Analgesics Sub-section of the DSQ section of the SP Questionnaire (RXQ_ANA)
Product level data by person -- use Interview Weights for analysis

SEQN	Version Info	Target
	Version 1.0	B(20 Yrs. - 120 Yrs.)
Hard Edits	**SAS Label**	
	Respondent sequence number	

English Text: Respondent sequence number.

English Instructions:< blank >

Codes:

RXQ300	Version Info	Target
	Version 1.0	B(20 Yrs. - 120 Yrs.)
Hard Edits	**SAS Label**	
	Drugs/over counter taken regularly	

English Text: The next questions are about certain prescription and over the counter pain relievers that {you/SP} may be using now or may have used in the past on a regular basis. You may have told me about some of these pain relievers earlier. I have some different questions specifically about pain relievers. {Have you/has SP} ever taken any of these prescription or over-the-counter pain relievers nearly every day for as long as a month?

English Instructions:HAND CARD DSQ2

Codes:

1 = Yes	
2 = No	(Skip to: End of section)
7 = Refused	(Skip to: End of section)
9 = Don't know	(Skip to: End of section)

RXQ310	Version Info	Target
	Version 1.0	B(20 Yrs. - 120 Yrs.)
Hard Edits	**SAS Label**	
	Product taken	

English Text: Which products {have you/has SP} taken?

English Instructions:CODE ALL THAT APPLY. HAND CARD DSQ2.   CAPI INSTRUCTION: DISPLAY PRODUCT LIST OF PAIN RELIEVING PRODUCTS. (ADD " —ALSO ALEVE" AFTER "NAPROSYN " IN THE RESPONSE CATEGORIES.)

Codes:

    10 = Aspirin - also buffered aspirin products such as Anacin, Bayer, Bufferin, Midol, Ascripton, Ecotrin, Pabrin and Alka Seltzer

    11 = Tylenol - also other acetaminophen products, including sinus products such as Anacin-3, Dristan AF, and Comtrex

    12 = Ibuprofen - also, Advil, Nuprin, Motrin IB (including cold and sinus products containing ibuprofen)

    13 = Excedrin

    14 = Vanquish

    15 = Feldene

    16 = Voltarin

    17 = Clinoril

    18 = Indocin

    19 = Naprosyn - also Aleve

    20 = Tolectin

    77 = Refused

    99 = Don't know

RXD320	Version Info	Target
	Version 1.0	B(20 Yrs. - 120 Yrs.)
Hard Edits	**SAS Label**	
	# years taking product every day	

English Text: Please think about {your/SP's} use of pain reliever products during {your/his/her} lifetime. For how many years did {you/s/he} use {PRODUCT NAME} nearly every day? Please do not count the months or years when {you were/s/he was} not taking the medicine.

English Instructions:ENTER NUMBER OF YEARS

Codes:

    555 = More than 1 year unspecified

    666 = Less than one year

    777 = Refused

    999 = Don't know

RXQ330	Version Info	Target
	Version 1.0	B(20 Yrs. - 120 Yrs.)
Hard Edits	**SAS Label**	

	Currently taking product every day

English Text: {Do you/Does SP} currently use or take {PRODUCT NAME} daily or nearly every day?

English Instructions:IF NO, REFUSED OR DON'T KNOW, ASK RXQ.320 - RXQ.331 FOR NEXT PAIN RELIEVER. IF NO NEXT PAIN RELIEVER, GO TO END OF SECTION.

Codes:

1 = Yes	
2 = No	(Skip to: End of section)
7 = Refused	(Skip to: End of section)
9 = Don't know	(Skip to: End of section)

RXD331Q	**Version Info**	**Target**
	Version 1.0	B(20 Yrs. - 120 Yrs.)
Hard Edits	**SAS Label**	
1 - 50	# of pills/doses taken/day	

English Text: On average, how many pills or doses of {PRODUCT NAME} {do you/does SP} take in a single day?

English Instructions:ENTER NUMBER (OF PILLS OR DOSES)

Codes:

7777 = Refused

9999 = Don't know

RXD331U	**Version Info**	**Target**
	Version 1.0	B(20 Yrs. - 120 Yrs.)
Hard Edits	**SAS Label**	
	Unit of measure (pills/doses)	

English Text: UNIT OF MEASURE

English Instructions:ENTER UNIT

Codes:

1 = Pills

2 = Doses

7 = Refused

9 = Don't know