

MAIN STUDY - ROUND 16
COMMUNITY COMPONENT
PM. PRESCRIBED MEDICINE UTILIZATION

PMINTROA. Now let's talk about prescribed medicines (you have/SP has) obtained since (PREVIOUS ROUND INTERVIEW DATE).
(While talking about medical visits, you mentioned some medicine(s): [READ MEDICINE NAME(S) BELOW.]
(Now I'd like to talk about prescribed medicines.)

PM1. [(Besides (that medicine/those medicines),/Since (REF. DATE),) (have you/has SP) had/Between (PREVIOUS ROUND INTERVIEW DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION), did (SP) have] any (other) prescriptions filled?

PMFILLED	YES	1 (PM2)
	NO	2 (PM3)
	REFUSED	-7 (PM3)
	DON'T KNOW	-8 (PM3)

PM2. What is the name of the medicine?
[ENTER ALL MEDICINES.] [CHECK SPELLING.]

PMEDNAME

PMROTYPE

PM3. People sometimes forget to mention refills of earlier prescriptions. (In addition to what you've told me about) Did (you/SP) have any prescriptions refilled [since (REF. DATE)/between (PREVIOUS ROUND INTERVIEW DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)]?

PMREFILL	YES	1 (PM4)
	NO	2 (PM5)
	REFUSED	-7 (PM5)
	DON'T KNOW	-8 (PM5)

PM4. What is the name of the medicine?
[ENTER ALL MEDICINES.] [CHECK SPELLING.]

PMEDNAME

PM5. People sometimes forget to mention prescriptions that were phoned in by a doctor. (In addition to what you've told me about) Did (you/SP) get any medicine prescribed by a doctor in a telephone call to a drug store or pharmacy [since (REF. DATE)/between (PREVIOUS ROUND INTERVIEW DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)]?

PMDRPHON	YES	1 (PM6)
	NO	2 BOX PM1
	REFUSED	-7 BOX PM1
	DON'T KNOW	-8 BOX PM1

PM6. What is the name of the medicine?
 [ENTER ALL MEDICINES.] [CHECK SPELLING.]
PMEDNAME

BOX PM1	IF ANY MEDICINES SELECTED OR ADDED AT UTILIZATION FOR THIS ROUND OR SELECTED OR ADDED THROUGH SECTION PMS, GO TO PM6a. OTHERWISE, GO TO BOX ST1A .
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PM6a. How many times [since (REF. DATE)/between (PREVIOUS ROUND INTERVIEW DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)/(PREVIOUS ROUND START DATE) and (PREVIOUS ROUND INTERVIEW DATE)] did (you/SP) obtain (medicine)?
 [ENTER FOR EACH MEDICINE ON ROSTER.]
GETNUM

(MEDICINE NAME)	(NUMBER OF PURCHASES)
(MEDICINE NAME)	(NUMBER OF PURCHASES)
(MEDICINE NAME)	(NUMBER OF PURCHASES)

TO ADD A MEDICINE, PRESS CTRL/A.
 TO LEAVE SCREEN, PRESS ESC.

BOX PM1A	IF ALL MEDICINES = 0 FOR NUMBER OF PURCHASES, GO TO BOX ST1A . OTHERWISE, GO TO PMINTROB FOR EACH MEDICINE WITH NUMBER OF PURCHASES > 0 OR = MISSING.
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PMINTROB. [It would be very helpful for the following questions if we could look at the bottle(s), container(s), or bag(s) for the medicine(s) you've just told me about. ASK R TO GET BOTTLES.]
 Now I need to ask you a few questions about the [(NAME OF (FIRST/NEXT) MEDICINE ON PM ROSTER)].

BOX PM1B	IF THIS MEDICINE HAS A CONDITION LINKED TO IT FOR A PREVIOUS ROUND, GO TO PM8. IF NO CONDITION LINKED TO THIS MEDICINE FOR A PREVIOUS ROUND, GO TO PM7.
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PM7. What condition was (MEDICINE) for?
 [ENTER ALL CONDITIONS.]
CONDTION

PM8. [CODE "YES" WITHOUT ASKING IF BOTTLE OR BAG IS PRESENT.] Do you have the medicine bottle, container, or bag available?

PMBOTTLE

YES	1	BOX PM1B-1
NO	2	BOX PM2
NO, BUT R CAN ANSWER QUESTIONS	3	BOX PM1B-1
REFUSED	-7	BOX PM2
DON'T KNOW	-8	BOX PM2

BOX PM1B-1	IF PREVIOUS ROUND GETNUM (PM6a) = OR > 1 OR -7 OR -8 AND PREVIOUS ROUND PMFORM OR PMFORM ADDED IN PMS (PM9) NOT EQUAL TO -1 OR -8 FOR THE (FIRST/NEXT) MEDICINE ON PM ROSTER, GO TO PM8A. OTHERWISE, GO TO PMINTROC.
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PM8a. At the time of the last interview, (you/SP) purchased (FIRST/NEXT MEDICINE) in the form of (PREVIOUS INTERVIEW PM9). Is this medicine in the same form?

SAMEFORM

YES	1	BOX PM1B-2
NO	2	(PMINTROC)
REFUSED	-7	(PMINTROC)
DON'T KNOW	-8	(PMINTROC)

BOX PM1B-2	<p>IF PREVIOUS ROUND PM9 = 1 OR 10: AND MEDICINE NOT A COMPOUND, GO TO PM9a. AND MEDICINE IS A COMPOUND, GO TO PM10. AND PREVIOUS ROUND PM10 = -8, GO TO PM10.</p> <p>IF PREVIOUS ROUND PM9 = 2, 3, 4, 6, 7, 8, 9, 11, 12, 91: AND MEDICINE NOT A COMPOUND, GO TO PM15a. AND MEDICINE IS A COMPOUND, GO TO PM16. AND PREVIOUS ROUND PM16 = -8.</p> <p>IF PREVIOUS ROUND PM9 = 5, GO TO PM15.</p>
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PMINTROC. INTERVIEWER: COMPLETE PM9 -- PM16 USING INFORMATION FROM MEDICINE BOTTLE OR CONTAINER. IF THERE IS MORE THAN ONE CONTAINER FOR THE SAME MEDICINE, USE THE MOST RECENT CONTAINER.

PM9. IN WHAT FORM IS THE MEDICINE?

PMFORM	PILLS (TABLET, CAPSULE).....	1 (PM10)
	LIQUID (TO BE TAKEN ORALLY)	2 (PM16)
	DROPS (EYE/EAR/NOSE).....	3 (PM16)
	TOPICAL OINTMENT (CREAM, LOTION)....	4 (PM16)
	SUPPOSITORIES	5 (PM15)
	AEROSOL/SPRAY, INHALANT	6 (PM16)
	SHAMPOO, SOAP	7 (PM16)
	INJECTION	8 (PM16)
	IV INJECTION	9 (PM16)
	PATCHES	10 (PM10)
	TOPICAL GEL/JELLY	11 (PM16)
	POWDER	12 (PM16)
PMFORMOS	OTHER (SPECIFY)	91 (PM16)
	DON'T KNOW	-8 (PM16)

PM9a. At the time of the last interview, the strength of each (pill/patch) was (PREVIOUS ROUND PM10). Is this medicine in the same strength?

SAMESTRN	YES	1 (PM11)
	NO	2 (PM10)
	REFUSED	-7 (PM10)
	DON'T KNOW	-8 (PM10)

PM10. (1ST MEDICINE IN COMPOUND:)
(2ND MEDICINE IN COMPOUND:)
WHAT IS THE STRENGTH?
WHAT IS THE STRENGTH OF EACH (PILL/PATCH)?

STRNUNIT	MICROGRAMS (mcg)	1	STRNNUM	NUMBER OF (TYPE OF UNITS): _____
	MILLIGRAMS (mg)	2		
	GRAINS (gr)	3		
	MILLIEQUIVALENTS (meq)	4		
	GRAMS (gm)	5		
	OTHER (SPECIFY) _____	91		
STRNUNOS	COMPOUND/MORE THAN ONE		COMPFLAG	
	MEDICINE COMBINED	96	STRNUNI2	
	DON'T KNOW	-8 (PM11)	STRNUNO2	
			STRNNUM2	

PM11. HOW MANY PILLS/PATCHES WERE IN THE CONTAINER WHEN IT WAS OBTAINED?

TABNUM	_____ BOX PM1C	
	NUMBER	
	DON'T KNOW	-8 BOX PM1C

BOX PM1C	IF PM9 = 10, GO TO BOX PM2 . IF PM9 = 1 AND PM11 = -8, GO TO PM12. IF PM9 = 1 AND PM11 ≠ -8, GO TO BOX PM2 .
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PM12. HOW MANY PILLS ARE TO BE TAKEN IN A DAY?

TABSADAY	_____ (PM14)	
	NUMBER	
	LESS THAN WHOLE PILL	95 (PM14)
	TAKE AS NEEDED	96 (PM13)
	DON'T KNOW	-8 BOX PM2

PM13. How many pills (do you/did you/does SP/did SP) usually take in a day?

TABTAKE	_____	
	NUMBER	
	DON'T TAKE EVERY DAY	96 BOX PM2
	DON'T KNOW	-8

PM14. HOW MANY DAYS OR WEEKS WAS THE MEDICINE TO BE TAKEN?

TAKEUNIT	DAYS	1	NUMBER OF DAYS: _____	BOX PM2
	WEEKS	2	NUMBER OF WEEKS: _____	BOX PM2
	TAKE UNTIL GONE	3	BOX PM2	TAKENUM
	TAKE AS NEEDED	4	BOX PM2	
	TAKE EVERY DAY	5	BOX PM2	
	DON'T KNOW	-8	BOX PM2	

PM15. HOW MANY SUPPOSITORIES WERE IN THE CONTAINER WHEN IT WAS OBTAINED?
IF 99 OR MORE, ENTER 99.

SUPPNUM	_____ BOX PM2
	NUMBER
	DON'T KNOW

PM15a. At the time of the last interview, the amount of the (PREVIOUS ROUND PM9) was (PREVIOUS ROUND PM16).
Is this medicine in the same amount?

SAMEAMNT	YES	1	BOX PM2
	NO	2	(PM16)
	REFUSED	-7	(PM16)
	DON'T KNOW	-8	(PM16)

PM16. (1ST MEDICINE IN COMPOUND:)
 (2ND MEDICINE IN COMPOUND:)
 WHAT IS THE AMOUNT OF THE MEDICINE?

AMTUNIT	OUNCES (oz)	1	NUMBER OF (TYPE OF UNITS):	
	GRAMS (gm)	2	AMTNUM	
	MILLILITERS (ml, cc)	3		
	MILLIEQUIVALENTS (meq)	4		
	MILLIGRAMS (mg)	5		
	MICROGRAMS (mcg)	6		
	OTHER (SPECIFY)	91		
AMTUNOS	COMPOUND/MORE THAN ONE			
	MEDICINE COMBINED	96	COMPFLAG	
	DON'T KNOW	-8	BOX PM2	AMTUNIT2 AMTUNOS2 AMTNUM2

BOX PM2	IF MORE MEDICINES ON MEDICINE ROSTER WITH NUMBER OF PURCHASES > 0, RETURN TO PMINTROB FOR NEXT MEDICINE. RETURN TO PMSINTRB IF COMING FROM PMS. OTHERWISE, GO TO PM17.
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PM17. DO YOU HAVE ANY MEDICINES THAT YOU HAVE NOT ENTERED?

TEMP	YES	1 (PM6)
	NO	2 BOX ST1A