

NHANES 2005-2006 Questionnaire Variable List
December 2008

Item #	Data File	Component	Item ID	Label
1	ACQ_D	Acculturation	SEQN	Respondent sequence number
2	ACQ_D	Acculturation	ACD010A	English usually spoken at home
3	ACQ_D	Acculturation	ACD010B	Spanish usually spoken at home
4	ACQ_D	Acculturation	ACD010C	Other language(s) usually spoken at home
5	ACQ_D	Acculturation	ACD040	Language(s) usually spoken at home
6	AGQ_D	Allergy	SEQN	Respondent sequence number
7	AGQ_D	Allergy	AGQ010	Doctor told have hay fever
8	AGQ_D	Allergy	AGD020	Age when first had hay fever
9	AGQ_D	Allergy	AGQ030	Episode of hay fever in past 12 months
10	AGQ_D	Allergy	AGQ040	Doctor told have allergies
11	AGQ_D	Allergy	AGD050	Age when first had allergies
12	AGQ_D	Allergy	AGQ060	Allergy symptoms in past 12 months
13	AGQ_D	Allergy	AGQ070	Removed animal from home due to allergy
14	AGQ_D	Allergy	AGQ080A	Kind of pet removed - dog
15	AGQ_D	Allergy	AGQ080B	Kind of pet removed - cat
16	AGQ_D	Allergy	AGQ080C	Kind of pet removed - small furry animal
17	AGQ_D	Allergy	AGQ090	Avoided pets because of allergies
18	AGQ_D	Allergy	AGQ100	Problem with sneezing in past 12 months
19	AGQ_D	Allergy	AGQ110A	Sneezing occurred - in spring
20	AGQ_D	Allergy	AGQ110B	Sneezing occurred - in summer
21	AGQ_D	Allergy	AGQ110C	Sneezing occurred - in fall
22	AGQ_D	Allergy	AGQ110D	Sneezing occurred - in winter

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23	AGQ_D	Allergy	AGQ120	Doctor told have sinus infection
24	AGQ_D	Allergy	AGQ130	Ever had itchy rash at least 6 months
25	AGQ_D	Allergy	AGQ140	Itchy rash at any time in past 12 months
26	AGQ_D	Allergy	AGQ150	Rash cleared up completely
27	AGQ_D	Allergy	AGQ160	Has rash affected places...
28	AGQ_D	Allergy	AGD170	Age rash first occurred
29	AGQ_D	Allergy	AGQ180	Doctor told have eczema
30	ALQ_D	Alcohol Use	SEQN	Respondent sequence number
31	ALQ_D	Alcohol Use	ALQ101	Had at least 12 alcohol drinks/1 yr?
32	ALQ_D	Alcohol Use	ALQ110	Had at least 12 alcohol drinks/lifetime?
33	ALQ_D	Alcohol Use	ALQ120Q	How often drink alcohol over past 12 mos
34	ALQ_D	Alcohol Use	ALQ120U	# days drink alcohol per wk, mo, yr
35	ALQ_D	Alcohol Use	ALQ130	Avg # alcoholic drinks/day -past 12 mos
36	ALQ_D	Alcohol Use	ALQ140Q	#days have 5 or more drinks/past 12 mos
37	ALQ_D	Alcohol Use	ALQ140U	# days per week, month, year?
38	ALQ_D	Alcohol Use	ALQ150	Ever have 5 or more drinks every day?
39	BHQ_D	Bowel Health	SEQN	Respondent sequence number
40	BHQ_D	Bowel Health	BHQ010	Bowel leakage consisted of gas?
41	BHQ_D	Bowel Health	BHQ020	Bowel leakage consisted of mucus?
42	BHQ_D	Bowel Health	BHQ030	Bowel leakage consisted of liquid?
43	BHQ_D	Bowel Health	BHQ040	Bowel leakage consisted of solid stool?
44	BHQ_D	Bowel Health	BHD050	How often have bowel movements?

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45	BHQ_D	Bowel Health	BHQ060	Common Stool Type
46	BPQ_D	Blood Pressure and Cholesterol	SEQN	Respondent sequence number
47	BPQ_D	Blood Pressure and Cholesterol	BPQ020	Ever told you had high blood pressure
48	BPQ_D	Blood Pressure and Cholesterol	BPQ030	Told had high blood pressure - 2+ times
49	BPQ_D	Blood Pressure and Cholesterol	BPQ040A	Taking prescription for hypertension
50	BPQ_D	Blood Pressure and Cholesterol	BPQ050A	Now taking prescribed medicine for HBP
51	BPQ_D	Blood Pressure and Cholesterol	BPQ060	Ever had blood cholesterol checked
52	BPQ_D	Blood Pressure and Cholesterol	BPQ070	When blood cholesterol last checked
53	BPQ_D	Blood Pressure and Cholesterol	BPQ080	Doctor told you - high cholesterol level
54	BPQ_D	Blood Pressure and Cholesterol	BPQ090A	Told to eat less fat for cholesterol
55	BPQ_D	Blood Pressure and Cholesterol	BPQ090B	Told to reduce weight for cholesterol
56	BPQ_D	Blood Pressure and Cholesterol	BPQ090C	Told to exercise more for cholesterol
57	BPQ_D	Blood Pressure and Cholesterol	BPQ090D	Told to take prescriptn for cholesterol
58	BPQ_D	Blood Pressure and Cholesterol	BPQ100A	Now eating fewer high fat foods
59	BPQ_D	Blood Pressure and Cholesterol	BPQ100B	Now controlling weight
60	BPQ_D	Blood Pressure and Cholesterol	BPQ100C	Now increasing exercise
61	BPQ_D	Blood Pressure and Cholesterol	BPQ100D	Now taking prescribed medicine
62	CDQ_D	Cardiovascular Disease	SEQN	Respondent sequence number
63	CDQ_D	Cardiovascular Disease	CDQ001	SP ever had pain or discomfort in chest
64	CDQ_D	Cardiovascular Disease	CDQ002	SP get it walking uphill or in a hurry
65	CDQ_D	Cardiovascular Disease	CDQ003	During an ordinary pace on level ground
66	CDQ_D	Cardiovascular Disease	CDQ004	If so does SP continue or slow down

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67	CDQ_D	Cardiovascular Disease	CDQ005	Does standing relieve pain/discomfort
68	CDQ_D	Cardiovascular Disease	CDQ006	How soon is the pain relieved
69	CDQ_D	Cardiovascular Disease	CDQ009A	Pain in right arm
70	CDQ_D	Cardiovascular Disease	CDQ009B	Pain in right chest
71	CDQ_D	Cardiovascular Disease	CDQ009C	Pain in neck
72	CDQ_D	Cardiovascular Disease	CDQ009D	Pain in upper sternum
73	CDQ_D	Cardiovascular Disease	CDQ009E	Pain in lower sternum
74	CDQ_D	Cardiovascular Disease	CDQ009F	Pain in left chest
75	CDQ_D	Cardiovascular Disease	CDQ009G	Pain in left arm
76	CDQ_D	Cardiovascular Disease	CDQ009H	Pain in epigastric area
77	CDQ_D	Cardiovascular Disease	CDQ008	Severe pain in chest more than half hour
78	CDQ_D	Cardiovascular Disease	CDQ010	Shortness of breath on stairs/inclines
79	DBQ_D	Diet Behavior and Nutrition	SEQN	Respondent sequence number
80	DBQ_D	Diet Behavior and Nutrition	DBQ010	Ever breastfed or fed breastmilk
81	DBQ_D	Diet Behavior and Nutrition	DBD020	Age started eating other foods(days)
82	DBQ_D	Diet Behavior and Nutrition	DBD030	Age stopped breastfeeding(days)
83	DBQ_D	Diet Behavior and Nutrition	DBD040	Age first fed formula daily(days)
84	DBQ_D	Diet Behavior and Nutrition	DBD050	Age stopped receiving formula(days)
85	DBQ_D	Diet Behavior and Nutrition	DBD060	Age first fed milk daily basis(days)
86	DBQ_D	Diet Behavior and Nutrition	DBD072A	Type of milk first fed-whole milk
87	DBQ_D	Diet Behavior and Nutrition	DBD072B	Type of milk first fed-2% milk
88	DBQ_D	Diet Behavior and Nutrition	DBD072C	Type of milk first fed-1% milk
89	DBQ_D	Diet Behavior and Nutrition	DBD072D	Type of milk first fed-fat free milk
90	DBQ_D	Diet Behavior and Nutrition	DBD072U	Type of milk first fed - other
91	DBQ_D	Diet Behavior and Nutrition	DBD080	Age started eating solid foods(days)

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92	DBQ_D	Diet Behavior and Nutrition	DBQ700	How healthy is the diet
93	DBQ_D	Diet Behavior and Nutrition	DBQ197	Past 30 day milk product consumption
94	DBQ_D	Diet Behavior and Nutrition	DBD222A	You drink whole or regular milk
95	DBQ_D	Diet Behavior and Nutrition	DBD222B	You drink 2% fat milk
96	DBQ_D	Diet Behavior and Nutrition	DBD222C	You drink 1% fat milk
97	DBQ_D	Diet Behavior and Nutrition	DBD222D	You drink fat-free or skim milk
98	DBQ_D	Diet Behavior and Nutrition	DBD222U	You drink another type of milk
99	DBQ_D	Diet Behavior and Nutrition	DBQ229	Regular milk use 5 times per week
100	DBQ_D	Diet Behavior and Nutrition	DBQ235A	How often drank milk age 5-12
101	DBQ_D	Diet Behavior and Nutrition	DBQ235B	How often drank milk age 13-17
102	DBQ_D	Diet Behavior and Nutrition	DBQ235C	How often drank milk age 18-35
103	DBQ_D	Diet Behavior and Nutrition	DBQ301	Community/Government meals delivered
104	DBQ_D	Diet Behavior and Nutrition	DBQ330	Eat meals at Community/Senior center
105	DBQ_D	Diet Behavior and Nutrition	DBQ360	Attend kindergarten thru high school
106	DBQ_D	Diet Behavior and Nutrition	DBQ370	School serves school lunches
107	DBQ_D	Diet Behavior and Nutrition	DBD381	# of times/week get school lunch
108	DBQ_D	Diet Behavior and Nutrition	DBQ390	School lunch free, reduced or full price
109	DBQ_D	Diet Behavior and Nutrition	DBQ400	School serve complete breakfast each day
110	DBQ_D	Diet Behavior and Nutrition	DBD411	# of times/week get school breakfast
111	DBQ_D	Diet Behavior and Nutrition	DBQ421	School breakfast free/reduced/full price
112	DBQ_D	Diet Behavior and Nutrition	DBQ424	Summer program meal free/reduced price
113	DBQ_D	Diet Behavior and Nutrition	DBD091	# of times/wk eat meals not from a home

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114	DBQ_D	Diet Behavior and Nutrition	DBQ720	Heard of dietary guidelines?
115	DBQ_D	Diet Behavior and Nutrition	DBQ730	Heard of food guide pyramid?
116	DBQ_D	Diet Behavior and Nutrition	DBQ740	Heard about 5-a-day program?
117	DBQ_D	Diet Behavior and Nutrition	DBQ750	Use nutrition facts panel on food label
118	DBQ_D	Diet Behavior and Nutrition	DBQ760	Use ingredients list on food label
119	DBQ_D	Diet Behavior and Nutrition	DBQ770	Use serving size info on food label
120	DBQ_D	Diet Behavior and Nutrition	DBQ780	Use health claims on food packages
121	DBQ_D	Diet Behavior and Nutrition	DBQ790	Check calories on food label
122	DBQ_D	Diet Behavior and Nutrition	DBQ800	Check calories from fat on food label
123	DBQ_D	Diet Behavior and Nutrition	DBQ810	Check total fat on food label
124	DBQ_D	Diet Behavior and Nutrition	DBQ820	Check trans fat on food label
125	DBQ_D	Diet Behavior and Nutrition	DBQ830	Check saturated fat on food label
126	DBQ_D	Diet Behavior and Nutrition	DBQ840	Check cholesterol on food label
127	DBQ_D	Diet Behavior and Nutrition	DBQ850	Check sodium on food label
128	DBQ_D	Diet Behavior and Nutrition	DBQ860	Check carbohydrates on food label
129	DBQ_D	Diet Behavior and Nutrition	DBQ870	Check fiber on food label
130	DBQ_D	Diet Behavior and Nutrition	DBQ880	Check sugars on food label
131	DBQ_D	Diet Behavior and Nutrition	DBQ890	Are people born to be fat/thin
132	DEQ_D	Dermatology	SEQN	Respondent sequence number
133	DEQ_D	Dermatology	DED031	Skin reaction to sun after non-exposure
134	DEQ_D	Dermatology	DEQ034A	Stay in the shade?
135	DEQ_D	Dermatology	DEQ034B	Wear hat that shades face and neck?
136	DEQ_D	Dermatology	DEQ034C	Wear a long sleeved shirt
137	DEQ_D	Dermatology	DEQ034D	Use sunscreen?
138	DEQ_D	Dermatology	DEQ036	SPF # of sunscreen use most often?

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139	DEQ_D	Dermatology	DEQ038G	In past yr did you have sunburn?
140	DEQ_D	Dermatology	DED038Q	# of times in past yr you had a sunburn
141	DEQ_D	Dermatology	DEQ053	Ever told had Psoriasis?
142	DEQ_D	Dermatology	DEQ055	How much of a problem has psoriasis been
143	DEQ_D	Dermatology	DEQ057	Is Psoriasis little or extensive?
144	DIQ_D	Diabetes	SEQN	Respondent sequence number
145	DIQ_D	Diabetes	DIQ010	Doctor told you have diabetes
146	DIQ_D	Diabetes	DID040	Age when first told you had diabetes
147	DIQ_D	Diabetes	DIQ220	When was your diabetes diagnosed
148	DIQ_D	Diabetes	DIQ160	Ever told you have prediabetes
149	DIQ_D	Diabetes	DIQ170	Ever told have health risk for diabetes
150	DIQ_D	Diabetes	DIQ180	Had blood tested past three years
151	DIQ_D	Diabetes	DIQ190A	Past yr told control weight
152	DIQ_D	Diabetes	DIQ190B	Past yr told increase physical activity
153	DIQ_D	Diabetes	DIQ190C	Past yr told reduce fat/calories in diet
154	DIQ_D	Diabetes	DIQ200A	Are you controlling weight
155	DIQ_D	Diabetes	DIQ200B	Are you increasing physical activity
156	DIQ_D	Diabetes	DIQ200C	Are you reducing fat/calories in diet
157	DIQ_D	Diabetes	DIQ050	Taking insulin now
158	DIQ_D	Diabetes	DID060	How long taking insulin
159	DIQ_D	Diabetes	DIQ060U	Unit of measure (month/year)
160	DIQ_D	Diabetes	DID070	Take diabetic pills to lower blood sugar
161	DIQ_D	Diabetes	DIQ230	How long ago saw a diabetes specialist
162	DIQ_D	Diabetes	DIQ240	Is there one Dr you see for diabetes

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Item #	Data File	Component	Item ID	Label
163	DIQ_D	Diabetes	DID250	Past year how many times seen doctor
164	DIQ_D	Diabetes	DID260	How often check blood for glucose/sugar
165	DIQ_D	Diabetes	DIQ260U	Unit of measure (day/week/month/year)
166	DIQ_D	Diabetes	DID270	Past year times checked for A1C
167	DIQ_D	Diabetes	DIQ280	What was your last A1C level
168	DIQ_D	Diabetes	DIQ290	What does Dr say A1C should be
169	DIQ_D	Diabetes	DIQ300S	What was your recent SBP
170	DIQ_D	Diabetes	DIQ300D	What was your recent DBP
171	DIQ_D	Diabetes	DID310S	What does Dr say SBP should be
172	DIQ_D	Diabetes	DID310D	What does Dr say DBP should be
173	DIQ_D	Diabetes	DID320	What was most recent LDL number
174	DIQ_D	Diabetes	DID330	What does Dr say LDL should be
175	DIQ_D	Diabetes	DID340	Past year times Dr check feet for sores
176	DIQ_D	Diabetes	DID350	How often do you check your feet
177	DIQ_D	Diabetes	DIQ350U	Unit of measure (day/week/month/year)
178	DIQ_D	Diabetes	DIQ360	Last time had pupils dilated for exam
179	DIQ_D	Diabetes	DIQ080	Diabetes affected eyes/had retinopathy
180	DPQ_D	Depression	SEQN	Respondent sequence number
181	DPQ_D	Depression	DPQ010	Little interest in doing things
182	DPQ_D	Depression	DPQ020	Feeling down, depressed, or hopeless
183	DPQ_D	Depression	DPQ030	Trouble sleeping or sleeping too much
184	DPQ_D	Depression	DPQ040	Feeling tired or having little energy

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185	DPQ_D	Depression	DPQ050	Poor appetite or overeating
186	DPQ_D	Depression	DPQ060	Feeling bad about yourself
187	DPQ_D	Depression	DPQ070	Trouble concentrating on things
188	DPQ_D	Depression	DPQ080	Moving or speaking slowly or too fast
189	DPQ_D	Depression	DPQ090	Thought you would be better off dead
190	DPQ_D	Depression	DPQ100	Difficulty these problems have caused
191	DSQ1_D	Dietary Supplement Use: Supplement Counts	SEQN	Respondent sequence number
192	DSQ1_D	Dietary Supplement Use: Supplement Counts	DSD010	Any Dietary Supplements taken?
193	DSQ1_D	Dietary Supplement Use: Supplement Counts	DSD010AN	Any Antacids Taken?
194	DSQ1_D	Dietary Supplement Use: Supplement Counts	DSDCOUNT	Total # of Dietary Supplements taken
195	DSQ1_D	Dietary Supplement Use: Supplement Counts	DSDANCNT	Total # of Antacids Taken
196	DSQ2_D	Dietary Supplement Use: Participant's Use	SEQN	Respondent sequence number
197	DSQ2_D	Dietary Supplement Use: Participant's Use	DSDSUPID	Supplement ID number
198	DSQ2_D	Dietary Supplement Use: Participant's Use	DSDSUPP	Supplement name
199	DSQ2_D	Dietary Supplement Use: Participant's Use	DSD070	Was container seen?
200	DSQ2_D	Dietary Supplement Use: Participant's Use	DSDMTCH	Matching code
201	DSQ2_D	Dietary Supplement Use: Participant's Use	DSD090	How long supplement taken (days)?

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202	DSQ2_D	Dietary Supplement Use: Participant's Use	DSD103	Days supplement taken, past 30 days
203	DSQ2_D	Dietary Supplement Use: Participant's Use	DSD122Q	Quantity of supplement taken daily
204	DSQ2_D	Dietary Supplement Use: Participant's Use	DSD122U	Dosage form
205	DSQ2_D	Dietary Supplement Use: Participant's Use	DSDANTA	Antacid reported as a dietary supplement
206	DSQ3_D	Dietary Supplement Use: Supplement Info.	DSDSUPID	SUPPLEMENT ID NUMBER
207	DSQ3_D	Dietary Supplement Use: Supplement Info.	DSDSUPP	SUPPLEMENT NAME
208	DSQ3_D	Dietary Supplement Use: Supplement Info.	DSDSRCE	SUPPLEMENT INFORMATION SOURCE
209	DSQ3_D	Dietary Supplement Use: Supplement Info.	DSDTYPE	FORMULATION TYPE
210	DSQ3_D	Dietary Supplement Use: Supplement Info.	DSDSERVQ	SERVING SIZE QUANTITY
211	DSQ3_D	Dietary Supplement Use: Supplement Info.	DSDSERVU	SERVING SIZE UNIT
212	DSQ3_D	Dietary Supplement Use: Supplement Info.	DSDSERVA	ALTERNATIVE SERVING SIZE
213	DSQ3_D	Dietary Supplement Use: Supplement Info.	DSDCNTV	COUNT OF VITAMINS IN THE SUPPLEMENT
214	DSQ3_D	Dietary Supplement Use: Supplement Info.	DSDCNTM	COUNT OF MINERALS IN THE SUPPLEMENT
215	DSQ3_D	Dietary Supplement Use: Supplement Info.	DSDCNTA	COUNT OF AMINO ACIDS IN THE SUPPLEMENT

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216	DSQ3_D	Dietary Supplement Use: Supplement Info.	DSDCNTB	COUNT OF BOTANICALS IN THE SUPPLEMENT
217	DSQ3_D	Dietary Supplement Use: Supplement Info.	DSDCNTO	COUNT OF OTHER INGREDIENTS IN SUPPLEMENT
218	DSQ4_D	Dietary Supplement Use: Ingredient Information	DSDSUPID	SUPPLEMENT ID NUMBER
219	DSQ4_D	Dietary Supplement Use: Ingredient Information	DSDSUPP	SUPPLEMENT NAME
220	DSQ4_D	Dietary Supplement Use: Ingredient Information	DSDINGID	INGREDIENT ID NUMBER
221	DSQ4_D	Dietary Supplement Use: Ingredient Information	DSDINGR	INGREDIENT NAME
222	DSQ4_D	Dietary Supplement Use: Ingredient Information	DSDOPER	INGREDIENT OPERATOR
223	DSQ4_D	Dietary Supplement Use: Ingredient Information	DSDQTY	INGREDIENT QUANTITY
224	DSQ4_D	Dietary Supplement Use: Ingredient Information	DSDUNIT	INGREDIENT UNIT
225	DSQ4_D	Dietary Supplement Use: Ingredient Information	DSDCAT	INGREDIENT CATEGORY
226	DSQ4_D	Dietary Supplement Use: Ingredient Information	DSDBLFLG	BLEND FLAG
227	DSQ5_D	Dietary Supplement Use: Supplement Blend	DSDINGID	INGREDIENT ID NUMBER
228	DSQ5_D	Dietary Supplement Use: Supplement Blend	DSDINGR	INGREDIENT NAME
229	DSQ5_D	Dietary Supplement Use: Supplement Blend	DSDBCID	BLEND COMPONENT ID

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230	DSQ5_D	Dietary Supplement Use: Supplement Blend	DSDBCNAM	BLEND COMPONENT NAME
231	DSQ5_D	Dietary Supplement Use: Supplement Blend	DSDBCCAT	BLEND COMPONENT CATEGORY
232	DUQ_D	Drug Use	SEQN	Respondent sequence number
233	DUQ_D	Drug Use	DUAISC	Interview status code
234	DUQ_D	Drug Use	DUQ200	Ever used marijuana or hashish
235	DUQ_D	Drug Use	DUQ210	Age when first tried marijuana
236	DUQ_D	Drug Use	DUQ220Q	Last time used marijuana or hashish
237	DUQ_D	Drug Use	DUQ220U	Last time used marijuana or hashish/unit
238	DUQ_D	Drug Use	DUQ230	# days used marijuana or hashish/month
239	DUQ_D	Drug Use	DUQ240	Ever used cocaine/heroin/methamphetamine
240	DUQ_D	Drug Use	DUQ250	Ever use any form of cocaine
241	DUQ_D	Drug Use	DUQ260	Age first used cocaine
242	DUQ_D	Drug Use	DUQ270Q	Last time you used cocaine, in any form
243	DUQ_D	Drug Use	DUQ270U	Last time you used cocaine/unit
244	DUQ_D	Drug Use	DUQ272	# of time you used cocaine
245	DUQ_D	Drug Use	DUQ280	# of days used cocaine/month
246	DUQ_D	Drug Use	DUQ290	Ever used heroin
247	DUQ_D	Drug Use	DUQ300	Age first used heroin
248	DUQ_D	Drug Use	DUQ310Q	Last time used heroin
249	DUQ_D	Drug Use	DUQ310U	Last time used heroin/unit
250	DUQ_D	Drug Use	DUQ320	# of days used heroin/month

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251	DUQ_D	Drug Use	DUQ330	Ever used methamphetamine
252	DUQ_D	Drug Use	DUQ340	Age first used methamphetamine
253	DUQ_D	Drug Use	DUQ350Q	Last time used methamphetamine
254	DUQ_D	Drug Use	DUQ350U	Last time used methamphetamine/unit
255	DUQ_D	Drug Use	DUQ352	# times used methamphetamine
256	DUQ_D	Drug Use	DUQ360	# days used methamphetamine/month
257	DUQ_D	Drug Use	DUQ370	Ever use a needle to inject illegal drug
258	DUQ_D	Drug Use	DUQ380A	Drugs injected - Cocaine
259	DUQ_D	Drug Use	DUQ380B	Drugs injected - Heroin
260	DUQ_D	Drug Use	DUQ380C	Drugs injected - Methamphetamine
261	DUQ_D	Drug Use	DUQ380D	Drugs injected - Steroids
262	DUQ_D	Drug Use	DUQ380E	Drugs injected - Any other drugs
263	DUQ_D	Drug Use	DUQ390	Age first injected drugs
264	DUQ_D	Drug Use	DUQ400Q	Last time injected drugs
265	DUQ_D	Drug Use	DUQ400U	Last time injected drugs/unit
266	DUQ_D	Drug Use	DUQ410	# times injected drugs/lifetime
267	DUQ_D	Drug Use	DUQ420	How often did you inject drugs
268	DUQ_D	Drug Use	DUQ430	Ever been in rehabilitation program
269	ECQ_D	Early Childhood	SEQN	Respondent sequence number
270	ECQ_D	Early Childhood	ECD010	Mother's age when born
271	ECQ_D	Early Childhood	ECQ020	Mother smoked when pregnant
272	ECQ_D	Early Childhood	ECQ030	Mother quit smoking while pregnant
273	ECQ_D	Early Childhood	ECQ040	Mother quit smoking while pregnant (mo)
274	ECQ_D	Early Childhood	ECQ060	Receive newborn care at health facility
275	ECQ_D	Early Childhood	ECD070A	Weight at birth, pounds

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276	ECQ_D	Early Childhood	ECD070B	Weight at birth, ounces
277	ECQ_D	Early Childhood	ECQ080	Weight more/less than 5.5 lbs
278	ECQ_D	Early Childhood	ECQ090	Weight more/less than 9.0 lbs
279	ECQ_D	Early Childhood	WHQ030E	How do you consider your weight
280	ECQ_D	Early Childhood	MCQ080E	Doctor told you that {SP} was overweight
281	ECQ_D	Early Childhood	ECQ150	Doing anything to help control weight?
282	ECQ_D	Early Childhood	FSQ121	Now attend headstart
283	FSQ_D	Food Security	SEQN	Respondent sequence number
284	FSQ_D	Food Security	FSD032A	HH Worried run out of food
285	FSQ_D	Food Security	FSD032B	HH Food didn't last
286	FSQ_D	Food Security	FSD032C	HH Couldn't afford balanced meals
287	FSQ_D	Food Security	FSD032D	HH Relied on low-cost food for child
288	FSQ_D	Food Security	FSD032E	HH Couldn't feed child balanced meal
289	FSQ_D	Food Security	FSD032F	HH Child not eating enough
290	FSQ_D	Food Security	FSD041	HH Adults cut size or skip meals
291	FSQ_D	Food Security	FSD052	HH How often adults cut size/skip meals
292	FSQ_D	Food Security	FSD061	HH Eat less than should
293	FSQ_D	Food Security	FSD071	HH Hungry, but didn't eat
294	FSQ_D	Food Security	FSD081	HH Lost weight, no money for food
295	FSQ_D	Food Security	FSD092	HH Adults not eat whole day
296	FSQ_D	Food Security	FSD102	HH How often adults not eat for day
297	FSQ_D	Food Security	FSD111	HH Cut size of child meals
298	FSQ_D	Food Security	FSD122	HH Child skip meals
299	FSQ_D	Food Security	FSD132	HH How often child skip meals

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300	FSQ_D	Food Security	FSD141	HH Child hungry in last 12 months
301	FSQ_D	Food Security	FSD146	HH Child not eat whole day
302	FSQ_D	Food Security	FSDHH	Household food security category
303	FSQ_D	Food Security	FSDAD	Adult food security category
304	FSQ_D	Food Security	FSDCH	Child food security category
305	FSQ_D	Food Security	FSD151	HH Emergency food received
306	FSQ_D	Food Security	FSD401	Meal size cut
307	FSQ_D	Food Security	FSD411	Skipped meals
308	FSQ_D	Food Security	FSD421	Ate less than should
309	FSQ_D	Food Security	FSD431	Hungry
310	FSQ_D	Food Security	FSQ440	Lost weight
311	FSQ_D	Food Security	FSD451	Not eat whole day
312	FSQ_D	Food Security	FSQ170	Fd Stmp HH - authorized last 12 mos
313	FSQ_D	Food Security	FSD170N	Fd Stmp HH - No. people authorized
314	FSQ_D	Food Security	FSD180	Fd Stmp SP authorized in last 12 mos
315	FSQ_D	Food Security	FSD190	Fd Stmp SP mos authorized in last 12 mos
316	FSQ_D	Food Security	FSD200	Fd Stmp SP currentlyauthorized
317	FSQ_D	Food Security	FSQ210	Fd Stmp HH amount last month
318	FSQ_D	Food Security	FSQ220	Fd Stmp HH amount last time
319	FSQ_D	Food Security	FSQ162	WIC HH got past 12 mos
320	FSQ_D	Food Security	FSD650	WIC SP got past 12 mos
321	FSQ_D	Food Security	FSD660	WIC SP currently get
322	FSQ_D	Food Security	FSD670	WIC SP No. mos received
323	HCQ_D	Hepatitis C Follow-Up Questionnaire	SEQN	Respondent sequence number
324	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCASCST1	Interview Status Code

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Item #	Data File	Component	Item ID	Label
325	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCASCCT1	Reasons for Not Done
326	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ020	Heard of Hepatitis C prior to letter?
327	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ030	First time told had Hepatitis C?
328	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ040	How long known infected?
329	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ060	Reason first tested for Hepatitis C?
330	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ070	Seen a doctor about test result?
331	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ080	Have a doctor's appointment?
332	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ090	Did doctor do additional tests?
333	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ100	What doctor told about test result?
334	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ110	Ever had a liver biopsy?
335	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ121	Doctor advised about medications?
336	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ124	Doctor advised you should be treated?
337	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ126A	Not treated: liver enzymes were normal?
338	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ126B	Not treated: did not have liver disease?
339	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ126C	Not treated: not need to do anything?
340	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ126D	Not treated: can be treated later?
341	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ126E	Not treated: no reason given
342	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ130	Treated with these medicines?
343	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ140A	Not treated: unpleasant side effects
344	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ140B	Not treated: treatment self injected
345	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ140C	Not treated: treatment too expensive
346	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ140D	Not treated: waiting for better treatment
347	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ140E	Not treated: some other reason
348	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ150	Did doctor limit alcohol?

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Item #	Data File	Component	Item ID	Label
349	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ160	T/F: infection is permanent
350	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ170	T/F: HepC stops liver
351	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ180	T/F: look and feel fine
352	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ190	T/F: HepC from blood transfusion
353	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ200	T/F: HepC from shaking hands
354	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ210	T/F: HepC by kissing infected person
355	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ220	T/F: HepC from infected sex partner
356	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ230	T/F: HepC from birth, infected mother
357	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ240	T/F: HepC from sharp instrument
358	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ250	T/F: HepC from coworkers
359	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ260	T/F: HepC from injecting drugs
360	HCQ_D	Hepatitis C Follow-Up Questionnaire	HCQ270	Main respondent
361	HIQ_D	Health Insurance	SEQN	Respondent sequence number
362	HIQ_D	Health Insurance	HIQ011	Covered by health insurance
363	HIQ_D	Health Insurance	HIQ031A	Covered by private insurance
364	HIQ_D	Health Insurance	HIQ031B	Covered by Medicare
365	HIQ_D	Health Insurance	HIQ031C	Covered by Medi-Gap
366	HIQ_D	Health Insurance	HIQ031D	Covered by Medicaid
367	HIQ_D	Health Insurance	HIQ031E	Covered by SCHIP
368	HIQ_D	Health Insurance	HIQ031F	Covered by military health care
369	HIQ_D	Health Insurance	HIQ031G	Covered by Indian Health Service
370	HIQ_D	Health Insurance	HIQ031H	Covered by state-sponsored health plan
371	HIQ_D	Health Insurance	HIQ031I	Covered by other government insurance
372	HIQ_D	Health Insurance	HIQ031J	Covered by single service plan

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Item #	Data File	Component	Item ID	Label
373	HIQ_D	Health Insurance	HIQ031AA	No coverage of any type
374	HIQ_D	Health Insurance	HIQ260	Have Medicare?
375	HIQ_D	Health Insurance	HIQ105	Insurance card available or not
376	HIQ_D	Health Insurance	HIQ270	Do plans cover prescriptions?
377	HIQ_D	Health Insurance	HIQ210	Time when no insurance in past year?
378	HOQ_D	Housing Characteristics	SEQN	Respondent sequence number
379	HOQ_D	Housing Characteristics	HOQ011	Type of home
380	HOQ_D	Housing Characteristics	HOD030	How many apartments in building
381	HOQ_D	Housing Characteristics	HOQ040	When was home built
382	HOQ_D	Housing Characteristics	HOD050	Number of rooms in home
383	HOQ_D	Housing Characteristics	HOD060	How many years family lived in home
384	HOQ_D	Housing Characteristics	HOQ065	Home owned, bought, rented, other
385	HOQ_D	Housing Characteristics	HOQ070	Source of tap water
386	HOQ_D	Housing Characteristics	HOQ080	Water treatment devices used or not
387	HOQ_D	Housing Characteristics	HOQ230	Has home had a mildew or musty smell?
388	HOQ_D	Housing Characteristics	HOQ240	Have you seen cockroaches in your home?
389	HOQ_D	Housing Characteristics	HOQ250	Do animals live or spend time in home?
390	HOQ_D	Housing Characteristics	HOQ260A	Dog in house now
391	HOQ_D	Housing Characteristics	HOQ260B	Cat in house now
392	HOQ_D	Housing Characteristics	HOQ260C	Small furry animal in house now
393	HOQ_D	Housing Characteristics	HOQ270	Did animals live or spend time in home?
394	HOQ_D	Housing Characteristics	HOQ280A	Dog in house, last 12 months

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Item #	Data File	Component	Item ID	Label
395	HOQ_D	Housing Characteristics	HOQ280B	Cat in house, last 12 months
396	HOQ_D	Housing Characteristics	HOQ280C	Small furry animal in house, last 12 mon
397	HSQ_D	Current Health Status	SEQN	Respondent sequence number
398	HSQ_D	Current Health Status	HSD010	General health condition
399	HSQ_D	Current Health Status	HSQ470	no. of days physical health was not good
400	HSQ_D	Current Health Status	HSQ480	no. of days mental health was not good
401	HSQ_D	Current Health Status	HSQ490	inactive days due to phys./mental hlth
402	HSQ_D	Current Health Status	HSQ500	SP have head cold or chest cold
403	HSQ_D	Current Health Status	HSQ510	SP have stomach or intestinal illness?
404	HSQ_D	Current Health Status	HSQ520	SP have flu, pneumonia, ear infection?
405	HSQ_D	Current Health Status	HSQ571	SP donated blood in past 12 months?
406	HSQ_D	Current Health Status	HSQ580	How long ago was last blood donation?
407	HSQ_D	Current Health Status	HSQ590	Blood ever tested for HIV virus?
408	HSQ_D	Current Health Status	HSAQUEX	Source of Health Status Data
409	HUQ_D	Hospital Utilization	SEQN	Respondent sequence number
410	HUQ_D	Hospital Utilization	HUQ010	General health condition
411	HUQ_D	Hospital Utilization	HUQ020	Health now compared with 1 year ago
412	HUQ_D	Hospital Utilization	HUQ030	Routine place to go for healthcare
413	HUQ_D	Hospital Utilization	HUQ040	Type place most often go for healthcare
414	HUQ_D	Hospital Utilization	HUQ050	#times receive healthcare over past year
415	HUQ_D	Hospital Utilization	HUQ060	How long since last healthcare visit

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Item #	Data File	Component	Item ID	Label
416	HUQ_D	Hospital Utilization	HUQ071	Overnite hospital patient in last year
417	HUQ_D	Hospital Utilization	HUD080	#times overnite hospital patient/last yr
418	HUQ_D	Hospital Utilization	HUQ090	Seen mental health professional/past yr
419	IMQ_D	Immunization	SEQN	Respondent sequence number
420	IMQ_D	Immunization	IMQ011	Received hepatitis A vaccine
421	IMQ_D	Immunization	IMQ020	Received hepatitis B 3 dose series
422	KIQ_P_D	Prostate Conditions	SEQN	Respondent sequence number
423	KIQ_P_D	Prostate Conditions	KIQ081	Have trouble starting to urinate?
424	KIQ_P_D	Prostate Conditions	KIQ101	After urinating does bladder feel empty?
425	KIQ_P_D	Prostate Conditions	KIQ490	Have prostate disease?
426	KIQ_P_D	Prostate Conditions	KIQ121	Ever told had enlarged prostate?
427	KIQ_P_D	Prostate Conditions	KIQ141	Was it a benign enlargement?
428	KIQ_P_D	Prostate Conditions	KIQ161	How old when told had benign enlargement
429	KIQ_P_D	Prostate Conditions	KIQ182	Was the enlargement due to cancer?
430	KIQ_P_D	Prostate Conditions	KIQ361	Rectal exam to check for prostate cancer
431	KIQ_U_D	Kidney Conditions - Urology	SEQN	Respondent sequence number
432	KIQ_U_D	Kidney Conditions - Urology	KIQ022	Ever told you had weak/failing kidneys
433	KIQ_U_D	Kidney Conditions - Urology	KIQ025	Received dialysis in past 12 months
434	KIQ_U_D	Kidney Conditions - Urology	KIQ005	How often have urinary leakage
435	KIQ_U_D	Kidney Conditions - Urology	KIQ010	How much urine lose each time?
436	KIQ_U_D	Kidney Conditions - Urology	KIQ042	Leak urine during physical activities
437	KIQ_U_D	Kidney Conditions - Urology	KIQ430	How frequently does this occur?

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Item #	Data File	Component	Item ID	Label
438	KIQ_U_D	Kidney Conditions - Urology	KIQ044	Urinated before reaching the toilet
439	KIQ_U_D	Kidney Conditions - Urology	KIQ450	How frequently does this occur?
440	KIQ_U_D	Kidney Conditions - Urology	KIQ046	Leak urine during nonphysical activities
441	KIQ_U_D	Kidney Conditions - Urology	KIQ470	How frequently does this occur?
442	KIQ_U_D	Kidney Conditions - Urology	KIQ050	How much did urine leakage bother you
443	KIQ_U_D	Kidney Conditions - Urology	KIQ052	How much were daily activities affected
444	KIQ_U_D	Kidney Conditions - Urology	KIQ480	How many times urinate in night?
445	MCQ_D	Medical Conditions	SEQN	Respondent sequence number
446	MCQ_D	Medical Conditions	MCQ010	Ever been told you have asthma
447	MCQ_D	Medical Conditions	MCQ025	Age when first had asthma
448	MCQ_D	Medical Conditions	MCQ035	Still have asthma
449	MCQ_D	Medical Conditions	MCQ040	Had asthma attack in past year
450	MCQ_D	Medical Conditions	MCQ050	Emergency care visit for asthma/past yr
451	MCQ_D	Medical Conditions	MCQ053	Taking treatment for anemia/past 3 mos
452	MCQ_D	Medical Conditions	MCQ080	Doctor ever said you were overweight
453	MCQ_D	Medical Conditions	MCQ092	Ever receive blood transfusion
454	MCQ_D	Medical Conditions	MCD093	Year receive blood transfusion
455	MCQ_D	Medical Conditions	MCQ140	Trouble seeing even with glass/contacts
456	MCQ_D	Medical Conditions	MCQ149	Menstrual periods started yet?
457	MCQ_D	Medical Conditions	MCQ150G	School days missed from injury/illness

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Item #	Data File	Component	Item ID	Label
458	MCQ_D	Medical Conditions	MCQ150Q	# school days missed from injury/illness
459	MCQ_D	Medical Conditions	MCQ160A	Doctor ever said you had arthritis
460	MCQ_D	Medical Conditions	MCQ160B	Ever told had congestive heart failure
461	MCQ_D	Medical Conditions	MCQ160C	Ever told you had coronary heart disease
462	MCQ_D	Medical Conditions	MCQ160D	Ever told you had angina/angina pectoris
463	MCQ_D	Medical Conditions	MCQ160E	Ever told you had heart attack
464	MCQ_D	Medical Conditions	MCQ160F	Ever told you had a stroke
465	MCQ_D	Medical Conditions	MCQ160G	Ever told you had emphysema
466	MCQ_D	Medical Conditions	MCQ160K	Ever told you had chronic bronchitis
467	MCQ_D	Medical Conditions	MCQ160L	Ever told you had any liver condition
468	MCQ_D	Medical Conditions	MCQ160M	Ever told you had a thyroid problem
469	MCQ_D	Medical Conditions	MCQ170K	Do you still have chronic bronchitis
470	MCQ_D	Medical Conditions	MCQ170L	Do you still have a liver condition
471	MCQ_D	Medical Conditions	MCQ170M	Do you still have a thyroid problem
472	MCQ_D	Medical Conditions	MCQ180A	Age when told you had arthritis
473	MCQ_D	Medical Conditions	MCQ180B	Age when told you had heart failure
474	MCQ_D	Medical Conditions	MCQ180C	Age when told had coronary heart disease
475	MCQ_D	Medical Conditions	MCQ180D	Age when told you had angina pectoris
476	MCQ_D	Medical Conditions	MCQ180E	Age when told you had heart attack
477	MCQ_D	Medical Conditions	MCQ180F	Age when told you had a stroke
478	MCQ_D	Medical Conditions	MCQ180G	Age when told you had emphysema
479	MCQ_D	Medical Conditions	MCQ180K	Age when told you had chronic bronchitis

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Item #	Data File	Component	Item ID	Label
480	MCQ_D	Medical Conditions	MCQ180L	Age when told you had a liver condition
481	MCQ_D	Medical Conditions	MCQ180M	Age when told you had a thyroid problem
482	MCQ_D	Medical Conditions	MCQ190	Which type of arthritis
483	MCQ_D	Medical Conditions	MCQ220	Ever told you had cancer or malignancy
484	MCQ_D	Medical Conditions	MCQ230A	What kind of cancer
485	MCQ_D	Medical Conditions	MCQ230B	What kind of cancer
486	MCQ_D	Medical Conditions	MCQ230C	What kind of cancer
487	MCQ_D	Medical Conditions	MCQ230D	What kind of cancer
488	MCQ_D	Medical Conditions	MCQ240A	Age when bladder cancer first diagnosed
489	MCQ_D	Medical Conditions	MCQ240B	Age when blood cancer first diagnosed
490	MCQ_D	Medical Conditions	MCQ240C	Age when bone cancer first diagnosed
491	MCQ_D	Medical Conditions	MCQ240D	Age when brain cancer first diagnosed
492	MCQ_D	Medical Conditions	MCQ240E	Age when breast cancer first diagnosed
493	MCQ_D	Medical Conditions	MCQ240F	Age when cervical cancer first diagnosed
494	MCQ_D	Medical Conditions	MCQ240G	Age when colon cancer first diagnosed
495	MCQ_D	Medical Conditions	MCQ240H	Age esophageal cancer first diagnosed
496	MCQ_D	Medical Conditions	MCQ240I	Age gallbladder cancer first diagnosed
497	MCQ_D	Medical Conditions	MCQ240J	Age when kidney cancer first diagnosed
498	MCQ_D	Medical Conditions	MCQ240K	Age larynx/windpipe cancer diagnosed
499	MCQ_D	Medical Conditions	MCQ240L	Age when leukemia first diagnosed

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Item #	Data File	Component	Item ID	Label
500	MCQ_D	Medical Conditions	MCQ240M	Age when liver cancer first diagnosed
501	MCQ_D	Medical Conditions	MCQ240N	Age when lung cancer first diagnosed
502	MCQ_D	Medical Conditions	MCQ240O	Age lymphoma/Hodgkin's diagnosed
503	MCQ_D	Medical Conditions	MCQ240P	Age when melanoma first diagnosed
504	MCQ_D	Medical Conditions	MCQ240Q	Age mouth\tongue\lip cancer diagnosed
505	MCQ_D	Medical Conditions	MCQ240R	Age nervous system cancer diagnosed
506	MCQ_D	Medical Conditions	MCQ240S	Age when ovarian cancer first diagnosed
507	MCQ_D	Medical Conditions	MCQ240T	Age pancreatic cancer first diagnosed
508	MCQ_D	Medical Conditions	MCQ240U	Age prostate cancer first diagnosed
509	MCQ_D	Medical Conditions	MCQ240V	Age when rectal cancer first diagnosed
510	MCQ_D	Medical Conditions	MCQ240W	Age non-melanoma skin cancer diagnosed
511	MCQ_D	Medical Conditions	MCQ240X	Age unknown skin cancer first diagnosed
512	MCQ_D	Medical Conditions	MCQ240Y	Age soft tissue cancer first diagnosed
513	MCQ_D	Medical Conditions	MCQ240Z	Age stomach cancer first diagnosed
514	MCQ_D	Medical Conditions	MCQ240AA	Age testicular cancer first diagnosed
515	MCQ_D	Medical Conditions	MCQ240BB	Age when thyroid cancer first diagnosed
516	MCQ_D	Medical Conditions	MCQ240CC	Age when uterine cancer first diagnosed
517	MCQ_D	Medical Conditions	MCQ240DD	Age other type of cancer first diagnosed
518	MCQ_D	Medical Conditions	MCQ240DK	How old when cancer first diagnosed?
519	MCQ_D	Medical Conditions	MCQ245A	Work days missed for illness/maternity

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Item #	Data File	Component	Item ID	Label
520	MCQ_D	Medical Conditions	MCQ245B	# of workdays missed
521	MCQ_D	Medical Conditions	MCQ265	Blood relative have/had prostate cancer
522	MCQ_D	Medical Conditions	MCQ268A	Biological family members - father
523	MCQ_D	Medical Conditions	MCQ268B	Biological family member-mother's father
524	MCQ_D	Medical Conditions	MCQ268C	Biological family member-father's father
525	MCQ_D	Medical Conditions	MCQ268D	Biological family member - brother
526	MCQ_D	Medical Conditions	MCQ300A	Close relative had heart attack?
527	MCQ_D	Medical Conditions	MCQ300B	Close relative had asthma?
528	MCQ_D	Medical Conditions	MCQ300C	Close relative had diabetes?
529	MCQ_D	Medical Conditions	MCQ310	Ever have blood test to check PSA?
530	MCQ_D	Medical Conditions	MCQ320	Age when first had PSA test
531	MCQ_D	Medical Conditions	MCD330	How long ago was last PSA test?
532	MCQ_D	Medical Conditions	MCQ340	How many PSA tests in past 5 years?
533	MCQ_D	Medical Conditions	MCQ350	Ever told PSA test was not normal?
534	OHQ_D	Oral Health	SEQN	Respondent sequence number
535	OHQ_D	Oral Health	OHQ011	Condition of teeth
536	OHQ_D	Oral Health	OHQ620	How often last yr. had aching in mouth?
537	OHQ_D	Oral Health	OHQ630	How often felt bad because of mouth?
538	OHQ_D	Oral Health	OHQ640	Last yr had diff w/ job because of mouth
539	OHQ_D	Oral Health	OHQ650	Last yr taste affected because of mouth

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Item #	Data File	Component	Item ID	Label
540	OHQ_D	Oral Health	OHQ660	Last yr avoid some food because of mouth
541	OHQ_D	Oral Health	OHQ670	Last yr couldn't eat because of mouth
542	OHQ_D	Oral Health	OHQ680	Last yr embarrassed because of mouth
543	OSQ_D	Osteoporosis	SEQN	Respondent sequence number
544	OSQ_D	Osteoporosis	OSQ010a	Broken or fractured a hip
545	OSQ_D	Osteoporosis	OSQ010b	Broken or fractured a wrist
546	OSQ_D	Osteoporosis	OSQ010c	Broken or fractured spine
547	OSQ_D	Osteoporosis	OSQ020a	# Times broken/fractured hip
548	OSQ_D	Osteoporosis	OSQ020b	# Times broken/fractured wrist
549	OSQ_D	Osteoporosis	OSQ020c	# Times broken/fractured spine
550	OSQ_D	Osteoporosis	OSD030aa	Age when fractured hip 1st time
551	OSQ_D	Osteoporosis	OSQ040aa	Under/over 50 when fracd. hip 1st time
552	OSQ_D	Osteoporosis	OSD050aa	Reason hip fracture occurred 1st time
553	OSQ_D	Osteoporosis	OSD030ab	Age when fractured hip 2nd time
554	OSQ_D	Osteoporosis	OSQ040ab	Under/over 50 when fracd. hip 2nd time
555	OSQ_D	Osteoporosis	OSD050ab	Reason hip fracture occurred 2nd time
556	OSQ_D	Osteoporosis	OSD030ac	Age when fractured hip 3rd time
557	OSQ_D	Osteoporosis	OSQ040ac	Under/over 50 when fracd. hip 3rd time
558	OSQ_D	Osteoporosis	OSD050ac	Reason hip fracture occurred 3rd time
559	OSQ_D	Osteoporosis	OSD030ba	Age when fractured wrist 1st time
560	OSQ_D	Osteoporosis	OSQ040ba	Under/over 50 when fracd. wrist 1st time
561	OSQ_D	Osteoporosis	OSD050ba	Reason wrist fracture occurred 1st time

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Item #	Data File	Component	Item ID	Label
562	OSQ_D	Osteoporosis	OSD030bb	Age when fractured wrist 2nd time
563	OSQ_D	Osteoporosis	OSQ040bb	Under/over 50 when fracd. wrist 2nd time
564	OSQ_D	Osteoporosis	OSD050bb	Reason wrist fracture occurred 2nd time
565	OSQ_D	Osteoporosis	OSD030bc	Age when fractured wrist 3rd time
566	OSQ_D	Osteoporosis	OSQ040bc	Under/over 50 when fracd. wrist 3rd time
567	OSQ_D	Osteoporosis	OSD050bc	Reason wrist fracture occurred 3rd time
568	OSQ_D	Osteoporosis	OSD030bd	Age when fractured wrist 4th time
569	OSQ_D	Osteoporosis	OSQ040bd	Under/over 50 when fracd. wrist 4th time
570	OSQ_D	Osteoporosis	OSD050bd	Reason wrist fracture occurred 4th time
571	OSQ_D	Osteoporosis	OSD030be	Age when fractured wrist 5th time
572	OSQ_D	Osteoporosis	OSQ040be	Under/over 50 when fracd. wrist 5th time
573	OSQ_D	Osteoporosis	OSD050be	Reason wrist fracture occurred 5th time
574	OSQ_D	Osteoporosis	OSD030bf	Age when fractured wrist 6th time
575	OSQ_D	Osteoporosis	OSQ040bf	Under/over 50 when fracd. wrist 6th time
576	OSQ_D	Osteoporosis	OSD050bf	Reason wrist fracture occurred 6th time
577	OSQ_D	Osteoporosis	OSD030bg	Age when fractured wrist 7th time
578	OSQ_D	Osteoporosis	OSQ040bg	Under/over 50 when fracd. wrist 7th time

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Item #	Data File	Component	Item ID	Label
579	OSQ_D	Osteoporosis	OSD050bg	Reason wrist fracture occurred 7th time
580	OSQ_D	Osteoporosis	OSD030ca	Age when fractured spine 1st time
581	OSQ_D	Osteoporosis	OSQ040ca	Under/over 50 when fractd. spine 1st time
582	OSQ_D	Osteoporosis	OSD050ca	Reason spine fracture occurred 1st time
583	OSQ_D	Osteoporosis	OSD030cb	Age when fractured spine 2nd time
584	OSQ_D	Osteoporosis	OSQ040cb	Under/over 50 when fractd. spine 2nd time
585	OSQ_D	Osteoporosis	OSD050cb	Reason spine fracture occurred 2nd time
586	OSQ_D	Osteoporosis	OSD030cc	Age when fractured spine 3rd time
587	OSQ_D	Osteoporosis	OSQ040cc	Under/over 50 when fractd. spine 3rd time
588	OSQ_D	Osteoporosis	OSD050cc	Reason spine fracture occurred 3rd time
589	OSQ_D	Osteoporosis	OSD030cd	Age when fractured spine 4th time
590	OSQ_D	Osteoporosis	OSQ040cd	Under/over 50 when fractd. spine 4th time
591	OSQ_D	Osteoporosis	OSD050cd	Reason spine fracture occurred 4th time
592	OSQ_D	Osteoporosis	OSD030ce	Age when fractured spine 5th time
593	OSQ_D	Osteoporosis	OSQ040ce	Under/over 50 when fractd. spine 5th time
594	OSQ_D	Osteoporosis	OSD050ce	Reason spine fracture occurred 5th time
595	OSQ_D	Osteoporosis	OSD030cf	Age when fractured spine 6th time

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Item #	Data File	Component	Item ID	Label
596	OSQ_D	Osteoporosis	OSQ040cf	Under/over 50 when fracd. spine 6th time
597	OSQ_D	Osteoporosis	OSD050cf	Reason spine fracture occurred 6th time
598	OSQ_D	Osteoporosis	OSD030cg	Age when fractured spine 7th time
599	OSQ_D	Osteoporosis	OSQ040cg	Under/over 50 when fracd. spine 7th time
600	OSQ_D	Osteoporosis	OSD030ch	Age when fractured spine 8th time
601	OSQ_D	Osteoporosis	OSQ040ch	Under/over 50 when fracd. spine 8th time
602	OSQ_D	Osteoporosis	OSD030ci	Age when fractured spine 9th time
603	OSQ_D	Osteoporosis	OSQ040ci	Under/over 50 when fracd. spine 9th time
604	OSQ_D	Osteoporosis	OSD030cj	Age when fractured spine 10th time
605	OSQ_D	Osteoporosis	OSQ040cj	Under/over 50 when fracd spine 10th time
606	OSQ_D	Osteoporosis	OSQ080	Doctor ever told any other fractures?
607	OSQ_D	Osteoporosis	OSQ090a	Fracture result of severe trauma?
608	OSQ_D	Osteoporosis	OSQ100a	Where fracture occurred
609	OSQ_D	Osteoporosis	OSD110a	How old when fracture occurred?
610	OSQ_D	Osteoporosis	OSQ120a	Any other fractures?
611	OSQ_D	Osteoporosis	OSQ090b	Fracture result of severe trauma?
612	OSQ_D	Osteoporosis	OSQ100b	Where fracture occurred
613	OSQ_D	Osteoporosis	OSD110b	How old when fracture occurred?
614	OSQ_D	Osteoporosis	OSQ120b	Any other fractures?
615	OSQ_D	Osteoporosis	OSQ090c	Fracture result of severe trauma?
616	OSQ_D	Osteoporosis	OSQ100c	Where fracture occurred

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Item #	Data File	Component	Item ID	Label
617	OSQ_D	Osteoporosis	OSD110c	How old when fracture occurred?
618	OSQ_D	Osteoporosis	OSQ120c	Any other fractures?
619	OSQ_D	Osteoporosis	OSQ090d	Fracture result of severe trauma?
620	OSQ_D	Osteoporosis	OSQ100d	Where fracture occurred
621	OSQ_D	Osteoporosis	OSD110d	How old when fracture occurred?
622	OSQ_D	Osteoporosis	OSQ120d	Any other fractures?
623	OSQ_D	Osteoporosis	OSQ090e	Fracture result of severe trauma?
624	OSQ_D	Osteoporosis	OSQ100e	Where fracture occurred
625	OSQ_D	Osteoporosis	OSD110e	How old when fracture occurred?
626	OSQ_D	Osteoporosis	OSQ120e	Any other fractures?
627	OSQ_D	Osteoporosis	OSQ090f	Fracture result of severe trauma?
628	OSQ_D	Osteoporosis	OSQ100f	Where fracture occurred
629	OSQ_D	Osteoporosis	OSD110f	How old when fracture occurred?
630	OSQ_D	Osteoporosis	OSQ120f	Any other fractures?
631	OSQ_D	Osteoporosis	OSQ090g	Fracture result of severe trauma?
632	OSQ_D	Osteoporosis	OSQ100g	Where fracture occurred
633	OSQ_D	Osteoporosis	OSD110g	How old when fracture occurred?
634	OSQ_D	Osteoporosis	OSQ120g	Any other fractures?
635	OSQ_D	Osteoporosis	OSQ090h	Fracture result of severe trauma?
636	OSQ_D	Osteoporosis	OSQ100h	Where fracture occurred
637	OSQ_D	Osteoporosis	OSD110h	How old when fracture occurred?
638	OSQ_D	Osteoporosis	OSQ120h	Any other fractures?
639	OSQ_D	Osteoporosis	OSQ090i	Fracture result of severe trauma?
640	OSQ_D	Osteoporosis	OSQ100i	Where fracture occurred
641	OSQ_D	Osteoporosis	OSD110i	How old when fracture occurred?

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Item #	Data File	Component	Item ID	Label
642	OSQ_D	Osteoporosis	OSQ120i	Any other fractures?
643	OSQ_D	Osteoporosis	OSQ090j	Fracture result of severe trauma?
644	OSQ_D	Osteoporosis	OSQ100j	Where fracture occurred
645	OSQ_D	Osteoporosis	OSD110j	How old when fracture occurred?
646	OSQ_D	Osteoporosis	OSQ120j	Any other fractures?
647	OSQ_D	Osteoporosis	OSQ060	Ever told had osteoporosis/brittle bones
648	OSQ_D	Osteoporosis	OSQ070	Ever treated for osteoporosis
649	OSQ_D	Osteoporosis	OSQ130	Ever taken prednisone or cortisone daily
650	OSQ_D	Osteoporosis	OSQ140q	How long used prednisone or cortisone?
651	OSQ_D	Osteoporosis	OSQ140u	How long used prednisone or cortisone?
652	OSQ_D	Osteoporosis	OSQ150	Parents ever told had osteoporosis?
653	OSQ_D	Osteoporosis	OSQ160a	Mother was told had osteoporosis
654	OSQ_D	Osteoporosis	OSQ160b	Father was told had osteoporosis
655	OSQ_D	Osteoporosis	OSQ170	Did mother ever fracture hip?
656	OSQ_D	Osteoporosis	OSQ180	How old when fractured hip?
657	OSQ_D	Osteoporosis	OSQ190	Over or under 50 years old?
658	OSQ_D	Osteoporosis	OSQ200	Did father ever fracture hip?
659	OSQ_D	Osteoporosis	OSQ210	How old when fractured hip?
660	OSQ_D	Osteoporosis	OSQ220	Over or under 50 years old?
661	PAQ_D	Physical Activity	SEQN	Respondent sequence number
662	PAQ_D	Physical Activity	PAD020	Walked or bicycled over past 30 days
663	PAQ_D	Physical Activity	PAQ050Q	# times walked or bicycled

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Item #	Data File	Component	Item ID	Label
664	PAQ_D	Physical Activity	PAQ050U	Unit of measure (day/week/month)
665	PAQ_D	Physical Activity	PAD080	How long per day (minutes)
666	PAQ_D	Physical Activity	PAQ100	Tasks around home/yard past 30 days
667	PAQ_D	Physical Activity	PAD120	# of times past 30 days
668	PAQ_D	Physical Activity	PAD160	How long each time (minutes)
669	PAQ_D	Physical Activity	PAQ180	Avg level of physical activity each day
670	PAQ_D	Physical Activity	PAD200	Vigorous activity over past 30 days
671	PAQ_D	Physical Activity	PAD320	Moderate activity over past 30 days
672	PAQ_D	Physical Activity	PAD440	Muscle strengthening activities
673	PAQ_D	Physical Activity	PAD460	Number of times past 30 days
674	PAQ_D	Physical Activity	PAQ500	Activity comparison last mo - last yr
675	PAQ_D	Physical Activity	PAQ520	Compare activity w/others same age
676	PAQ_D	Physical Activity	PAQ540	Compare activity with 10 years ago
677	PAQ_D	Physical Activity	PAQ560	# time/week you play or exercise hard
678	PAQ_D	Physical Activity	PAD590	# hours watch TV or videos past 30 days
679	PAQ_D	Physical Activity	PAD600	# of hours use computer past 30 days
680	PAQ_D	Physical Activity	PAAQUEx	Questionnaire source flag for weighting
681	PAQIAF_D	Physical Activity Individual Activities File	SEQN	Respondent sequence number
682	PAQIAF_D	Physical Activity Individual Activities File	PADACTIV	Leisure time activity
683	PAQIAF_D	Physical Activity Individual Activities File	PADLEVEL	Activity level
684	PAQIAF_D	Physical Activity Individual Activities File	PADTIMES	# of times did activity in past 30 days

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Item #	Data File	Component	Item ID	Label
685	PAQIAF_D	Physical Activity Individual Activities File	PADDURAT	Average duration of activity (minutes)
686	PAQIAF_D	Physical Activity Individual Activities File	PADMETS	MET score for activity
687	PAQIAF_D	Physical Activity Individual Activities File	PAAQUEX	Questionnaire source flag for weighting
688	PFQ_D	Physical Functioning	SEQN	Respondent sequence number
689	PFQ_D	Physical Functioning	PFQ010	Physical,mental,emotional limitations
690	PFQ_D	Physical Functioning	PFQ015	Able to take part in most type of play
691	PFQ_D	Physical Functioning	PFQ020	Crawl, walk, run, play limitations
692	PFQ_D	Physical Functioning	PFQ030	Long term impairment/health problem
693	PFQ_D	Physical Functioning	PFQ041	Receive Special Ed or Early Intervention
694	PFQ_D	Physical Functioning	PFQ049	Limitations keeping you from working
695	PFQ_D	Physical Functioning	PFQ051	Limited in amount of work you can do
696	PFQ_D	Physical Functioning	PFQ054	Need special equipment to walk
697	PFQ_D	Physical Functioning	PFQ057	Experience confusion/memory problems
698	PFQ_D	Physical Functioning	PFQ059	Physical, mental, emotional limitations
699	PFQ_D	Physical Functioning	PFQ061A	Managing money difficulty
700	PFQ_D	Physical Functioning	PFQ061B	Walking for a quarter mile difficulty
701	PFQ_D	Physical Functioning	PFQ061C	Walking up ten steps difficulty
702	PFQ_D	Physical Functioning	PFQ061D	Stooping, crouching, kneeling difficulty
703	PFQ_D	Physical Functioning	PFQ061E	Lifting or carrying difficulty
704	PFQ_D	Physical Functioning	PFQ061F	House chore difficulty
705	PFQ_D	Physical Functioning	PFQ061G	Preparing meals difficulty
706	PFQ_D	Physical Functioning	PFQ061H	Walking between rooms on same floor

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Item #	Data File	Component	Item ID	Label
707	PFQ_D	Physical Functioning	PFQ061I	Standing up from armless chair difficulty
708	PFQ_D	Physical Functioning	PFQ061J	Getting in and out of bed difficulty
709	PFQ_D	Physical Functioning	PFQ061K	Using fork, knife, drinking from cup
710	PFQ_D	Physical Functioning	PFQ061L	Dressing yourself difficulty
711	PFQ_D	Physical Functioning	PFQ061M	Standing for long periods difficulty
712	PFQ_D	Physical Functioning	PFQ061N	Sitting for long periods difficulty
713	PFQ_D	Physical Functioning	PFQ061O	Reaching up over head difficulty
714	PFQ_D	Physical Functioning	PFQ061P	Grasp/holding small objects difficulty
715	PFQ_D	Physical Functioning	PFQ061Q	Going out to movies, events difficulty
716	PFQ_D	Physical Functioning	PFQ061R	Attending social event difficulty
717	PFQ_D	Physical Functioning	PFQ061S	Leisure activity at home difficulty
718	PFQ_D	Physical Functioning	PFQ061T	Push or pull large objects difficulty
719	PFQ_D	Physical Functioning	PFQ063A	Health problems causing difficulty
720	PFQ_D	Physical Functioning	PFQ063B	Health problems causing difficulty
721	PFQ_D	Physical Functioning	PFQ063C	Health problems causing difficulty
722	PFQ_D	Physical Functioning	PFQ063D	Health problems causing difficulty
723	PFQ_D	Physical Functioning	PFQ063E	Health problems causing difficulty
724	PFQ_D	Physical Functioning	PFD069A	Arthritis or rheumatism probl, days
725	PFQ_D	Physical Functioning	PFD069B	Back or neck problems, days
726	PFQ_D	Physical Functioning	PFD069C	Cancer condition, days
727	PFQ_D	Physical Functioning	PFD069D	Depression/anxiety/emotional probl, days
728	PFQ_D	Physical Functioning	PFD069E	Other development problems, days
729	PFQ_D	Physical Functioning	PFD069F	Diabetes condition, days
730	PFQ_D	Physical Functioning	PFD069G	Fractures/bone/joint injury probl, days

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Item #	Data File	Component	Item ID	Label
731	PFQ_D	Physical Functioning	PFD069H	Hearing problems, days
732	PFQ_D	Physical Functioning	PFD069I	Heart problems, days
733	PFQ_D	Physical Functioning	PFD069J	Hypertension or high blood pressure, days
734	PFQ_D	Physical Functioning	PFD069K	Lung or breathing problems, days
735	PFQ_D	Physical Functioning	PFD069L	Mental retardation condition, days
736	PFQ_D	Physical Functioning	PFD069M	Other injury problems, days
737	PFQ_D	Physical Functioning	PFD069N	Senility condition, days
738	PFQ_D	Physical Functioning	PFD069O	Stroke problems, days
739	PFQ_D	Physical Functioning	PFD069P	Vision problems, days
740	PFQ_D	Physical Functioning	PFD069Q	Weight problems, days
741	PFQ_D	Physical Functioning	PFD069R	Other impairment problems, days
742	PFQ_D	Physical Functioning	PFQ090	Require special healthcare equipment
743	PSQ_D	PSA Follow-Up Questionnaire	SEQN	Respondent sequence number
744	PSQ_D	PSA Follow-Up Questionnaire	PSASCST1	Interview Status Code
745	PSQ_D	PSA Follow-Up Questionnaire	PSASCCT1	Reasons for Not Done
746	PSQ_D	PSA Follow-Up Questionnaire	PSQ020	Heard of PSA test somewhere else?
747	PSQ_D	PSA Follow-Up Questionnaire	PSQ030A	Heard PSA test from friend or relative?
748	PSQ_D	PSA Follow-Up Questionnaire	PSQ030B	Heard PSA test from a doctor?
749	PSQ_D	PSA Follow-Up Questionnaire	PSQ030C	Heard PSA test from health brochure?
750	PSQ_D	PSA Follow-Up Questionnaire	PSQ030D	Heard PSA test from television?
751	PSQ_D	PSA Follow-Up Questionnaire	PSQ030E	Heard PSA test from radio?
752	PSQ_D	PSA Follow-Up Questionnaire	PSQ030F	Heard PSA test from other?
753	PSQ_D	PSA Follow-Up Questionnaire	PSQ040	Ever have PSA test before the survey?
754	PSQ_D	PSA Follow-Up Questionnaire	PSQ050	How long ago was your first PSA test?
755	PSQ_D	PSA Follow-Up Questionnaire	PSQ060	First time being told to have high PSA?

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Item #	Data File	Component	Item ID	Label
756	PSQ_D	PSA Follow-Up Questionnaire	PSQ070	How long have you known your high PSA?
757	PSQ_D	PSA Follow-Up Questionnaire	PSQ080	Did you request your first PSA test?
758	PSQ_D	PSA Follow-Up Questionnaire	PSQ090A	Test PSA because of prostate problems
759	PSQ_D	PSA Follow-Up Questionnaire	PSQ090B	Test PSA because of wife or partner
760	PSQ_D	PSA Follow-Up Questionnaire	PSQ090C	Test PSA because of a health event
761	PSQ_D	PSA Follow-Up Questionnaire	PSQ090D	Test PSA because of family cancer
762	PSQ_D	PSA Follow-Up Questionnaire	PSQ090E	Test PSA because of race or ethnicity
763	PSQ_D	PSA Follow-Up Questionnaire	PSQ090F	Test PSA because of another reason
764	PSQ_D	PSA Follow-Up Questionnaire	PSQ100A	Provider PSA test: As routine screening
765	PSQ_D	PSA Follow-Up Questionnaire	PSQ100B	Provider PSA test: Due to family cancer
766	PSQ_D	PSA Follow-Up Questionnaire	PSQ100C	Provider PSA test: Due to frequent urina
767	PSQ_D	PSA Follow-Up Questionnaire	PSQ100D	Provider PSA test: Due to enlarged prost
768	PSQ_D	PSA Follow-Up Questionnaire	PSQ100E	Provider PSA test: Due to race/ethnicity
769	PSQ_D	PSA Follow-Up Questionnaire	PSQ100F	Provider PSA test: Wife/partner asked
770	PSQ_D	PSA Follow-Up Questionnaire	PSQ110	Saw a health professional for high PSA?
771	PSQ_D	PSA Follow-Up Questionnaire	PSQ120	Have doctor appointment for high PSA?
772	PSQ_D	PSA Follow-Up Questionnaire	PSQ130A	High PSA could mean: Inflamed prostate

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Item #	Data File	Component	Item ID	Label
773	PSQ_D	PSA Follow-Up Questionnaire	PSQ130B	High PSA could mean: Enlarged prostate
774	PSQ_D	PSA Follow-Up Questionnaire	PSQ130C	High PSA could mean: Prostate cancer
775	PSQ_D	PSA Follow-Up Questionnaire	PSQ130D	High PSA could mean: Lab error
776	PSQ_D	PSA Follow-Up Questionnaire	PSQ130E	High PSA could mean: Other
777	PSQ_D	PSA Follow-Up Questionnaire	PSQ140	Did other tests to check prostate?
778	PSQ_D	PSA Follow-Up Questionnaire	PSQ150	Did you have a prostate biopsy?
779	PSQ_D	PSA Follow-Up Questionnaire	PSQ160	Know results of your prostate biopsy?
780	PSQ_D	PSA Follow-Up Questionnaire	PSQ170A	Biopsy showed: Inflammation of prostate
781	PSQ_D	PSA Follow-Up Questionnaire	PSQ170B	Biopsy showed: Normal prostate tissue
782	PSQ_D	PSA Follow-Up Questionnaire	PSQ170C	Biopsy showed: Prostate cancer
783	PSQ_D	PSA Follow-Up Questionnaire	PSQ170D	Biopsy showed: Other
784	PSQ_D	PSA Follow-Up Questionnaire	PSQ180	Need treatment for prostate condition?
785	PSQ_D	PSA Follow-Up Questionnaire	PSQ190	Received/receiving prostate treatment?
786	PSQ_D	PSA Follow-Up Questionnaire	PSQ200A	Not treated because of side effects
787	PSQ_D	PSA Follow-Up Questionnaire	PSQ200B	Not treated because result is uncertain
788	PSQ_D	PSA Follow-Up Questionnaire	PSQ200C	Not treated because it is too expensive
789	PSQ_D	PSA Follow-Up Questionnaire	PSQ200D	Not treated hoping for better treat
790	PSQ_D	PSA Follow-Up Questionnaire	PSQ200E	Not treated deciding to wait and see
791	PSQ_D	PSA Follow-Up Questionnaire	PSQ200F	Not treated because you were afraid
792	PSQ_D	PSA Follow-Up Questionnaire	PSQ200G	Not treated because of some other reason
793	PSQ_D	PSA Follow-Up Questionnaire	PSQ210	T/F:Blv high PSA may mean large prostate

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Item #	Data File	Component	Item ID	Label
794	PSQ_D	PSA Follow-Up Questionnaire	PSQ220	T/F:Blv additional tests are required
795	PSQ_D	PSA Follow-Up Questionnaire	PSQ230	T/F:Blv prostate-cancer men can live 70+
796	PSQ_D	PSA Follow-Up Questionnaire	PSQ240	T/F:Blv prost.-cancer men die in 5 yrs
797	PSQ_D	PSA Follow-Up Questionnaire	PSQ250	T/F:Blv higher risk for cancer relatives
798	PSQ_D	PSA Follow-Up Questionnaire	PSQ260	T/F:Blv higher risk African Americans
799	PSQ_D	PSA Follow-Up Questionnaire	PSQ270	T/F:Blv there are treatments available
800	PSQ_D	PSA Follow-Up Questionnaire	PSQ280	T/F:Blv all options for cancer have risk
801	PSQ_D	PSA Follow-Up Questionnaire	PSQ290	T/F:Blv there are support groups
802	PSQ_D	PSA Follow-Up Questionnaire	PSQ300	Language used for the interview?
803	PUQMEC_D	Pesticide Use	SEQN	Respondent sequence number
804	PUQMEC_D	Pesticide Use	PUQ100	Products used in home to control insects
805	PUQMEC_D	Pesticide Use	PUQ110	Products used to kill weeds?
806	RDQ_D	Respiratory Health and Disease	SEQN	Respondent sequence number
807	RDQ_D	Respiratory Health and Disease	RDQ031	Coughing most days - over 3 mo period
808	RDQ_D	Respiratory Health and Disease	RDD040	# years had cough problem
809	RDQ_D	Respiratory Health and Disease	RDQ050	Bring up phlegm most days - 3 mo period
810	RDQ_D	Respiratory Health and Disease	RDD060	# years bringing up phlegm problem
811	RDQ_D	Respiratory Health and Disease	RDQ070	Wheezing or whistling in chest - past yr
812	RDQ_D	Respiratory Health and Disease	RDQ080	# wheezing/whistling attacks past year
813	RDQ_D	Respiratory Health and Disease	RDQ090	Wheezing disturb sleep in past year
814	RDQ_D	Respiratory Health and Disease	RDQ100	Chest sound wheezy during exercise

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Item #	Data File	Component	Item ID	Label
815	RDQ_D	Respiratory Health and Disease	RDD120	Got medical attentn for wheezing attack
816	RDQ_D	Respiratory Health and Disease	RDQ134	Doctor prescribe wheezing medication
817	RDQ_D	Respiratory Health and Disease	RDQ135	Limit usual activities due to wheezing
818	RDQ_D	Respiratory Health and Disease	RDQ137	Miss work or school due to wheezing
819	RDQ_D	Respiratory Health and Disease	RDQ140	Had dry cough at night in past year
820	RHQ_D	Reproductive Health	SEQN	Respondent sequence number
821	RHQ_D	Reproductive Health	RHQ010	Age when first menstrual period occurred
822	RHQ_D	Reproductive Health	RHQ020	Age range at first menstrual period
823	RHQ_D	Reproductive Health	RHQ031	At least 1 period in past 12 months
824	RHQ_D	Reproductive Health	RHD042	Reason didn't have period
825	RHQ_D	Reproductive Health	RHQ051	When did you have your last period?
826	RHQ_D	Reproductive Health	RHQ060	Age at last menstrual period
827	RHQ_D	Reproductive Health	RHQ070	Age range at last menstrual period
828	RHQ_D	Reproductive Health	RHD080	Days since last period
829	RHQ_D	Reproductive Health	RHQ131	Ever been pregnant?
830	RHQ_D	Reproductive Health	RHD143	Are you pregnant now?
831	RHQ_D	Reproductive Health	RHD152	What month of pregnancy are you in?
832	RHQ_D	Reproductive Health	RHQ160	How many times have been pregnant?
833	RHQ_D	Reproductive Health	RHQ166	How many vaginal deliveries?
834	RHQ_D	Reproductive Health	RHQ169	How many cesarean deliveries?
835	RHQ_D	Reproductive Health	RHQ171	How many deliveries live birth result?
836	RHQ_D	Reproductive Health	RHQ180	Age at first live birth
837	RHQ_D	Reproductive Health	RHQ190	Age at last live birth
838	RHQ_D	Reproductive Health	RHQ200	Now breastfeeding a child?

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Item #	Data File	Component	Item ID	Label
839	RHQ_D	Reproductive Health	RHQ210	Breastfed any of your children?
840	RHQ_D	Reproductive Health	RHD230	# of children breastfed at least 1 month
841	RHQ_D	Reproductive Health	RHQ250	Any child weigh < 5.5 lbs at birth?
842	RHQ_D	Reproductive Health	RHQ260	# children weighing < 5.5 lbs at birth
843	RHQ_D	Reproductive Health	RHD270	Number of children born preterm
844	RHQ_D	Reproductive Health	RHD280	Had a hysterectomy?
845	RHQ_D	Reproductive Health	RHQ291	Age when had hysterectomy
846	RHQ_D	Reproductive Health	RHQ300	Had at least one ovary removed?
847	RHQ_D	Reproductive Health	RHQ310	Were both ovaries removed or only one?
848	RHQ_D	Reproductive Health	RHQ320	Both ovaries removed at same time?
849	RHQ_D	Reproductive Health	RHQ330	Age when first/both ovaries removed
850	RHQ_D	Reproductive Health	RHQ340	Age when second ovary removed
851	RHQ_D	Reproductive Health	RHQ360	Told by doctor had endometriosis
852	RHQ_D	Reproductive Health	RHQ370	Age when first told had endometriosis
853	RHQ_D	Reproductive Health	RHQ380	Told by doctor had uterine fibroids?
854	RHQ_D	Reproductive Health	RHQ390	Age when first told had uterine fibroids
855	RHQ_D	Reproductive Health	RHQ395	Experience bulging in vaginal area?
856	RHQ_D	Reproductive Health	RHQ420	Ever taken birth control pills?
857	RHQ_D	Reproductive Health	RHQ430	Age started taking birth control pills
858	RHQ_D	Reproductive Health	RHD442	Taking birth control pills now?
859	RHQ_D	Reproductive Health	RHD451	Age stopped taking birth control pills
860	RHQ_D	Reproductive Health	RHQ460Q	How long taking birth control pills
861	RHQ_D	Reproductive Health	RHQ460U	Unit of measure: months, years
862	RHQ_D	Reproductive Health	RHQ510	Used Depo-Provera or injectables?

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Item #	Data File	Component	Item ID	Label
863	RHQ_D	Reproductive Health	RHQ520	Now using Depo-Provera or injectables?
864	RHQ_D	Reproductive Health	RHQ540	Ever use female hormones?
865	RHQ_D	Reproductive Health	RHQ541A	Hormone pills used
866	RHQ_D	Reproductive Health	RHQ541B	Hormone patches used
867	RHQ_D	Reproductive Health	RHQ541C	Hormone cream/suppository/injection used
868	RHQ_D	Reproductive Health	RHQ550	Having periods when start hormones
869	RHQ_D	Reproductive Health	RHQ551A	Used estrogen/progesterone for menopause
870	RHQ_D	Reproductive Health	RHQ551B	Used estrogen/progesterone for emotions
871	RHQ_D	Reproductive Health	RHQ551C	Used estr/progest for hysterct/oophorect
872	RHQ_D	Reproductive Health	RHQ551D	Used estr/progest for osteoporosis
873	RHQ_D	Reproductive Health	RHQ551E	Used estr/progest for cardiovascular dis
874	RHQ_D	Reproductive Health	RHQ551F	Used estr/progest for irregular periods
875	RHQ_D	Reproductive Health	RHQ551G	Used estr/progest for other reasons
876	RHQ_D	Reproductive Health	RHQ554	Use hormone pills w/estrogen only
877	RHQ_D	Reproductive Health	RHQ556	Age started estrogen-only pills
878	RHQ_D	Reproductive Health	RHQ558	Taking estrogen-only pills now?
879	RHQ_D	Reproductive Health	RHQ560Q	How long taking estrogen-only pills?
880	RHQ_D	Reproductive Health	RHQ560U	Unit of measure: months, years
881	RHQ_D	Reproductive Health	RHQ562	Used hormone pills w/progestin only
882	RHQ_D	Reproductive Health	RHQ564	Age started progestin-only pills
883	RHQ_D	Reproductive Health	RHQ566	Taking progestin-only pills now?

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Item #	Data File	Component	Item ID	Label
884	RHQ_D	Reproductive Health	RHQ568Q	How long taking progestin-only pills?
885	RHQ_D	Reproductive Health	RHQ568U	Unit of measure: months, years
886	RHQ_D	Reproductive Health	RHQ570	Used estrogen/progestin combo pills
887	RHQ_D	Reproductive Health	RHQ572	Age started estrogen/progestin pills
888	RHQ_D	Reproductive Health	RHQ574	Taking estrogen/progestin now?
889	RHQ_D	Reproductive Health	RHQ576Q	How long taking estrogen/progestin?
890	RHQ_D	Reproductive Health	RHQ576U	Unit of measure: months, years
891	RHQ_D	Reproductive Health	RHQ580	Used estrogen-only patches?
892	RHQ_D	Reproductive Health	RHQ582	Age started estrogen-only patches
893	RHQ_D	Reproductive Health	RHQ584	Using estrogen-only patches now?
894	RHQ_D	Reproductive Health	RHQ586Q	How long using estrogen only patches?
895	RHQ_D	Reproductive Health	RHQ586U	Unit of measure: months, years
896	RHQ_D	Reproductive Health	RHQ596	Used estrogen/progestin combo patches?
897	RHQ_D	Reproductive Health	RHQ598	Age started estrogen/progestin patches
898	RHQ_D	Reproductive Health	RHQ600	Using estrogen/progestin patches now?
899	RHQ_D	Reproductive Health	RHQ602Q	How long use estrogen/progestin patch
900	RHQ_D	Reproductive Health	RHQ602U	Unit of measure: months, years
901	RHQ_D	Reproductive Health	RHQ740	Vaginal problems during past month
902	RHQ_D	Reproductive Health	RHQ750A	Problem with vaginal itching
903	RHQ_D	Reproductive Health	RHQ750B	Problem with vaginal odor
904	RHQ_D	Reproductive Health	RHQ750C	Problem with vaginal discharge
905	RXQ_RX_D	Prescription Medications	SEQN	Respondent sequence number

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Item #	Data File	Component	Item ID	Label
906	RXQ_RX_D	Prescription Medications	RXDUSE	Taken prescription medicine, past month
907	RXQ_RX_D	Prescription Medications	RXDDRUG	Generic drug name
908	RXQ_RX_D	Prescription Medications	RXDDRGID	Generic drug code
909	RXQ_RX_D	Prescription Medications	RXQSEEN	Medicine container seen by interviewer
910	RXQ_RX_D	Prescription Medications	RXDDAYS	Number of days taken medicine
911	RXQ_RX_D	Prescription Medications	RXDCCOUNT	Number of prescription medicines taken
912	SLQ_D	Sleep Disorders	SEQN	Respondent sequence number
913	SLQ_D	Sleep Disorders	SLD010H	How much sleep do you get (hours)?
914	SLQ_D	Sleep Disorders	SLD020M	How long to fall asleep (minutes)?
915	SLQ_D	Sleep Disorders	SLQ030	How often do you snore?
916	SLQ_D	Sleep Disorders	SLQ040	How often do you snort / stop breathing?
917	SLQ_D	Sleep Disorders	SLQ050	Ever told doctor had trouble sleeping?
918	SLQ_D	Sleep Disorders	SLQ060	Ever told by doctor have sleep disorder?
919	SLQ_D	Sleep Disorders	SLQ070A	Sleep disorder: Sleep Apnea
920	SLQ_D	Sleep Disorders	SLQ070B	Sleep disorder: Insomnia
921	SLQ_D	Sleep Disorders	SLQ070C	Sleep disorder: Restless Legs
922	SLQ_D	Sleep Disorders	SLQ070D	Sleep disorder: Other
923	SLQ_D	Sleep Disorders	SLQ080	How often have trouble falling asleep?
924	SLQ_D	Sleep Disorders	SLQ090	How often wake up during night?
925	SLQ_D	Sleep Disorders	SLQ100	How often wake up too early in morning?
926	SLQ_D	Sleep Disorders	SLQ110	How often feel unrested during the day?

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Item #	Data File	Component	Item ID	Label
927	SLQ_D	Sleep Disorders	SLQ120	How often feel overly sleepy during day?
928	SLQ_D	Sleep Disorders	SLQ130	How often did you not get enough sleep?
929	SLQ_D	Sleep Disorders	SLQ140	How often take pills to help you sleep?
930	SLQ_D	Sleep Disorders	SLQ150	How often have leg jerks while sleeping?
931	SLQ_D	Sleep Disorders	SLQ160	How often have legs cramp while sleeping
932	SLQ_D	Sleep Disorders	SLQ170	Difficulty concentrating when tired?
933	SLQ_D	Sleep Disorders	SLQ180	Difficulty remembering when tired?
934	SLQ_D	Sleep Disorders	SLQ190	Difficulty eating when tired?
935	SLQ_D	Sleep Disorders	SLQ200	Difficulty with a hobby when tired?
936	SLQ_D	Sleep Disorders	SLQ210	Difficulty getting things done?
937	SLQ_D	Sleep Disorders	SLQ220	Difficulty with finance when tired?
938	SLQ_D	Sleep Disorders	SLQ230	Difficulty at work because tired?
939	SLQ_D	Sleep Disorders	SLQ240	Difficulty on phone when tired?
940	SMQ_D	Smoking – Cigarette Use	SEQN	Respondent sequence number
941	SMQ_D	Smoking – Cigarette Use	SMQ020	Smoked at least 100 cigarettes in life
942	SMQ_D	Smoking – Cigarette Use	SMD030	Age started smoking cigarettes regularly
943	SMQ_D	Smoking – Cigarette Use	SMQ040	Do you now smoke cigarettes
944	SMQ_D	Smoking – Cigarette Use	SMQ050Q	How long since quit smoking cigarettes
945	SMQ_D	Smoking – Cigarette Use	SMQ050U	Unit of measure (day/week/month/year)
946	SMQ_D	Smoking – Cigarette Use	SMD055	Age last smoked cigarettes regularly
947	SMQ_D	Smoking – Cigarette Use	SMD057	# cigarettes smoked per day when quit

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Item #	Data File	Component	Item ID	Label
948	SMQ_D	Smoking – Cigarette Use	SMD070	# cigarettes smoked per day now
949	SMQ_D	Smoking – Cigarette Use	SMD075	How many years smoked this amount
950	SMQ_D	Smoking – Cigarette Use	SMQ077	How soon after waking do you smoke
951	SMQ_D	Smoking – Cigarette Use	SMD641	# days smoked cigs during past 30 days
952	SMQ_D	Smoking – Cigarette Use	SMD650	Avg # cigarettes/day during past 30 days
953	SMQ_D	Smoking – Cigarette Use	SMD093	May I please see the pack of cigarettes
954	SMQ_D	Smoking – Cigarette Use	SMDUPCA	Cig 12-digit Universal Product Code-UPC
955	SMQ_D	Smoking – Cigarette Use	SMD100BR	Cigarette Brand/sub-brand
956	SMQ_D	Smoking – Cigarette Use	SMD100FL	Filter type
957	SMQ_D	Smoking – Cigarette Use	SMD100MN	Menthol indicator
958	SMQ_D	Smoking – Cigarette Use	SMD100LN	Length
959	SMQ_D	Smoking – Cigarette Use	SMD100TR	FTC Tar Content
960	SMQ_D	Smoking – Cigarette Use	SMD100NI	FTC Nicotine Content
961	SMQ_D	Smoking – Cigarette Use	SMD100CO	FTC Carbon Monoxide Content
962	SMQ_D	Smoking – Cigarette Use	SMQ620	Ever tried cigarette smoking
963	SMQ_D	Smoking – Cigarette Use	SMD630	Age first smoked whole cigarette
964	SMQ_D	Smoking – Cigarette Use	SMQ660	Brands of cigarettes smoked/past mo
965	SMQ_D	Smoking – Cigarette Use	SMQ664M	Menthol or non-menthol Marlboro
966	SMQ_D	Smoking – Cigarette Use	SMQ664C	Menthol or non-menthol Camels
967	SMQ_D	Smoking – Cigarette Use	SMQ664W	Menthol or non-menthol Winston
968	SMQ_D	Smoking – Cigarette Use	SMQ664B	Menthol or non-menthol BensonHedges
969	SMQ_D	Smoking – Cigarette Use	SMQ664O	Menthol or non-menthol other brand

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Item #	Data File	Component	Item ID	Label
970	SMQ_D	Smoking – Cigarette Use	SMQ666M	Regular, light or ultralite Marlboro
971	SMQ_D	Smoking – Cigarette Use	SMQ666C	Regular, light or ultralite Camels
972	SMQ_D	Smoking – Cigarette Use	SMQ666K	Regular, light or ultralite Kools
973	SMQ_D	Smoking – Cigarette Use	SMQ666W	Regular, light or ultralite Winston
974	SMQ_D	Smoking – Cigarette Use	SMQ666B	Regular, light or ultralite BensonHedges
975	SMQ_D	Smoking – Cigarette Use	SMQ666S	Regular, light or ultralite Salem
976	SMQ_D	Smoking – Cigarette Use	SMQ666O	Regular, light or ultralite other brand
977	SMQ_D	Smoking – Cigarette Use	SMQ670	Tried to quit smoking
978	SMQ_D	Smoking – Cigarette Use	SMAQUEX2	Questionnaire Mode Flag
979	SMQFAM_D	Smoking – Household Smokers	SEQN	Respondent sequence number
980	SMQFAM_D	Smoking – Household Smokers	SMD410	Does anyone smoke in home?
981	SMQFAM_D	Smoking – Household Smokers	SMD415	Total # of smokers in home
982	SMQFAM_D	Smoking – Household Smokers	SMD415A	Total # of cigarette smokers in home
983	SMQFAM_D	Smoking – Household Smokers	SMD430	Total # of cigarettes smoked in home
984	SMQRTU_D	Smoking–Recent Tobacco Use	SEQN	Respondent sequence number
985	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ680	Used tobacco/nicotine last 5 days?
986	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ690A	Used last 5 days - Cigarettes
987	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ690B	Used last 5 days - Pipes
988	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ690C	Used last 5 days - Cigars
989	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ690D	Used last 5 days - Chewing tobacco
990	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ690E	Used last 5 days - Snuff
991	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ690F	Used last 5 days - Patch, gum, other
992	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ710	# days smoked cigarettes last 5 days
993	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ720	# cigarettes smoked per day
994	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ725	When did resp. smoke last cigarette?

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Item #	Data File	Component	Item ID	Label
995	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ740	# days smoked pipe over last 5 days
996	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ750	# pipes smoked per day - last 5 days
997	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ755	When did resp. smoke last pipe?
998	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ770	# days smoked cigars over last 5 days
999	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ780	# cigars smoked per day - last 5 days
1000	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ785	When did resp. smoke last cigar?
1001	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ800	#days used chewing tobacco -last 5 days
1002	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ815	When did resp. last use chewing tobacco?
1003	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ817	# days used snuff over last 5 days
1004	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ819	When last used snuff
1005	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ830	# days used nicotine stop smoking aids?
1006	SMQRTU_D	Smoking–Recent Tobacco Use	SMQ840	Last time used nicotine stop smoking aid
1007	SMQRTU_D	Smoking–Recent Tobacco Use	SMAQUEx	Questionnaire Mode Flag
1008	SSQ_D	Social Support	SEQN	Respondent sequence number
1009	SSQ_D	Social Support	SSQ011	Anyone to help with emotional support
1010	SSQ_D	Social Support	SSQ021A	Spouse gives most emotional support
1011	SSQ_D	Social Support	SSQ021B	Daughter gives most emotional support
1012	SSQ_D	Social Support	SSQ021C	Son gives most emotional support
1013	SSQ_D	Social Support	SSQ021D	Sibling gives most emotional support
1014	SSQ_D	Social Support	SSQ021E	Parent gives most emotional support
1015	SSQ_D	Social Support	SSQ021F	Other relative gives emotional support

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Item #	Data File	Component	Item ID	Label
1016	SSQ_D	Social Support	SSQ021G	Neighbors give most emotional support
1017	SSQ_D	Social Support	SSQ021H	Co-workers give most emotional support
1018	SSQ_D	Social Support	SSQ021I	Church members give emotional support
1019	SSQ_D	Social Support	SSQ021J	Club members give most emotional support
1020	SSQ_D	Social Support	SSQ021K	Professionls give most emotional support
1021	SSQ_D	Social Support	SSQ021L	Friends give most emotional support
1022	SSQ_D	Social Support	SSQ021M	Others give most emotional support
1023	SSQ_D	Social Support	SSQ021N	No one gives most emotional support
1024	SSQ_D	Social Support	SSQ031	Needed more support in past year
1025	SSQ_D	Social Support	SSQ041	How much more support needed
1026	SSQ_D	Social Support	SSD044	How often attend church per year
1027	SSQ_D	Social Support	SSQ051	Anyone to help with financial support
1028	SSQ_D	Social Support	SSQ061	Number of close friends
1029	SXQ_D	Sexual Behavior	SEQN	Respondent sequence number
1030	SXQ_D	Sexual Behavior	SXAISC	Interview Status Code
1031	SXQ_D	Sexual Behavior	SXQ021	Ever had vaginal, anal, or oral sex
1032	SXQ_D	Sexual Behavior	SXD031	How old when first had sex
1033	SXQ_D	Sexual Behavior	SXQ101	#male sex partners/lifetime
1034	SXQ_D	Sexual Behavior	SXQ350	#male oral sex partners/lifetime
1035	SXQ_D	Sexual Behavior	SXQ130	#female sex partners/lifetime
1036	SXQ_D	Sexual Behavior	SXD171	#female sex partners/lifetime
1037	SXQ_D	Sexual Behavior	SXQ400	#female oral sex partners/lifetime

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Item #	Data File	Component	Item ID	Label
1038	SXQ_D	Sexual Behavior	SXQ410	#male sex partners/lifetime
1039	SXQ_D	Sexual Behavior	SXQ430	#male oral sex partners/lifetime
1040	SXQ_D	Sexual Behavior	SXQ450	#male sex partners/year
1041	SXQ_D	Sexual Behavior	SXQ470	#male oral sex partners/year
1042	SXQ_D	Sexual Behavior	SXQ490	#female sex partners/year
1043	SXQ_D	Sexual Behavior	SXQ510	#female sex partners/year
1044	SXQ_D	Sexual Behavior	SXQ530	#female oral sex partners/year
1045	SXQ_D	Sexual Behavior	SXQ550	#male sex partners/year
1046	SXQ_D	Sexual Behavior	SXQ570	#male oral sex partners/year
1047	SXQ_D	Sexual Behavior	SXQ590	#sex partners five years older/year
1048	SXQ_D	Sexual Behavior	SXQ600	#sex partners five years younger/year
1049	SXQ_D	Sexual Behavior	SXQ610	#times had vaginal or anal sex/year
1050	SXQ_D	Sexual Behavior	SXQ251	#times had sex without condom/year
1051	SXQ_D	Sexual Behavior	SXQ260	Doctor ever told you had genital herpes
1052	SXQ_D	Sexual Behavior	SXQ265	Doctor ever told you had genital warts
1053	SXQ_D	Sexual Behavior	SXQ270	Doctor ever told you had gonorrhea
1054	SXQ_D	Sexual Behavior	SXQ272	Doctor ever told you had chlamydia
1055	SXQ_D	Sexual Behavior	SXQ280	Are you circumcised or uncircumcised
1056	SXQ_D	Sexual Behavior	SXQ292	Describe sexual orientation (male)
1057	SXQ_D	Sexual Behavior	SXQ294	Describe sexual orientation (female)
1058	VIQ_D	Vision	SEQN	Respondent sequence number
1059	VIQ_D	Vision	VIQ010	Can see light
1060	VIQ_D	Vision	VIQ017	Blind in both eyes
1061	VIQ_D	Vision	VIQ031	General condition of eyesight
1062	VIQ_D	Vision	VIQ041	Time worrying about eyesight

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Item #	Data File	Component	Item ID	Label
1063	VIQ_D	Vision	VIQ051A	Difficulty reading ordinary newsprint
1064	VIQ_D	Vision	VIQ051B	Difficulty with up close work or chores
1065	VIQ_D	Vision	VIQ051C	Difficulty seeing steps/curbs-dim light
1066	VIQ_D	Vision	VIQ051D	Difficulty noticing objects to side
1067	VIQ_D	Vision	VIQ051E	Difficulty findng object on crowdedshelf
1068	VIQ_D	Vision	VIQ056	Difficulty drivng daytime-familiar place
1069	VIQ_D	Vision	VIQ061	Vision limits how long can do activities
1070	VIQ_D	Vision	VIQ071	Ever had a cataract operation
1071	VIQ_D	Vision	VIQ081	Operation in right, left or both eyes
1072	VIQ_D	Vision	VIQ090	Ever told had glaucoma
1073	VIQ_D	Vision	VIQ100	Glaucoma in which eye
1074	VIQ_D	Vision	VIQ310	Told had macular degeneration
1075	VIQ_D	Vision	VIQ320	Macular degeneration in which eye
1076	WHQ_D	Weight History 16 Years and Older	SEQN	Respondent sequence number
1077	WHQ_D	Weight History 16 Years and Older	WHD010	Current self-reported height (inches)
1078	WHQ_D	Weight History 16 Years and Older	WHD020	Current self-reported weight (pounds)
1079	WHQ_D	Weight History 16 Years and Older	WHQ030	How do you consider your weight
1080	WHQ_D	Weight History 16 Years and Older	WHQ040	Like to weigh more, less or same
1081	WHQ_D	Weight History 16 Years and Older	WHD050	Self-reported weight - 1 yr ago (pounds)
1082	WHQ_D	Weight History 16 Years and Older	WHQ060	Weight change intentional
1083	WHQ_D	Weight History 16 Years and Older	WHQ070	Tried to lose weight in past year
1084	WHQ_D	Weight History 16 Years and Older	WHD080A	Ate less to lose weight
1085	WHQ_D	Weight History 16 Years and Older	WHD080B	Switched to foods with lower calories
1086	WHQ_D	Weight History 16 Years and Older	WHD080C	Ate less fat to lose weight
1087	WHQ_D	Weight History 16 Years and Older	WHD080D	Exercised to lose weight

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Item #	Data File	Component	Item ID	Label
1088	WHQ_D	Weight History 16 Years and Older	WHD080E	Skipped meals
1089	WHQ_D	Weight History 16 Years and Older	WHD080F	Ate diet foods or products
1090	WHQ_D	Weight History 16 Years and Older	WHD080G	Used a liquid diet formula
1091	WHQ_D	Weight History 16 Years and Older	WHD080H	Joined a weight loss program
1092	WHQ_D	Weight History 16 Years and Older	WHD080I	Took prescription diet pills
1093	WHQ_D	Weight History 16 Years and Older	WHD080J	Took non-RX suppl. to lose weight
1094	WHQ_D	Weight History 16 Years and Older	WHD080K	Took laxatives or vomited
1095	WHQ_D	Weight History 16 Years and Older	WHD080L	Other
1096	WHQ_D	Weight History 16 Years and Older	WHD080M	Drank a lot of water
1097	WHQ_D	Weight History 16 Years and Older	WHD080N	Followed a special diet
1098	WHQ_D	Weight History 16 Years and Older	WHD080O	Ate fewer carbohydrates
1099	WHQ_D	Weight History 16 Years and Older	WHD080P	Started to smoke or began to smoke again
1100	WHQ_D	Weight History 16 Years and Older	WHD080Q	Ate more fruits, vegetables, salads
1101	WHQ_D	Weight History 16 Years and Older	WHD080R	Changed eating habits
1102	WHQ_D	Weight History 16 Years and Older	WHD080S	Ate less sugar, candy, sweets
1103	WHQ_D	Weight History 16 Years and Older	WHQ270	Seek help from a health professional
1104	WHQ_D	Weight History 16 Years and Older	WHQ280A	Personal trainer
1105	WHQ_D	Weight History 16 Years and Older	WHQ280B	Dietitian
1106	WHQ_D	Weight History 16 Years and Older	WHQ280C	Nutritionist
1107	WHQ_D	Weight History 16 Years and Older	WHQ280D	Doctor
1108	WHQ_D	Weight History 16 Years and Older	WHQ280E	Other health professional
1109	WHQ_D	Weight History 16 Years and Older	WHQ090	Tried not to gain weight in past year
1110	WHQ_D	Weight History 16 Years and Older	WHD100A	Ate less food
1111	WHQ_D	Weight History 16 Years and Older	WHD100B	Switched to foods with lower calories
1112	WHQ_D	Weight History 16 Years and Older	WHD100C	Ate less fat

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Item #	Data File	Component	Item ID	Label
1113	WHQ_D	Weight History 16 Years and Older	WHD100D	Exercised
1114	WHQ_D	Weight History 16 Years and Older	WHD100E	Skipped meals
1115	WHQ_D	Weight History 16 Years and Older	WHD100F	Ate diet foods or products
1116	WHQ_D	Weight History 16 Years and Older	WHD100G	Used liquid diet formula
1117	WHQ_D	Weight History 16 Years and Older	WHD100H	Joined a weight loss program
1118	WHQ_D	Weight History 16 Years and Older	WHD100I	Took prescription diet pills
1119	WHQ_D	Weight History 16 Years and Older	WHD100J	Took non-prescription diet pills
1120	WHQ_D	Weight History 16 Years and Older	WHD100K	Took laxatives or vomited
1121	WHQ_D	Weight History 16 Years and Older	WHD100L	Other
1122	WHQ_D	Weight History 16 Years and Older	WHD100M	Drank a lot of water
1123	WHQ_D	Weight History 16 Years and Older	WHD100N	Followed a special diet
1124	WHQ_D	Weight History 16 Years and Older	WHD100O	Ate fewer carbohydrates
1125	WHQ_D	Weight History 16 Years and Older	WHD100P	Started to smoke or began to smoke again
1126	WHQ_D	Weight History 16 Years and Older	WHD100Q	Ate more fruits, vegetables, salads
1127	WHQ_D	Weight History 16 Years and Older	WHD100R	Changed eating habits
1128	WHQ_D	Weight History 16 Years and Older	WHD100S	Ate less sugar, candy, sweets
1129	WHQ_D	Weight History 16 Years and Older	WHQ210	Have you/Has SP ever tried to lose weigh
1130	WHQ_D	Weight History 16 Years and Older	WHD220	Weight loss most successful (pounds)
1131	WHQ_D	Weight History 16 Years and Older	WHD110	Self-reported weight-10 yrs ago (pounds)
1132	WHQ_D	Weight History 16 Years and Older	WHD120	Self-reported weight-age 25 (pounds)
1133	WHQ_D	Weight History 16 Years and Older	WHD130	Self-reported height - age 25 (inches)
1134	WHQ_D	Weight History 16 Years and Older	WHD140	Self-reported greatest weight (pounds)
1135	WHQ_D	Weight History 16 Years and Older	WHQ150	Age when heaviest weight

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Item #	Data File	Component	Item ID	Label
1136	WHQMEC_D	Weight History 8-15 Years	SEQN	Respondent sequence number
1137	WHQMEC_D	Weight History 8-15 Years	WHQ030M	How do you consider your weight
1138	WHQMEC_D	Weight History 8-15 Years	WHQ500	Trying to do about weight
1139	WHQMEC_D	Weight History 8-15 Years	WHQ510A	Want to look better
1140	WHQMEC_D	Weight History 8-15 Years	WHQ510B	Want to be healthier
1141	WHQMEC_D	Weight History 8-15 Years	WHQ510C	Want to be better at sports
1142	WHQMEC_D	Weight History 8-15 Years	WHQ510D	Get teased about my weight
1143	WHQMEC_D	Weight History 8-15 Years	WHQ510E	Think my clothes will fit better
1144	WHQMEC_D	Weight History 8-15 Years	WHQ510F	Think boys will like me better
1145	WHQMEC_D	Weight History 8-15 Years	WHQ510G	Think girls will like me better
1146	WHQMEC_D	Weight History 8-15 Years	WHQ510H	Friends are trying to lose weight
1147	WHQMEC_D	Weight History 8-15 Years	WHQ510I	Someone in family trying to lose weight
1148	WHQMEC_D	Weight History 8-15 Years	WHQ510J	Mother/father wants me to lose weight
1149	WHQMEC_D	Weight History 8-15 Years	WHQ510K	Teacher/coach wants me to lose weight
1150	WHQMEC_D	Weight History 8-15 Years	WHQ510L	Health professional wants me lose weight
1151	WHQMEC_D	Weight History 8-15 Years	WHQ510M	Want to be skinny/don't want to be fat
1152	WHQMEC_D	Weight History 8-15 Years	WHQ510N	Want to feel good/better about self
1153	WHQMEC_D	Weight History 8-15 Years	WHQ510O	Because I'm fat/overweight
1154	WHQMEC_D	Weight History 8-15 Years	WHQ510U	Other reason
1155	WHQMEC_D	Weight History 8-15 Years	WHQ520	How often tried to lose weight
1156	WHQMEC_D	Weight History 8-15 Years	WHQ530	Been on a diet to lose weight
1157	WHQMEC_D	Weight History 8-15 Years	WHQ540	Starved to lose weight
1158	WHQMEC_D	Weight History 8-15 Years	WHQ550	Cut back on eating to lose weight

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Item #	Data File	Component	Item ID	Label
1159	WHQMEC_D	Weight History 8-15 Years	WHQ560	Skipped meals to lose weight
1160	WHQMEC_D	Weight History 8-15 Years	WHQ570	Exercised to lose weight
1161	WHQMEC_D	Weight History 8-15 Years	WHQ580	Eaten less sweets or fatty foods