cualquier otro tipo de informacion escrita*)

		-1-	-2-	-3-	-4-	
		(42)	(43)	(44)	(45)	SP
	Yes (Si).....	1	1	1	1	
	No	2	2	2	2	
	Don't know	Y	Y	Y	Y	
	Refused.....	}	}	}	}	

ASK QU. 23.1 ONLY IF QU. 23d IS CODE 1, YES
--

23.1 What other types of written information were furnished with the medicine?

Que otros tipos de informacion escrita le proporcionaron con la medicina?

ASK QU. 24.1 ONLY IF QU. 23a IS CODE 1, YES
--

24. You mentioned that you received brochures or pamphlets with the medicine. Was this information preprinted or was it printed for you at the pharmacy?

Usted menciona que recibio folletos o panfletos con la medicina. Fue esta informacion impresa de antemano o fue impresa para usted en la farmacia?

(50) SP

Preprinted (<i>Impresa de antemano</i>)	1
Printed at pharmacy (<i>Impresa en la farmacia</i>)	2
Both (<i>Ambos</i>)	3
Don't know	Y
Refused.....	}

ASK QU. 24.1 ONLY IF QU. 23b IS CODE 1, YES
--

24.1. You mentioned that you received instruction sheets with the medicine. Was this information preprinted or was it printed for you at the pharmacy?

Usted menciona que recibio hojas de instrucciones con la medicina. Fue esta informacion impresa de antemano o fue impresa para usted en la farmacia?

(51) SP

Preprinted (<i>Impresa de antemano</i>)	1
Printed at pharmacy (<i>Impresa en la farmacia</i>)	2
Both (<i>Ambos</i>)	3
Don't know	Y
Refused.....	}

(NO QUESTION 25)

**CHECK QU. 15. IF CODE 3 OR 4, GO TO QU. 27
DO NOT SCRAMBLE START QU. 26 ITEMS**

26. Now, concerning other sources of information at the pharmacy, was any other information provided to you through sources such as . . . **(READ ITEMS ONE AT A TIME.)**

Ahora, con respecto a otras fuentes de informacion en la farmacia, le proporcionaron a usted cualquier otra informacion a traves de otros medios como por ejemplo ...

- a. Reference books (*Libros para referencias*)
- b. Video screens (*Pantalla de videos*)
- c. Audio tapes or cassettes (*Cintas o cassettes de audio*)
- d. Computer terminals (*Computadoras*)
- e. Any other automated source (*Cualquier otra fuente de informacion automatizada*)

	-1- (52)	-2- (53)	-3- (54)	-4- (55)	-5- (56)	SP
Yes (<i>Si</i>)	1	1	1	1	1	
No	2	2	2	2	2	
Don't know	Y	Y	Y	Y	Y	
Refused	}	}	}	}	}	

ASK QU. 26.1 ONLY IF QU. 26e IS CODE 1, YES

- 26.1. Through what other automated sources at the pharmacy did you get information about the medicine?
(PROBE ONCE:) What others?

A traves de que otras fuentes de informacion automatizadas en la farmacia recibio usted informacion acerca de la medicina?
(PROBE ONCE:) *Cuales otras?*

REPRESENT ALTERNATE WORDING BASED ON QU. 6 RESPONSE. ALLOW ONLY ONE RESPONSE

27. (Was this prescription/were these prescriptions) filled in a . . . **(READ LIST.)**

Donde obtuvo usted (ESTA/ESTAS RECETAS)? En una . . .

	(61)
Chain drug store (<i>Farmacia de cadena</i>)	1
An independent drug store, or (<i>Una farmacia independiente</i>)	2
Someplace else (SPECIFY) (<i>Otro lugar</i>) (<i>ESPECIFIQUE</i>)	3
Don't know	Y
Refused	}

DOCTOR'S OFFICE EXPERIENCE

REPRESENT FIRST SET OF WORDING IF VERSION 1 AND SECOND SET OF WORDING IF VERSION 2

Still thinking of your most recent NEW prescription.

Continúe pensando en su más reciente receta NUEVA.

From now on please think only of the NEW prescriptions you had filled MOST RECENTLY at a pharmacy.

De ahora en adelante, por favor piense solamente en la NUEVA receta, que no puede llenar de nuevo, que usted obtuvo MAS RECIENTEMENTE en una farmacia ...

28. When the DOCTOR prescribed the medicine for you did the doctor or anyone in the office tell you about the medicine?

(INTERVIEWER NOTE: IF NECESSARY, STRESS "NOT A REFILL")

Cuando el DOCTOR le receto la medicina, ¿alguien en la oficina o el doctor le dijo algo acerca de la medicina?

- | | | |
|------------------|---------|------------------|
| | (14) SP | |
| Yes (Si) | 1 | } |
| No | 2 | |
| Don't know | Y | |
| Refused | } | |
| | | - (GO TO QU. 36) |

29. Who told you about the medicine in the doctor's office?

(DO NOT READ LIST. PROBE ONCE:) Anyone else?

¿Quién le habló a usted acerca de la medicina en la oficina del doctor?

(DO NOT READ LIST. PROBE ONCE:) Alguien más?

- | | |
|--|------|
| | (15) |
| Doctor | 1 |
| Nurse (Enfermera)..... | 2 |
| Secretary/Clerk (Secretaria/oficinista) | 3 |
| Technician/Technologist (Tecnico/tecnologo)..... | 4 |
| Other (specify)..... | 5 |
| Don't know | Y |
| Refused | } |

Now I'd like to ask some questions concerning the conversation between you and the **(INSERT ALL QU. 29 MENTIONS)** at the doctor's office.

Ahora me gustaria hacerle algunas preguntas con respecto a la CONVERSACION entre usted y en la oficina del doctor.

REPRESENT ALL QU. 29 MENTIONS IN BLANK. SCRAMBLE START QU. 30 ITEMS

30. Did you talk about ...

HABLO usted acerca de ...

(IF YES:) Were you told about this or did you have to ask about it?

(IF "SI":) ?Se lo **DIJERON** o **TUVO** usted que **PREGUNTAR**?

- a. What this medicine would do for you? (Lo qué la medicina haría para usted?)
- b. How much of the medicine to take or use? (Que cantidad de medicina tomar or usar?)
- c. How often to take or use the medicine? (Cuan a mendo tomar o usar la medicina?)
- d. Whether or not the medicine could be refilled? (Si la receta se puede repetir o no?)
- e. Any precautions to take while using the medicine? (Que precauciones tomar mientras usa la medicina?)
- f. Any possible side effects? (Posibilidad de algun efecto secundario perjudicial?)

	-1- (19)	-2- (20)	-3- (21)	-4- (22)	-5- (23)	SP
Yes, told about it	1	1	1	1	1	
<i>(Si, me lo dijeron)</i>						
Yes, had to ask about it	2	2	2	2	2	
<i>(Si, tuve que preguntar)</i>						
No	3	3	3	3	3	
Don't know	Y	Y	Y	Y	Y	
Refused	}	}	}	}	}	

(NO QUESTION 31)

32. Did anyone in the doctor's office **TELL** you anything else about the medicine?

*Alguien mas en la oficina del doctor le **DIJO** algo mas acerca de la medicina?*

	(24) SP	
Yes (Si)	1	} 6 (GO TO QU. 35)
No	2	
Don't know	Y	
Refused	}	

33. What else did they tell you about the medicine? **(PROBE TO CLARIFY)**

*Que mas le dijeron acerca de la medicina? **(PROBE TO CLARIFY)***

33.1. Was this information told to you or did you ask about it?

Le dieron esta informacion a usted o tuvo que preguntar?

(29) SP

Told (*Se la dieron*) 1
 Asked (*Tuvo que preguntar*) 2
 Don't know Y
 Refused }

33.2. What else did they tell you about the medicine? **(PROBE TO CLARIFY)**

Que mas le dijeron a usted acerca de la medicina? (PROBE TO CLARIFY)

No additional response 1 6 **(GO TO QU. 35)**
 Other (specify) 2

33.3. Was this information told to you or did you ask about it?

Le dieron a usted esta informacion o tuvo usted que preguntar?

(34) SP

Told (*Se la dieron*) 1
 Asked (*Tuvo que preguntar*) 2
 Don't know Y
 Refused }

33.4. What else did they tell you about the medicine? **(PROBE TO CLARIFY)**

Que mas le dijeron a usted acerca de la medicina? (PROBE TO CLARIFY)

No additional response 1 6 **(GO TO QU.35)**
 Other (specify) 2

33.5. Was this information told to you or did you ask about it?

Le dieron a usted esta informacion o tuvo usted que preguntar?

(39) SP

Told (*Se la dieron*) 1
 Asked (*Tuvo que preguntar*) 2
 Don't know Y
 Refused }

(NO QUESTION 34)**ROTATE START ON QU. 35 ITEMS**

35. Did anything they said cause you to . . . **(READ ITEMS ONE AT A TIME)**

Le dijeron algo lo cual causo que usted ...

- a. Consider not taking or using the medicine? (*Considerara no tomar o usar la medicina?*)
 b. Feel better about taking or using the medicine? (*Se sienta mejor acerca de tomar o usar la medicina?*)

	-1- (40)	-2- (41)	SP
Yes (Si)	1	1	
No	2	2	
Don't know	Y	Y	
Refused	}	}	

36. Was the medicine prescribed as a result of a VISIT to the doctor's office?

Fue esta medicina recetada como resultado de una VISITA a la oficina del doctor?

	(42) SP	
Yes (Si)	1	} 6 (GO TO QU. 44)
No	2	
Don't know	Y	
Refused	}	

37. Thinking about WRITTEN information, did your doctor or anyone in the office give you any WRITTEN information about the medicine?

Pensando en informacion ESCRITA, le dio el doctor o alguien en la oficina del doctor alguna informacion ESCRITA acerca de la medicina?

	(43) SP	
Yes (Si)	1	} 6 (GO TO QU. 40)
No	2	
Don't know	Y	
Refused	}	

DO NOT ROTATE START FOR QU. 38 ITEMS

38. What kind of information was this? Was it . . . **(READ ITEMS ONE AT A TIME)**

?Que clase informacion fue esta? Fue ...

- a. Brochures or pamphlets (*Folletos o panfletos*)
 b. Instruction sheets (*Hojas de instrucciones*)
 c. Some other type of written information (*Cualquier otro tipo de informacion escrita*)

	-1- (44)	-2- (45)	-3- (46)	SP
Yes (Si)	1	1	1	
No	2	2	2	
Don't know	Y	Y	Y	
Refused	}	}	}	

ASK QU. 38.1 ONLY IF QU. 38c IS CODE 1, YES

38.1. What other types of written information about the medicine did you receive?

?Que otros tipos de informacion escrita acerca de la medicina recibio usted?

ASK QU. 39 ONLY IF QU. 38a IS CODE 1, YES

39. You mentioned that you received brochures or pamphlets with the medicine. Was this information preprinted or did a computer print it for you at the doctor's office?

Usted menciona que recibio folletos o panfletos con la medicina. ?Fue esta informacion impresa de antemano o la imprimio una computadora para usted en la oficina del doctor?

(51) SP

Preprinted (<i>Impresa de antemano</i>).....	1
Printed at doctor's office (<i>Impresa en la oficina del doctor</i>)	2
Both (<i>Ambos</i>).....	3
Don't know	Y
Refused	}

ASK QU. 39.1 ONLY IF QU. 38b IS CODE 1, YES

39.1. You mentioned that you received instruction sheets with the medicine. Was this information preprinted or did a computer print it for you at the doctor's office?

Usted menciona que recibio hojas de instrucciones con la medicina. Fue esta informacion impresa de antemano o la imprimio una computadora para usted en la oficina del doctor?

(52) SP

Preprinted (<i>Impresa de antemano</i>).....	1
Printed at doctor's office (<i>Impresa en la oficina del doctor</i>)	2
Both (<i>Ambos</i>).....	3
Don't know	Y
Refused	}

DO NOT SCRAMBLE START QU. 40 ITEMS

40. Now, concerning other sources of information at the doctor's office, was any other information provided to you through sources such as . . . **(READ ITEMS ONE AT A TIME.)**

Ahora, con respecto a otras fuentes de informacion en la oficina del doctor, ?le proporcionaron a usted cualquier otra informacion a traves de otros medios como por ejemplo ...?

- a. Reference books (*Libros para referencias*)
- b. Video screens (*Pantalla de videos*)
- c. Audio tapes or cassettes (*Cintas o cassettes de audio*)
- d. Computer terminals (*Computadors*)
- e. E-mail between the doctor's office and you (*Correo electronico entre la oficina del doctor y usted*)**
- f. Any other automated source (*Cualquier otra fuente de informacion automatizada*)

	-1- (53)	-2- (54)	-3- (55)	-4- (56)	-5- (57)	SP
Yes (<i>Si</i>)	1	1	1	1	1	
No	2	2	2	2	2	
Don't know	Y	Y	Y	Y	Y	
Refused	}	}	}	}	}	

ASK QU. 40.1 ONLY IF QU. 40f IS CODE 1, YES
--

- 40.1 Through what other automated source at the doctor's office did you get information about the medicine?

(PROBE ONCE:) What others?

A traves de que otras fuentes de informacion automatizadas en la oficina del doctor recibio usted informacion acerca de la medicina?

(PROBE ONCE:) *Cuales otras?*

SCRAMBLE START QU. 41 ITEMS EXCEPT "OTHER"

41. NOT including information you received from the pharmacy or from your doctor's office, did you find out anything about your medicine from . . .
(READ ITEMS ONE AT A TIME)

SIN incluir la informacion que usted recibio en la farmacia o en la oficina de su doctor, ¿descubrio usted algo mas acerca de su medicina por medio de ...?

- a. Reference books (*Libros para referencias*)
- b. Magazines (*Revistas*) (If Yes, ask Q41b.1)
- c. Newspapers (*Periodicos*) (If Yes, ask Q41c.1)
- d. The television (*La television*) (If Yes, ask Q41d.1)
- e. The radio (*La radio*)
- f. Audio tapes or cassettes (*Cintas o cassettes de audio*)
- g. Internet (Internet) (If Yes, ask Q41.5)
- h. Computer terminals (*Computadoras*)
- i. Friends, relatives, or neighbors (*Amistades, familiares o vecinos*)
- j. Health newsletters (*Circulares de salud*)

	-1- (62)	-2- (63)	-3- (64)	-4- (65)	-5- (66)	-6- (67)	-7- (68)	-8- (69)	-9- (70)	-10- (71)	SP
Yes (Si)	1	1	1	1	1	1	1	1	1	1	
No	2	2	2	2	2	2	2	2	2	2	
Don't know.....	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
Refused	}	}	}	}	}	}	}	}	}	}	

- 41b.1 Did you get the information from: (*Usted consiguió la información de*):

- a. An ad? (*Un anuncio?*)
- b. An article? (*Un artículo?*)

	-a- ()	-b- ()
Yes (Si)	1	1
No	2	2
Don't know.....	Y	Y
Refused	}	}

- 41c.1 Did you get the information from: (*Usted consiguió la información de*):

- a. An ad? (*Un anuncio?*)
- b. An article? (*Un artículo?*)

	-a- ()	-b- ()
Yes (Si)	1	1
No	2	2
Don't know	Y	Y
Refused.....	}	}

41d.1 Did you get the information from: (*Usted consiguió la información de*):

- a. A news program? (*Las noticias?*)
- b. A talk show?
- c. An ad? (*Un anuncio?*)

	-a-	-b-	-c-
	()	()	()
Yes (Si)	1	1	1
No	2	2	2
Don't know	Y	Y	Y
Refused.....	}	}	}

41.k. NOT including information you received from the pharmacy or from your doctor's office, did you find out anything about your medicine from SOME OTHER SOURCE?

SIN incluir la informacion que usted recibio en la farmacia o en la oficina de su doctor, ¿descubrio usted algo mas acerca de su medicina por medio de ALGUNA OTRA DE SALUD?

	(72) SP
Yes (Si)	1
No	2
Don't know	Y
Refused.....	{

ASK QU. 41.1 ONLY IF QU. 41a IS CODE 1, YES

41.1. From which REFERENCE BOOKS did you find out something about your medicine? (**PROBE FOR TITLES**)

En que LIBROS DE REFERENCIAS descubrio usted algo acerca de su medicina? (PROBE FOR TITLES)

ASK QU. 41.4 ONLY IF QU. 41k IS CODE 1, YES

41.4. From what OTHER SOURCES did you find out something about your medicine?

En que OTRAS FUENTES descubrio usted algo mas acerca de su medicina?

ASK Q41.5 ONLY IF Q41G IS CODE 1 YES (INTERNET)

41.5 From where on the internet did you find information about your medicine? (*Dónde en el Internet usted encontró la información sobre su medicina?*)

- a. A chat room? (*Un chat room?*)
- b. A drug company website? (*Un website de la compañía de la droga?*)
- c. A news or magazine website? (*Un website de noticias or revista?*)
- d. A government website? (*Un website del gobierno?*)
- e. A health information website? (*Un website dedicado a información de la salud?*)
- f. A specific person's home page? or (*Home Page de una persona específica?*) o
- g. Some other location on the internet? (*Algún otro lugar en el Internet?*)

	-a-	-b-	-c-	-d-	-e-	-f-	-g-
	()	()	()	()	()	()	()
Yes (Si)	1	1	1	1	1	1	1
No	2	2	2	2	2	2	2
Don't know.....	Y	Y	Y	Y	Y	Y	Y
Refused	}	}	}	}	}	}	}

IF CODE 2, 8 OR 9 TO ALL QU. 41 ITEMS, GO TO QU. 44 SCRAMBLE START QU. 42 ITEMS
--

42. Did anything you read or heard from these sources . . . (**READ ITEMS ONE AT A TIME**)

Algo que usted oyo o leyo a través de estas fuentes causó que usted ...

- a. Cause you to ask your doctor or pharmacist about what you read or heard?
(*Le preguntara al doctor o farmacéutico acerca de lo que usted oyo o leyo?*)
- b. Cause you to consider not taking or using the medicine? (*Considerara no tomar o usar la medicina?*)
- c. Help you to feel better about taking or using the medicine? (*Se sienta mejor acerca de tomar o usar la medicina?*)

	-1- (30)	-2- (31)	-3- (32)	SP
Yes (Si)	1	1	1	
No.....	2	2	2	
Don't know.....	Y	Y	Y	
Refused	}	}	}	

IF CODE 2, NO, DON'T KNOW OR REFUSED TO ALL QU. 42 ITEMS, GO TO QU. 44
--

43. Specifically, what did you read or hear about your medicine? (**PROBE FULLY.**)

Específicamente, ¿qué fue lo que usted oyo o leyo acerca de su medicina? (**PROBE FULLY**)

44. Please tell me for what condition the (medicine was/medicines were) prescribed. (**PROBE TO CLARIFY.**)

Por favor dígame por qué fue que le recetaron (la medicina/las medicinas)? (**PROBE FULLY**)

There are a number of additional ways in which people may receive information about the prescription medicines they take. I would like you now to think back to **(INSERT DATE 3 MONTHS AGO)**. That was three months ago,

Hay un numero de maneras adicionales en que la gente puede recibir informacion sobre las medicinas de prescripcion que ellos toman. Quisiera que Ud. ahora piense de nuevo a Eso fue hace tres mese.

(RANDOM ROTATION OF Q45A TO Q45I)

45a. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:
(LA MEDICINA/LAS MEDICINAS)?

Did you receive any newsletters, brochures, or other information in the mail or by e-mail about prescription medicines that were sent to you by a PHARMACY? (Recibio Ud. cualquier boletines, Folletos, u otra informacion en el correo o por correo electronico sobre medicinas de prescripcion que se envio a Ud. por una FARMACIA?)

(41) SP

Yes (Si) 1
No..... 2
Don't know..... Y
Refused }

45b. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did you receive any newsletters, brochures, or other information in the mail or by e-mail that were sent to you by a DRUG COMPANY? (Recibio Ud. cualquier boletines, folletos, u otra informacion en el correo o por correo electronico que se le envio a Ud. por una COMPANIA DE DROGA?)

(43) SP

Yes (Si) 1
No..... 2
Don't know..... Y
Refused }

(PRESENT Q45G IMMEDIATELY AFTER Q45C)

45c. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did you see any advertisements for any of the prescription medicines YOU ARE TAKING on television, radio, newspapers, magazines, or the internet? (Vio Ud. cualquier anuncio sobre cualquier de las medicinas de prescripcion que UD. TOMA por las television, la radio, periodicos, revistas, o el internet?)

(45) SP

Yes (Si) 1
No..... 2
Don't know..... Y
Refused }

45g. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did you ask your doctor about taking any medicines that you may have seen advertised on television, radio, newspapers, magazines, or the internet? (Pidio Ud. a su doctor para tomar cualquier medicinas que Ud. pueda haber visto anunciada sobre la television, radio, periodicos, o revistas?)

(51) SP

Yes (Si) 1

No.....2
Don't know.....Y
Refused }

- 45d. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did you take home any brochures or other written material about any medication from a hospital, health maintenance organization, grocery store, pharmacy, clinic, doctor's office, or any other place? (*Llevo Ud. a casa cualquier folletos u otro material escrito sobre cualquier medicacion de un hospital, organizacion de antenimiento de salud, tienda de comestibles, farmacia, clinica, oficina de doctor, o cualquier otro lugar?*)

(47) SP
 Yes (Si) 1
 No..... 2
 Don't know..... Y
 Refused }

- 45e. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did you receive a sample of any prescription medicine from a doctor or anyone in the doctor's office? (*Recibio Ud. un muestreo de cualquier medicina de prescripcion de un doctor o alguien mas en la oficina de doctor?*)

(49) SP
 Yes (Si) 1
 No..... 2
 Don't know..... Y
 Refused }

(ASK IF YES - AT Q.45e)

- 45f. Did you receive any written information with it?

Recibio Ud. cualquier informacion escrita con ello?

(50) SP
 Yes (Si) 1
 No..... 2
 Don't know..... Y
 Refused }

- 45h. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did anyone at the pharmacy ask you if you would like to talk with the pharmacist about any of the medicines? (*Le pidio alguien en la farmacia si Ud. le gustaria hablar con el farmaceutico sobre algunos de sus medicamentos?*)

(53) SP
 Yes (Si) 1
 No..... 2
 Don't know..... Y
 Refused }

- 45i. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did a doctor, pharmacist, nurse, physician assistant, or other health professional discuss or review with you all the MEDICATIONS you take? (*Discutio o reviso un doctor, farmaceutico, enfermera, asistente de medico, o otro profesional de salud con Ud. TODAS LAS MEDICACIONES QUE UD. TOMA?*)

(55) SP
 Yes (Si) 1
 No..... 2
 Don't know..... Y
 Refused }

Now, I have a few questions for classification purposes only.

Ahora tengo alguna preguntas con proposito de clasificacion solamente.

46. How many adults age 18 and older including yourself are currently living in your household?

Cuantos adultos de 18 anos de edad o mas, incluyendose a usted mismo(a) estan viviendo en su casa en este momento?

1 TO 15 (14-15)
 Refused {

47. How many children under 18 are currently living in your household?

Cuantos ninos de menos de 18 anos de edad estan viviendo en su casa en este momento?

0 TO 15 (16-17)
 Refused {

48. Would you please tell me what is your age?

Por favor, ¿me puede decir su edad?

18 TO 99 (18-19)
 Refused {

49. Would you please tell me the last grade of school YOU completed? **(READ LIST IF NECESSARY).**

Me puede decir el ultimo grado de escuela que USTED completo? (READ LIST, IF NECESSARY)

(20)
 8th grade or less (*8vo. grado o menos*) 1
 Some high school (*Un poco de escuela secundaria*) 2
 High school graduate (*Graduado de escuela secundaria*) 3
 Some college or vocational school (*Un poco de universidad o escuela vocacional*) 4
 College graduate (*Graduado de universidad*) 5
 Some post graduate (*Algo de postgraduado*) 6
 Finished graduate work (*Termino el postgraduado*) 7
 Other (specify) 8
 Don't know Y
 Refused {

50.1

Are you of Hispanic or Latino origin?

Yes 1
 No 2
 [DON'T READ] DK/NS 8
 [DON'T READ] RF 9

50.2.

What is your race? I am going to read you several categories of race. You may choose one or more. Are you.... [ACCEPT MULTIPLE ANSWERS.]

White 1
 Black or African American 2
 Asian 3
 Native Hawaiian or other Pacific Islander 4
 American Indian or Alaskan Native 5
 [DON'T READ] (Volunteered) Hispanic 6
 [DON'T READ] Other [SPECIFY] 7
 [DON'T READ] DK/NS 8
 [DON'T READ] RF 9

51. For classification purposes only, please tell me what your total HOUSEHOLD income was last year BEFORE taxes. Was it . . . ?
(READ LIST)

Por ultimo, y por motivos de clasificacion solamente, por favor digame cual fue la entrada total de SU casa el ano pasado ANTES de quitarle lo impuestos. Fue ...? (READ LIST)

- (28) SP
- Less than \$10,000 (*Menos de \$10,000*)..... 1
 - \$10,000 up to \$20,000 (*De \$10,000. a \$20,000*) 2 6 **(GO TO QU. 53)**
 - \$20,000 up to \$35,000 (*De \$20,000. a \$35,000*) 3 6 **(GO TO QU. 53)**
 - \$35,000 up to \$50,000 (*De \$35,000. a \$50,000*) 4 6 **(GO TO QU. 53)**
 - \$50,000 up to \$75,000 (*De \$50,000. a \$75,000*) 5 6 **(GO TO QU. 53)**
 - \$75,000 or more (*\$75,000. o mas*) 6 6 **(GO TO QU. 53)**
 - Don't know..... Y 6 **(GO TO QU. 53)**
 - Refused { 6 **(GO TO QU. 53)**

52. Are you currently receiving any government assistance for your medical bills, such as Medicaid?

Esta usted en este momento recibiendo alguna asistencia del gobierno para ayudarle con sus cuentas de doctores, como por ejemplo Medicaid?

- (29) SP
- Yes (*Si*) 1
 - No..... 2
 - Don't know..... Y
 - Refused }

53. In closing, I'd like to verify the number I've dialed. Have I reached you at **(TELEPHONE NUMBER)**?

Para terminar, me gustaria verificar el numero de telefonos que llame. Es este el numero TELNUMBW?

- (30)
- Yes (*Si*) 1
 - Other (specify)..... 2
 - Refused { 6 **(GO TO GENDER)**

54. Do you have any other residential telephone numbers in addition to **(TELEPHONE NUMBER)**?

Tiene usted algun otro numero de telefono residencial en su casa, aparte del numero EXCHW TELNUMB?

(INTERVIEWER: IF "YES", CONFIRM THAT THIS IS A DIFFERENT TELEPHONE NUMBER -- NOT AN EXTENSION OF THE SAME NUMBER)

- (34) SP
- Yes (*Si*) 1
 - No..... 2
 - Don't know..... Y
 - Refused }

54.1 Record sex of respondent.

Anote el sexo del respondiente.

- (35) SP
- Male (*Masculino*)..... 1
 - Female (*Femenino*)..... 2

Those are all the questions I have. Thank you very much for your time and have a nice day/evening.

Estas son todas las preguntas que tengo. Muchisimas gracias por haberlas contestado y que pase usted un buen dia/unas buenas noches.

**PRESCRIPTION DRUG STUDY
MAIN QUESTIONNAIRE
QUESTIONNAIRE B (PRESCRIPTION FOR HOUSEHOLD MEMBER)**

Questionnaire B (Prescription for Household Member)

(14) SP

Version 3..... 1
Version 4..... 2

From now on please think only of the new prescription you had filled for your household member MOST RECENTLY AT A PHARMACY.

De ahora en adelante, por favor solamente piense en las recetas NUEVAS, LAS QUE NO SE PUEDEN VOLVER A LLENAR EN LA FARMACIA, QUE USTED OBTUVO MAS RECIENTEMENTE PARA UN MIEMBRO DE SU CASA.

Still thinking of the most recent NEW prescriptions you had filled for your household member.

Continúe pensando en las recetas NUEVAS mas recientes que usted haya obtenido para un miembro de su casa.

55. Was the medicine handed to you by the pharmacist, handed to you by a clerk or cashier, picked up by someone else, or was the medicine delivered?

(INTERVIEWER NOTE: IF NECESSARY, STRESS "NOT A REFILL")

Cuando usted recibió la medicina, ¿se la dio el farmacéutico en su mano, se la dio el dependiente o cajero, la recogió otra persona, o le entregaron la medicina en su casa?

(16) SP

Handed to you by the pharmacist
(Se la dio el farmacéutico) 1
Handed to you by a clerk or cashier *(Se la dio
el dependiente o cajero)* 2
Picked up by someone else *(La recogió otra
persona)* 3 6 (GO TO QU. 62)
Was delivered *(Fue entregada)* 4 6 (GO TO QU. 62)
Don't know Y
Refused }

**SCRAMBLE START QU. 56 ITEMS
REPRESENT ALTERNATE WORDING BASED ON QU. 55 RESPONSE**

56. Did you talk about ...

Hablo usted acerca de ...

(IF YES:) Were you TOLD about this or did you HAVE TO ASK about this?

(IF "SI":) ?Se lo DIJERON o TUVO USTED QUE PREGUNTAR?

- a. What this medicine would do for you? (*Lo qué la medicina haría para Usted?*)
- b. How much of the medicine to take or use? (*Que cantidad de medicina tomar usar?*)
- c. How often to take or use the medicine? (*Cuan a menudo tomar o usar la medicina?*)
- d. Whether or not the medicine could be refilled? (*Si la receta se puede repetir o no?*)
- e. Any precautions to take while using the medicine? (*Que precauciones tomar mientras usa la medicina?*)
- f. Any possible side effects? (*Posibilidad de algun efecto secundario perjudicial?*)

	-1- (17)	-2- (18)	-3- (19)	-4- (20)	-5- (21)	SP
Yes, told about it (<i>Si, me lo dijeron</i>)	1	1	1	1	1	
Yes, had to ask about it (<i>Si, tuve que preguntar</i>)	2	2	2	2	2	
No.....	3	3	3	3	3	
Don't know.....	Y	Y	Y	Y	Y	
Refused	}	}	}	}	}	

(NO QUESTION 57.)

58. Did anyone in the pharmacy TELL you anything else about the medicine?

Alguien mas en la farmacia le DIJO algo mas acerca de la medicina?

Yes (<i>Si</i>)	1	} 6 (GO TO QU. 61)
No.....	2	
Don't know.....	Y	
Refused	}	

59. What else did they tell you or your household member about the medicine? (**PROBE TO CLARIFY**)

?Que mas le dijeron acerca de la medicina? (PROBE TO CLARIFY)

59.1 Was this information told to you or did you ask about it?

Le dieron esta informacion a usted o tuvo que preguntar?

Told (<i>Se la dieron</i>).....	1	(27) SP
Asked (<i>Tuvo que preguntar</i>)	2	
Don't know.....	Y	
Refused	}	

59.2 What else did they tell you or your household member about the medicine? **(PROBE TO CLARIFY)**

?Que mas le dijeron acerca de la medicina? (PROBE TO CLARIFY)

(28)

No additional response 1 6 **(GO TO QU. 61)**
 Other (specify)..... 2

59.3 Was this information told to you or did you ask about it?

Le dieron a usted esta informacion o tuvo usted que preguntar?

(32) SP

Told (*Se la dieron*)..... 1
 Asked (*Tuvo que preguntar*) 2
 Don't know..... Y
 Refused }

59.4 What else did they tell you or your household member about the medicine? **(PROBE TO CLARIFY)**

?Que mas le dijeron acerca de la medicina? (PROBE TO CLARIFY)

(33)

No additional response 1 6 **(GO TO QU.61)**
 Other (specify)..... 2

59.5 Was this information told to you or did you ask about it?

Le dieron a usted esta informacion o tuvo usted que preguntar?

(37) SP

Told (*Se la dieron*)..... 1
 Asked (*Tuvo que preguntar*) 2
 Don't know..... Y
 Refused]

(NO QUESTION 60)

**ASK QU. 61 IF QU. 13 IS CODE 2, 3 OR 4.
SCRAMBLE START QU. 61 ITEMS**

61. Did anyone in the pharmacy say anything that caused you to ...

Alguien en la farmacia le dijo algo lo cual causo que usted ...

- a.... Check with your doctor before taking or using the medicine? (*Comprobara con su doctor antes de tomar la medicina?*)
- b. .. Consider not taking or using the medicine? (*Considerara no tomar o usar la medicina?*)
- c.... Feel better about taking or using the medicine? (*Se sienta mejor acerca de tomar o usar la medicina?*)

	-1- (38)	-2- (39)	-3 (40)	SP
Yes (<i>Si</i>)	1	1	1	
No	2	2	2	
Don't know.....	Y	Y	Y	
Refused	}	}	}	

**ALL QU. 61 RESPONDENTS SKIP TO QU. 62,
ASK QU. 61. 1 ONLY IF QU. 13 IS CODE 1
SCRAMBLE START QU. 61.1 ITEMS**

61.1. Did anyone in the pharmacy say anything that caused you to . . .

Alguien en la farmacia le dijo algo lo cual causo que usted . . .

Check with the doctor before giving the medicine to the child/grandchild? (*Comprobara con el doctor antes de darle la medicina a su nino (a)/nieto(a)?*)

Consider not giving the medicine to the child/grandchild? (*Considerara no darle la medicina a su nino(a)/nieto(a)?*)

Feel better about giving the medicine to the child/grandchild? (*Se sienta mejor acerca de darle la medicina a su nino(a) nieto(a)?*)

	-1- 10/15	-2- (16)	-3 (17)	SP
Yes (<i>Si</i>)	1	1	1	
No	2	2	2	
Don't know.....	Y	Y	Y	
Refused	}	}	}	

62. Thinking about WRITTEN information, in addition to the label on the medicine container, was there any OTHER WRITTEN information furnished with the medicine?

Piense en la informacion escrita, ademas de lo que decia la etiqueta del frasco de la medicina, ?le dieron cualquier OTRA INFORMACION ESCRITA con la medicina?

06 (6-7)
(41) SP

Yes (<i>Si</i>)	1	} 6 (GO TO QU. 66)
No.....	2	
Don't know.....	Y	
Refused	}	

63. What kind of information was this? Was it ...

?Que clase de informacion fue esta? Fue . . .

- a. Brochures or pamphlets (*Folletos o panfletos*)
- b. Instruction sheets (*Hojas de instrucciones*)
- c. Stickers on the medicine with instructions such as "May cause drowsiness," etc. (*Etiqueta, pegada al frasco de la medicina, con instrucciones, como por ejemplo "Puede que cause somnolencia (adormecimiento)", etc.*)
- d. Some other type of written information (*Cualquier otro tipo de informacion escrita*)

	-1- (42)	-2- (43)	-3- (44)	-4- (45)	SP
Yes (<i>Si</i>)	1	1	1	1	
No.....	2	2	2	2	
Don't know.....	Y	Y	Y	Y	
Refused	}	}	}	}	

ASK QU. 63.1 ONLY IF QU. 63d IS CODE 1, YES

63.1. What other types of written information were furnished with the medicine?

?Que otros tipos de informacion escrita le proporcionaron con la medicina?

ASK QU. 64 ONLY IF QU. 63A IS CODE 1, YES

64. You mentioned that you received brochures or pamphlets with the medicine. Was this information preprinted or was it printed for you at the pharmacy?

*Usted menciona que recibio folletos o panfletos con la medicina.
Fue esta informacion impresa de antemano o fue impresa para usted en la farmacia?*

	(50) SP
Preprinted (<i>Impresa de antemano</i>).....	1
Printed at pharmacy (<i>Impresa en la farmacia</i>).....	2
Both (<i>Ambos</i>).....	3
Don't know.....	Y
Refused	}

ASK QU. 64.1 ONLY IF QU. 63b IS CODE 1, YES

64.1. You mentioned that you received instruction sheets with the medicine. Was this information preprinted or was it printed for you at the pharmacy?

Usted menciona que recibio hojas de instrucciones con la medicina. Fue esta informacion impresa de antemano o fue impresa para usted en la farmacia?

	(51) SP
Preprinted (<i>Impresa de antemano</i>).....	1
Printed at pharmacy (<i>Impresa en la farmacia</i>).....	2
Both (<i>Ambos</i>).....	3
Don't know.....	Y
Refused	}

(NO QUESTION 65)

**CHECK QU. 55 IF CODE 3 OR 4, GO TO QU. 67
DO NOT SCRAMBLE START QU. 66 ITEMS**

66. Now, concerning other sources of information at the pharmacy, was any other information provided to you or your household member through sources such as ... **(READ ITEMS ONE AT A TIME.)**

Ahora, con respecto a otras fuentes de informacion en la farmacia, le proporcionaron a usted o a otro miembro de su casa cualquier otra informacion a traves de otros medios como por ejemplo ...

- a. Reference books (*Libros para referencias*)
- b. Video screens (*Pantalla de videos*)
- c. Audio tapes or cassettes (*Cintas o cassettes de audio*)
- d. Computer terminals (*Computadoras*)
- e. Any other automated source (*Cualquier otra fuente de informacion automatizada*)

	-1-	-2-	-3-	-4-	-5-	
	(52)	(53)	(54)	(55)	(56)	SP
Yes (Si)	1	1	1	1	1	
No.....	2	2	2	2	2	
Don't know.....	Y	Y	Y	Y	Y	
Refused	}	}	}	}	}	}

ASK QU. 66.1 ONLY IF QU. 66e IS CODE 1, YES

66.1. Through what other automated sources at the pharmacy did you or your household member get information about the medicine? **(PROBE ONCE:)** What others?

A traves de que otras fuentes de informacion automatizadas en la farmacia recibio usted u otro miembro de su casa informacion acerca de la medicina?

(PROBE ONCE:) *Cuales otras?*

REPRESENT ALTERNATE WORDING BASED ON QU. 10 RESPONSE, ALLOW ONLY ONE RESPONSE

67. (Was this prescription/were these prescriptions) filled in a . . .

Donde obtuvo usted (ESTA RECETA/ESTAS RECETAS)? En una . . . **(READ LIST.)**

	(61)
Chain drug store (<i>Farmacia de cadena</i>)	1
An independent drug store, or (<i>Una farmacia independiente</i>)	2
Someplace else (SPECIFY) (<i>Otro lugar</i>)	3
(<i>ESPECIFIQUE</i>)	Y
Don't know	Y
Refused	{

DOCTOR'S OFFICE EXPERIENCE

REPRESENT FIRST SET OF WORDING IF VERSION 3 AND SECOND SET OF WORDING IF VERSION 4

Still thinking of your household member's most recent NEW prescription.

(Continue pensando en su mas reciente receta NUEVA) que obtuvo para un miembro de su casa.)

From now on please think only of the NEW prescriptions you had filled for your household member MOST RECENTLY at a pharmacy.

De ahora en adelante, por favor piense solamente en la NUEVA receta, que no puede LLENAR DE NUEVO, que usted obtuvo MAS RECIENTEMENTE en una farmacia para un miembro de su casa...

68. When the DOCTOR prescribed the medicine for your household member did the doctor or anyone in the office tell you about the medicine?

(INTERVIEWER NOTE: IF NECESSARY, STRESS "NOT A REFILL")

Quando el DOCTOR le receto la medicina para un miembro de su casa, alguien en la oficina o el doctor le dijo algo acerca de la medicina?

- | | | |
|-----------------|---------|--------------------|
| | (14) SP | |
| Yes (Si) | 1 | } 6 (GO TO QU. 77) |
| No..... | 2 | |
| Don't know..... | Y | |
| Refused | } | |

69. Who told you or your household member about the medicine in the doctor's office?

(DO NOT READ LIST. PROBE ONCE:) Anyone else?

?Quien le hablo a usted o a un miembro de su casa acerca de la medicina en la oficina del doctor?

(DO NOT READ LIST. PROBE ONCE:) Alguien mas?

- | | |
|--|------|
| | (15) |
| Doctor | 1 |
| Nurse (Enfermera)..... | 2 |
| Secretary/Clerk } (Secretaria/oficinista)..... | 3 |
| Technician/Technologist (Tecnico/tecnologo)..... | 4 |
| Other (specify)..... | 5 |
| Don't know..... | Y |
| Refused | } |

**REPRESENT ALL QU. 69 MENTIONS IN BLANK,
SCRAMBLE START QU. 70 ITEMS**

Now I'd like to ask some questions concerning the conversation between you or your household member and the **(INSERT ALL QU. 69 MENTIONS)**
(Ahora me gustaria hacerle algunas preguntas con respecto a la CONVERSACION entre usted o un miembro de su casa y) at the doctor's office. (en la oficina del doctor.)

70. Did you or your household member talk about ...

HABLO usted o el miembro de su casa acerca de ...

(IF YES:) Were you told about this or did you have to ask about it?

(IF "SI":) ?Se lo DIJERON o TUVO usted que PREGUNTAR?

- a. What this medicine would do for you? (*Lo qué la medicina haría para Usted?*)
- b. How much of the medicine to take or use? (*Que cantidad de medicina tomar o usar?*)
- c. How often to take or use the medicine? (*Cuan a mendo tomar o usar la medicina?*)
- d. Whether or not the medicine could be refilled? (*Si la receta se puede repetir o no?*)
- e. Any precautions to take while using the medicine? (*Que precauciones tomar mientras usa la medicina?*)
- f. Any possible side effects? (*Posibilidad de algun efecto secundario perjudicial?*)

	-1- (19)	-2- (20)	-3- (21)	-4- (22)	-5- (23)	SP
Yes, told about it (<i>Si, me lo dijeron</i>)	1	1	1	1	1	
Yes, had to ask about it (<i>Si, tuve que preguntar</i>)	2	2	2	2	2	
No.....	3	3	3	3	3	
Don't know.....	Y	Y	Y	Y	Y	
Refused	}	}	}	}	}	

(NO QUESTION 71)

72. Did anyone in the doctor's office TELL you or your household member anything else about the medicine?
(Alguien mas en la oficina del doctor le DIJO algo mas acerca de la medicina a usted o a un miembro de su casa?)

	(24) SP	
Yes (<i>Si</i>)	1	} 6 (GO TO QU. 75)
No.....	2	
Don't know.....	Y	
Refused	}	

73. What else did they tell you or your household member about the medicine?
(PROBE TO CLARIFY)

?Que mas le dijeron a usted o a un miembro de su casa acerca de la medicina?
(PROBE TO CLARIFY)

73.1. Was this information told to you or did you ask about it?

Le dieron esta informacion a usted o tuvo que preguntar?

	(29) SP
Told (<i>Se la dieron</i>).....	1
Asked (<i>Tuvo que preguntar</i>)	2
Don't know	Y
Refused	}

73.2. What else did they tell you or your household member about the medicine?

(PROBE TO CLARIFY)

?Que mas le dijeron a usted o a un miembro de su casa acerca de la medicina?

(PROBE TO CLARIFY)

(30)

No additional response	1	6 (GO TO QU. 75)
Other (specify)	2	

73.3. Was this information told to you or did you ask about it?

Le dieron a usted esta informacion o tuvo usted que preguntar?

	(34) SP
Told (<i>Se la dieron</i>).....	1
Asked (<i>Tuvo que preguntar</i>)	2
Don't know	Y
Refused	}

73.4. What else did they tell you or your household member about the medicine?

(PROBE TO CLARIFY)

?Que mas le dijeron a usted o a un miembro de su casa acerca de la medicina?

(PROBE TO CLARIFY)

(35)

No additional response	1	6 (GO TO QU.75)
Other (specify)	2	

73.5. Was this information told to you or did you ask about it?

Le dieron a usted esta informacion o tuvo usted que preguntar?

	(39) SP
Told (<i>Se la dieron</i>).....	1
Asked (<i>Tuvo que preguntar</i>)	2
Don't know	Y
Refused	}

(NO QUESTION 74)

75. Did anything they said cause you or your household member to ... **(READ ITEMS ONE AT A TIME.)**

Le dijeron algo lo cual causo que usted o un miembro de su casa ...

- a. Consider not taking or using the medicine? (*Considerara no tomar o usar la medicina?*)
- b. Feel better about taking or using the medicine? (*Se sienta mejor acerca de tomar o usar la medicina?*)

	-1-	-2-	
	(40)	(41)	SP
Yes (Si)	1	1	
No.....	2	2	
Don't know.....	Y	Y	
Refused.....	}	}	

(NO QUESTION 76)

IF QU. 14 IS CODE 2, SKIP TO QU. 81

77. Thinking about WRITTEN information, did the doctor or anyone in the office give you or your household member any WRITTEN information about the medicine? (*Pensando en informacion ESCRITA, le dio el doctor o alguien en la oficina del doctor alguna informacion ESCRITA acerca de la medicina a usted o algun miembro de su familia?*)

	(43) SP	
Yes (Si)	1	} 6 (GO TO QU. 80)
No.....	2	
Don't know.....	Y	
Refused.....	}	

DO NOT ROTATE START FOR QU. 78 ITEMS

78. What kind of information was this? Was it ... **(READ ITEMS ONE AT A TIME)**

Que clase informacion fue esta? Fue ...

- a. Brochures or pamphlets (*Folletos o panfletos*)
- b. Instruction sheets (*Hojas de instrucciones*)
- c. Some other type of written information (*Cualquier otro tipo de informacion escrita*)

	-1-	-2-	-3-	
	(44)	(45)	(46)	SP
Yes (Si)	1	1	1	
No.....	2	2	2	
Don't know.....	Y	Y	Y	
Refused.....	}	}	}	

ASK QU. 78.1 ONLY IF QU. 78c IS CODE 1, YES
--

- 78.1 What other types of written information about the medicine did you or your household member receive?
?Que otros tipos de informacion escrita acerca de la medicina recibio usted o algun miembro de su casa?

ASK QU. 79 ONLY IF QU. 78a IS CODE 1, YES
--

79. You mentioned that you or your household member received brochures or pamphlets with the medicine. Was this information preprinted or did a computer print it for you at the doctor's office? *(Usted menciona que usted o un miembro de su casa recibio folletos o panfletos con la medicina. ?Fue esta informacion impresa de antemano o la imprimio una computadora para usted en la oficina del doctor?)*

(51) SP

Preprinted (<i>Impresa de antemano</i>)	1
Printed at doctor's office (<i>Impresa en la oficina del doctor</i>)	2
Both (<i>Ambos</i>)	3
Don't know	Y
Refused	}

ASK QU. 79.1 ONLY IF QU. 79b IS CODE 1, YES
--

- 79.1. You mentioned that you or your household member received instruction sheets with the medicine. Was this information preprinted or did a computer print it for you at the doctor's office? *(Usted menciona que usted o un miembro de su casa recibio hojas de instrucciones con la medicina. Fue esta informacion impresa de antemano o la imprimio una computadora para usted en la oficina del doctor?)*

(52) SP

Preprinted (<i>Impresa de antemano</i>)	1
Printed at doctor's office (<i>Impresa en la oficina del doctor</i>)	2
Both (<i>Ambos</i>)	3
Don't know	Y
Refused	}

DO NOT SCRAMBLE START QU. 80 ITEMS

80. Now, concerning other sources of information at the doctor's office, was any other information provided to you or your household member through sources such as ... **(READ ONE AT A TIME.)**

Ahora, con respecto a otras fuentes de informacion en la oficina del doctor, le proporcionaron a usted o a otro miembro de su casa cualquier otra informacion a traves de otros medios como por ejemplo ... ?

- a. Reference books (*Libros para referencia*)
- b. Video screens (*Pantalla de videos*)
- c. Audio tapes or cassettes (*Cintas o cassettes de audio*)
- d. Computer terminals (*Computadors*)
- e. E-mail between the doctor's office and you (*Correo electronico entre la oficina del doctor y usted*)
- f. Any other automated source (*Cualquier otra fuente de informacion automatizada*)

	-1- (53)	-2- (54)	-3- (55)	-4- (56)	-5- (57)	SP
Yes (<i>Si</i>)	1	1	1	1	1	
No.....	2	2	2	2	2	
Don't know.....	Y	Y	Y	Y	Y	
Refused	}	}	}	}	}	

ASK QU. 80.1 ONLY IF QU. 80f IS CODE 1, YES
--

- 80.1. Through what other automated source at the doctor's office did you or your household member get information about the medicine?

(PROBE ONCE:) What others?

A traves de que otras fuentes de informacion automatizadas en la oficina del doctor recibio usted o un miembro de su casa informacion acerca de la medicina?

(PROBE ONCE:) *Cuales otras?*

SCRAMBLE START QU. 81 ITEMS EXCEPT "OTHER"

81. NOT including information you or your household member received from the pharmacy or from your doctor's office, did you or your household member find out anything about your medicine from ... **(READ ITEMS ONE AT A TIME)**

SIN incluir la informacion que usted o un miembro de su casa recibio en la farmacia o en la oficina de su doctor, descubrio usted o algun miembro de su casa algo mas acerca de su medicina por medio de ... ?

- a. Reference books (*Libros para referencias*)
- b. Magazines (*Revistas*) (If Yes, ask Q81b.1)
- c. Newspapers (*Periodicos*) (If Yes, ask 81c.1)
- d. The television (*La television*) (If Yes, ask Q81d.1)
- e. The radio (*La radio*)
- f. Audio tapes or cassettes (*Cintas o cassettes de audio*)
- g. Internet (*Internet*) (If YES, ask Q81.5)
- h. Computer terminals (*Computadoras*)
- i. Friends, relatives, or neighbors (*Amistades, familiares o vecinos*)
- j. Health newsletters (*Circulares de salud*)

	-1- (62)	-2- (63)	-3- (64)	-4- (65)	-5- (66)	-6- (67)	-7- (68)	-8- (69)	-9- (70)	-10- (71)	SP
Yes (<i>Si</i>)	1	1	1	1	1	1	1	1	1	1	
No	2	2	2	2	2	2	2	2	2	2	
Don't know.....	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
Refused	}	}	}	}	}	}	}	}	}	}	

- 81b.1 Did you get the information from: (*Usted consiguió la información de*):

- a. An ad? (*Un anuncio?*)
- b. An article? (*Un artículo?*)

	-a- ()	-b- ()
Yes (<i>Si</i>)	1	1
No	2	2
Don't know.....	Y	Y
Refused	}	}

- 81c.1 Did you get the information from: (*Usted consiguió la información de*):

- a. An ad? (*Un anuncio?*)
- b. An article? (*Un artículo?*)

	-a- ()	-b- ()
Yes (<i>Si</i>)	1	1
No	2	2
Don't know.....	Y	Y
Refused	}	}

81d.1 Did you get the information from: (*Usted consiguió la información de*):

- a. A news program? (*Las noticias?*)
- b. A talk show?
- c. An ad? (*Un anuncio?*)

	-a-	-b-	-c-
	()	()	()
Yes (Si)	1	1	1
No	2	2	2
Don't know.....	Y	Y	Y
Refused	}	}	}

81.k. NOT including information you or your household member received from the pharmacy or from your doctor's office, did you or your household member find out anything about your medicine from SOME OTHER SOURCE?

SIN incluir la informacion que usted o un miembro de su casa recibioen la farmacia o en la oficina de su doctor, descubrio usted o algun miembro de su casa algo mas acerca de su medicina por medio de ALGUNA OTRA DE SALUD?

	(72) SP
Yes (Si)	1
No.....	2
Don't know.....	Y
Refused	}

ASK QU. 81.1 ONLY IF QU. 81a IS CODE 1, YES

81.1. From which REFERENCE BOOKS did you or your household member find out something about your medicine?
(PROBE FOR TITLES)

En que LIBROS DE REFERENCIAS descubrio usted o un miembro de su casa algo acerca de su medicina?
(PROBE FOR TITLES)

ASK QU. 81.4 ONLY IF QU. 81k IS CODE 1, YES

81.4. From what OTHER SOURCES did you or your household member find out something about your medicine?
En que OTRAS FUENTES descubrio usted o un miembro de su casa algo mas acerca de su medicina?

ASK Q81.5 ONLY IF Q81G IS CODE 1 YES (INTERNET)

81.5 From where on the internet did you find information about your medicine? (*Dónde en el Internet usted encontró la información sobre su medicina?*)

- h. A chat room? (*Un chat room?*)
- i. A drug company website? (*Un website de la compañía de la droga?*)
- j. A news or magazine website? (*Un website de noticias or revista?*)
- k. A government website? (*Un website del gobierno?*)
- l. A health informaiton website? (*Un website dedicado a infomacion de la salud?*)
- m. A specific persons home page? or (*Home Page de una persona especifica?*) o
- n. Some other location on the internet? (*Algun otro lugar en el Internet?*)

	-a-	-b-	-c-	-d-	-e-	-f-	-g-
	()	()	()	()	()	()	()
Yes (Si)	1	1	1	1	1	1	1
No	2	2	2	2	2	2	2
Don't know.....	Y	Y	Y	Y	Y	Y	Y
Refused	}	}	}	}	}	}	}

IF CODE 2, 8 OR 9 TO ALL QU. 81 ITEMS, GO TO QU. 84
ASK QU. 82 IF QU.13 IS CODE 2, 3 OR 4
SCRAMBLE START QU. 82 ITEMS

82. Did anything you read or heard from these sources ... **(READ ITEMS ONE AT A TIME)**

Algo que usted oyo o leyo a traves de estas fuentes causo que usted ...

Cause you to ask your doctor or pharmacist about what you read or heard? (*Le preguntara al doctor o farmaceutico acerca de lo que usted oyo o leyo?*)

Cause you to consider not taking or using the medicine? (*Considerara no tomar o usar la medicina?*)

Help you to feel better about taking or using the medicine? (*Se sienta mejor acerca de tomar o usar la medicina?*)

	-1-	-2-	-3-	
	(30)	(31)	(32)	SP
Yes (Si)	1	1	1	
No.....	2	2	2	
Don't know.....	Y	Y	Y	
Refused	}	}	}	

**ALL QU. 82 RESPONDENTS SKIP TO QU. 83
ASK QU. 82.1 ONLY IF QU. 13 IS CODE 1
SCRAMBLE START QU.82.1 ITEMS**

82.1. Did anything you read or heard from these sources ...

Algo que usted oyo o leyo a traves de estas fuentes causo que usted ...

- a. Cause you to ask your doctor or pharmacist about what you read or heard? (*Le preguntara al doctor o farmaceutico acerca de lo que usted oyo o leyo?*)
- b. Cause you to consider not giving the medicine to the child/grandchild? (*Considerara no darle la medicina a su nino(a)/nieto(a)?*)
- c. Help you to feel better about giving the medicine to the child/grandchild? (*Se sienta mejor acerca de darle la medicina su nino(a)/nieto(a)?*)

	-1- 10/18	-2- (19)	-3- (20)	SP
Yes (Si)	1	1	1	
No.....	2	2	2	
Don't know.....	Y	Y	Y	
Refused.....	}	}	}	

IF CODE 2, 8 OR 9 IN ALL QU. 82 OR QU. 82.1 ITEMS, GO TO QU. 84

83. Specifically, what did you or your household member read or hear about your medicine? **(PROBE FULLY.)**

Especificamente, ¿que fue lo que usted o un miembro de su casa oyo o leyo acerca de su medicina? (PROBE FULLY.)

84. Please tell me for what condition the (medicine was/medicines were) prescribed. **(PROBE TO CLARIFY)**

Por favor digame por que fue que recetaron (LA MEDICINA/LAS MEDICINAS)? (PROBE TO CLARIFY)

There are a number of additional ways in which people may receive information about the prescription medicines they take. I would like you now to think back to **(INSERT DATE 3 MONTHS AGO)**. *Hay un numero de maneras adicionales en que la gente puede recibir informacion sobre las medicinas de prescripcion que ellos toman. Quisiera que Ud. ahora piense de nuevo a That was three months ago. Eso fue hace tres meses.*

(RANDOM ROTATION Q85A TO Q85I)

85a. Since **(INSERT DATE 3 MONTHS AGO)** have you received any information about any prescription medicines in the following ways:

Desde que, ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did you or your household member receive any newsletters, brochures, or other information in the mail about prescription medicines that were sent to you by a PHARMACY? (*Recibio Ud. cualquier boletines, Folletos, u otra informacion en el correo sobre medicinas de prescripcion que se envio a Ud. por una FARMACIA?*)

(41) SP

Yes (Si)	1
No.....	2
Don't know.....	Y

Refused }

85b. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que, ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did you or your household member receive any newsletters, brochures, or other information in the mail or by e-mail that were sent to you by a DRUG COMPANY? *(Recibio Ud. cualquier boletines, folletos, u otra informacion en el correo o por correo electronico que se le envio a Ud. por una COMPANIA DE DROGA?)*

- (43) SP
- Yes (Si) 1
 - No..... 2
 - Don't know Y
 - Refused }

(PRESENT Q85G IMMEDIATELY AFTER Q85C)

85c. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que, ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did you see any advertisements for any of the prescription medicines YOU OR YOUR HOUSEHOLD MEMBER ARE TAKING on television, radio, newspapers, magazines, or the internet? *(Vio Ud. cualquier anuncio sobre cualquier de las medicinas de prescripcion que UD. TOMA por las television, la radio, periodicos, revistas, o el internet?)*

- (45) SP
- Yes (Si) 1
 - No..... 2
 - Don't know Y
 - Refused }

85g. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que, ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did you or your household member ask your doctor about taking any medicines that you may have seen advertised on television, radio, newspapers, magazines, or the internet? *(Pidio Ud. a su doctor para tomar cualquier medicinas que Ud. pueda haber visto anunciada sobre la television, radio, periodicos, revistas, o el internet?)*

- (51) SP
- Yes (Si) 1
 - No..... 2
 - Don't know Y
 - Refused }

85d. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que, ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did you or your household member take home any brochures or other written material about any medication from a hospital, health maintenance organization, grocery store, pharmacy, clinic, doctor's office, or any other place? *(Llevo Ud. a casa cualquier folletos u otro material escrito sobre cualquier medicacion de un hospital, organizacion de mantenimiento de salud, tienda de comestibles, farmacia, clinica, oficina de doctor, o cualquier otro lugar?)*

- (47) SP
- Yes (Si) 1
 - No..... 2
 - Don't know Y
 - Refused }

85e. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que, ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did you or your household member receive a sample of any prescription medicine from a doctor or anyone in the doctor's office? *(Recibio Ud. un muestreo de cualquier medicina de prescripcion de un doctor o alguien mas en la oficina de doctor?)*

(49) SP

Yes (Si) 1
 No..... 2
 Don't know Y
 Refused }

ASK ONLY IF YES AT Q.85e

85f. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que, ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did you or your household member receive any written information with it?

Recibio Ud. cualquier informacion escrita con ello?

(50) SP

Yes (Si) 1
 No..... 2
 Don't know Y
 Refused }

85h. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que, ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did anyone at the pharmacy ask you or your household member if you would like to talk with the pharmacist about any of the medicines?

(Le pidio alguien en la farmacia si Ud. le gustaria hablar con el farmaceutico sobre algunos de sus medicamentos?)

(53) SP

Yes (Si) 1
 No..... 2
 Don't know Y
 Refused }

85i. Since **(INSERT DATE 3 MONTHS AGO)**, have you received any information about any prescription medicines in the following ways:

Desde que, ha recibido Ud. cualquier informacion sobre medicinas de prescripcion de la manera siguiente:

Did a doctor, pharmacist, nurse, physician assistant, or other health professional discuss or review with you all the MEDICATIONS you or your household member take? *(Discutio o reviso un doctor, farmaceutico, enfermera, asistente de medico, o otro profesional de salud con Ud. TODAS LAS MEDICACIONES QUE UD. TOMA?)*

(55) SP

Yes (Si) 1
 No..... 2
 Don't know Y
 Refused }

Now, I have a few questions for classification purposes only.

Ahora tengo alguna preguntas con proposito de clasificacion solamente.

86. How many adults age 18 and older including yourself are currently living in your household?

Cuantos adultos de 18 anos de edad o mas, incluyendose a usted mismo(a) estan viviendo en su casa en este momento?

1 TO 15 (14-15)
 Refused {

87. How many children under 18 are currently living in your household?

Cuantos ninos de menos de 18 anos de edad estan viviendo en su casa en este momento?

0 TO 15 (16-17)
 Refused {

88. Would you please tell me what is your age?

Por favor, ¿me puede decir su edad?

18 TO 99 (18-19)
 Refused {

89. Would you please tell me the last grade of school YOU completed? **(READ LIST IF NECESSARY).**

*Me puede decir el ultimo grado de escuela que USTED completo? **(READ LIST, IF NECESSARY)***

(20)
 8th grade or less (*8vo. grado o menos*) 1
 Some high school (*Un poco de escuela secundaria*) 2
 High school graduate (*Graduado de escuela secundaria*) 3
 Some college or vocational school (*Un poco de universidad o escuela vocacional*) 4
 College graduate (*Graduado de universidad*) 5
 Some post graduate (*Algo de postgraduado*) 6
 Finished graduate work (*Termino el postgraduado*) 7
 Other (specify) 8
 Don't know Y
 Refused {

90.1 Are you of Hispanic or Latino origin?

Yes 1
 No 2
 [DON'T READ] DK/NS 8
 [DON'T READ] RF 9

90.2. What is your race? I am going to read you several categories of race. You may choose one or more. Are you.... [ACCEPT MULTIPLE ANSWERS.]

White 1
 Black or African American 2
 Asian 3
 Native Hawaiian or other Pacific Islander 4
 American Indian or Alaskan Native 5
 [DON'T READ] (Volunteered) Hispanic 6
 [DON'T READ] Other [SPECIFY] 7
 [DON'T READ] DK/NS 8
 [DON'T READ] RF 9

91. For classification purposes only, please tell me what your total HOUSEHOLD income was last year BEFORE taxes. Was it . . . ?
(READ LIST)

Por ultimo, y por motivos de clasificacion solamente, por favor digame cual fue la entrada total de SU casa el ano pasado ANTES de quitarle lo impuestos. Fue ...? (READ LIST)

	(28) SP
Less than \$10,000 (<i>Menos de \$10,000</i>).....	1
\$10,000 up to \$20,000 (<i>De \$10,000. a \$20,000</i>)	2 6 (GO TO QU. 93)
\$20,000 up to \$35,000 (<i>De \$20,000. a \$35,000</i>)	3 6 (GO TO QU. 93)
\$35,000 up to \$50,000 (<i>De \$35,000. a \$50,000</i>)	4 6 (GO TO QU. 93)
\$50,000 up to \$75,000 (<i>De \$50,000. a \$75,000</i>)	5 6 (GO TO QU. 93)
\$75,000 or more (<i>\$75,000. o mas</i>)	6 6 (GO TO QU. 93)
Don't know	Y 6 (GO TO QU. 93)
Refused	{ 6 (GO TO QU. 93)

92. Are you currently receiving any government assistance for your medical bills, such as Medicaid?

Esta uste en este momento recibiendo alguna asistencia del gobierno para ayudarle con sus cuentas de doctores, como por ejemplo Medicaid?

	(29) SP
Yes (<i>Si</i>)	1
No.....	2
Don't know	Y
Refused	}

93. In closing, I'd like to verify the number I've dialed. Have I reached you at **(TELEPHONE NUMBER)**?

Para terminar, me gustaria verificar el numero de telefonos que llame. Es este el numero TELNUMBW?)

	(30)
Yes (<i>Si</i>)	1
Other (specify)	2
Refused	{ 6 (GO TO GENDER)

94. Do you have any other residential telephone numbers in addition to **(TELEPHONE NUMBER)**?

Tiene usted algun otro numero de telefono residencial en su casa, aparte del numero EXCHW TELNUMB?

(INTERVIEWER: IF "YES", CONFIRM THAT THIS IS A DIFFERENT TELEPHONE NUMBER -- NOT AN EXTENSION OF THE SAME NUMBER)

	(34) SP
Yes (<i>Si</i>)	1
No.....	2
Don't know	Y
Refused	}

- 94.1 Record sex of respondent.

Anote el sexo del respondiente.

	(35) SP
Male (<i>Masculino</i>).....	1
Female (<i>Femenino</i>).....	2

Those are all the questions I have. Thank you very much for your time and have a nice day/evening.

Estas son todas las preguntas que tengo. Muchisimas gracias por haberlas contestado y que pase usted un buen dia/unas buenas noches.