

CHD Community Surveillance**Data set name: S14IFIA1_NP**

Community Surveillance Informant Interview Form

<i>CONTYR</i>		<i>Record Sequence Number</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
12196	1	
483	2	
39	3	

<i>ID</i>		<i>ARIC Occurrence ID</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
12718	Present	Text suppressed

<i>IFIA00</i>		<i>Result Code</i>	<i>Q0</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
4203	01	Complete	
40	02	Partially complete	
74	03	Unknowledgable	
941	04	Refusal	
3095	05	Informant away or can't be found	
23	06	Language barrier	
145	07	No one home	
278	09	Other (specify in Notes)	
3919		Missing	

<i>IFIA01</i>		<i>Informant's Relationship To Deceased Q1</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
2221	C	Daughter/son
234	F	Friend
185	O	Other
426	P	Parent
1506	R	Other relative
3559	S	Spouse
16	W	Workmate
4571		Missing

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<i>IFIA02</i>		<i>First, think back to about one month before () died. At that time, was he/she sick or ill, with his/her activities limited, or was he/she normally active for the most part? Q2</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
3934	N	Normally active
4110	R	Sick/ill/limited activities
84	U	Unknown
4589		Missing

<i>IFIA03</i>		<i>Was () being cared for at a nursing home, or at another place at the time of death? Q3</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
66	A	Yes, assisted living
90	F	Yes, Hospice facility
2208	H	Yes, at home
4549	N	No
195	O	Yes, other
1000	R	Yes, nursing home
9	U	Data entry error
4601		Missing

<i>IFIA04</i>		<i>Could you tell me the name and location of the nursing home? Q4</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
74	N	No
757	Y	Yes
11887		Missing

<i>IFIA05</i>		<i>Hospitalized In Past Four Week Q5</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
6387	N	No
196	U	Unknown
1552	Y	Yes
4583		Missing

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<i>IFIA06A</i>		<i>Hospitalized For Heart Attack or Chest Pain</i> Q6a
<i>N</i>	<i>Value</i>	<i>Description</i>
1257	N	No
40	U	Unknown
236	Y	Yes
11185		Missing

<i>IFIA06B</i>		<i>Hospitalized For Heart Surgery</i> Q6b
<i>N</i>	<i>Value</i>	<i>Description</i>
1438	N	No
32	U	Unknown
54	Y	Yes
11194		Missing

<i>IFIA06C</i>		<i>Hospitalized For Other Reason</i> Q6c
<i>N</i>	<i>Value</i>	<i>Description</i>
253	N	No
36	U	Unknown
1195	Y	Yes
11234		Missing

<i>IFIA07_YEAR</i>		<i>Year Of Date Of Hospital Admission</i> Q7
<i>N</i>	<i>Value</i>	<i>Description</i>
255	Range	1987 - 2014 (median=1999 mean=1999.5 std=8.3)
12463		Missing

<i>IFIA08</i>		<i>Could you tell me the name and location of the hospital?</i> Q8
<i>N</i>	<i>Value</i>	<i>Description</i>
6	N	No
186	Y	Yes
12526		Missing

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<i>IFIA09</i>		<i>Was () seen by a physician anytime in the last four weeks prior to death? Q9</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
2910	N	No
892	U	Unknown
4320	Y	Yes
4596		Missing

<i>IFIA10</i>		<i>Could you tell me the name and address of this physician? Q10</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1079	N	No
2078	Y	Yes
9561		Missing

<i>IFIA11</i>		<i>Could you tell me the name and address of ()'s usual physician? (If same as Q10 record as "same.") Q11</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
2476	N	No
3330	Y	Yes
6912		Missing

<i>IFIA12</i>		<i>Before ()'s final illness, had he/she ever had pains in the chest from heart disease, for example angina pectoris? Q12</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
4329	N	No
887	U	Unknown
2911	Y	Yes
4591		Missing

<i>IFIA13</i>		<i>Did () ever take nitroglycerin for this pain? Q13</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1031	N	No
737	U	Unknown
1956	Y	Yes
8994		Missing

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<i>IFIA14</i>		<i>Did a doctor ever say that () had a heart attack prior to his/her final illness? Q14</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
5280	N	No
448	U	Unknown
2390	Y	Yes
4600		Missing

<i>IFIA15</i>		<i>Was () hospitalized for a heart attack? Q15</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
340	N	No
47	U	Unknown
1994	Y	Yes
10337		Missing

<i>IFIA16</i>		<i>Did he/she ever have a coronary bypass operation, balloon angioplasty or some other operation or procedure to improve the circulation of blood to the heart? Q16</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
6137	N	No
204	U	Unknown
1783	Y	Yes
4594		Missing

<i>IFIA17</i>		<i>Did () ever have any other heart disease or heart condition before his/her final illness? Q17</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
5108	N	No
774	U	Unknown
2233	Y	Yes
4603		Missing

<i>IFIA18</i>		<i>Did () ever have a stroke? Q18</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
6422	N	No
312	U	Unknown
1393	Y	Yes
4591		Missing

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<i>IFIA19</i>		<i>Stroke In Four Weeks Before Death Q19</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1144	N	No
87	U	Unknown
160	Y	Yes
11327		Missing

<i>IFIA19A</i>		<i>Did he/she have a stroke within four weeks of his/her final illness? Q19a</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
552	N	No
39	U	Unknown
83	Y	Yes
12044		Missing

<i>IFIA19B</i>		<i>Did he/she have a history of cigarette smoking? Q19b</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
2060	N	No
50	U	Unknown
3769	Y	Yes
6839		Missing

<i>IFIA19C</i>		<i>Did he/she have a history of diabetes? Q19c</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
3597	N	No
136	U	Unknown
2148	Y	Yes
6837		Missing

<i>IFIA20</i>		<i>Could you please tell me what you can of ()'s general health, on the day he/she died, and of the death itself? Q20 "The next set of questions may go over some of what you have already told me. Although it may seem repetitious, I must ask these questions for consistency of information.</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
27	N	No
16	U	Unknown
5871	Y	Yes
6804		Missing

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<i>IFIA21</i>		<i>Were you present when () died?</i>	<i>Q21</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
1	=	Data management code, treat as missing	
5814	N	No	
2292	Y	Yes	
4611		Missing	

<i>IFIA22</i>		<i>Did anyone see or hear () when he/she died?</i>	<i>Q22</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
3424	N	No	
333	U	Unknown	
2037	Y	Yes	
6924		Missing	

<i>IFIA23</i>		<i>Was anyone close enough to hear () if he/she had called out?</i>	<i>Q23</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
1989	N	No	
496	U	Unknown	
1250	Y	Yes	
8983		Missing	

<i>IFIA24</i>		<i>How long after () was last known to be alive was he/she found dead?</i>	<i>Q24</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
66	A	5 minutes or less	
373	B	1 hour or less	
1323	C	24 hour or less	
388	D	more than 24 hours	
294	U	Unknown	
10274		Missing	

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<i>IFIA25</i>		<i>Where was () when he/she died? Q25</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
5087	A	Home (or other private residence)
135	B	Work
149	C	In a public place
7	D	On a bus or public transportation
86	E	On the street
156	F	In an automobile
876	G	In a nursing home
845	H	In an emergency room
114	I	In an ambulance
104	J	In the hospital
489	O	Other
51	U	Unknown
4619		Missing

<i>IFIA26</i>		<i>Did () experience pain or discomfort in his/her chest, left arm, or shoulder or jaw either just before death or within 3 days (72 hours) of death? Q26</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
3939	N	No
2795	U	Unknown
1365	Y	Yes
4618		Missing

<i>IFIA27</i>		<i>Did ()'s last episode of pain or discomfort specifically involve the chest? Q27</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
196	N	No
264	U	Unknown
899	Y	Yes
11359		Missing

<i>IFIA28</i>		<i>Did he/she take nitroglycerin because of this last episode of pain or discomfort? Q28</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
891	N	No
266	U	Unknown
192	Y	Yes
11369		Missing

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<i>IFIA29</i>		<i>How long was it from the beginning of ()'s last episode of pain or discomfort to the time he/she stopped breathing on his/her own? Q29</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
122	A	5 minutes or less
73	B	10 minutes or less
254	C	1 hour or less
424	D	24 hour or less
173	E	more than 24 hours
304	U	Unknown
11368		Missing

<i>IFIA30A</i>		<i>Shortness of breath Q30a</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
5256	N	No
1855	U	Unknown
989	Y	Yes
4617		Missing

<i>IFIA30B</i>		<i>Dizziness Q30b</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
5521	N	No
2191	U	Unknown
387	Y	Yes
4618		Missing

<i>IFIA30C</i>		<i>Palpitations (pounding in the chest) Q30c</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
5505	N	No
2351	U	Unknown
240	Y	Yes
4621		Missing

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<i>IFIA30D</i>		<i>Marked or increased fatigue,tiredness, or weakness</i> <i>Q30d</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
4476	N	No
1748	U	Unknown
1873	Y	Yes
4620		Missing

<i>IFIA30E</i>		<i>Headache</i> <i>Q30e</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
5668	N	No
2110	U	Unknown
319	Y	Yes
4620		Missing

<i>IFIA30F</i>		<i>Sweating</i> <i>Q30f</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
5476	N	No
1896	U	Unknown
724	Y	Yes
4621		Missing

<i>IFIA30G</i>		<i>Paralysis</i> <i>Q30g</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
6243	N	No
1753	U	Unknown
98	Y	Yes
4623		Missing

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<i>IFIA30H</i>		<i>Loss of speech</i> <i>Q30h</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
6173	N	No
1672	U	Unknown
251	Y	Yes
4621		Missing

<i>IFIA30I</i>		<i>Attack of indigestion or nausea or vomiting</i> <i>Q30i</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
5284	N	No
1835	U	Unknown
974	Y	Yes
4624		Missing

<i>IFIA30J</i>		<i>Other symptoms</i> <i>Q30j</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
5353	N	No
1599	U	Unknown
1131	Y	Yes
4634		Missing

<i>IFIA31</i>		<i>Was a physician, ambulance, or other emergency medical team called?</i> <i>Q31</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
1623	N	No
259	U	Unknown
6218	Y	Yes
4617		Missing

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<i>IFIA32</i>		<i>Was (the physician, ambulance, or EMS team) called because of symptoms () was having or after he/she was already dead? Q32</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
3470	D	Dead
2694	S	Symptoms
6553		Missing

<i>IFIA33</i>		<i>How long was it from the time the last episode of symptoms started to the time that medical assistance was called for? Q33</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
1366	A	5 minutes or less
394	B	10 minutes or less
307	C	1 hour or less
129	D	6 hours or less
51	E	24 hour or less
20	F	more than 24 hours
463	U	Unknown
9987		Missing

<i>IFIA34</i>		<i>How long was it from the time that medical care was called to the time when it arrived? Q34</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
898	A	5 minutes or less
970	B	10 minutes or less
365	C	1 hour or less
6	D	6 hours or less
1	E	24 hours or less
479	U	Unknown
8	X	Did not come
9990		Missing

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<i>IFIA35</i>		<i>Were resuscitation measures, such as closed chest massage or CPR, attempted at the time?</i>	<i>Q35</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
1	=	Data management code, treat as missing	
3505	N	No	
848	U	Unknown	
3741	Y	Yes	
4623		Missing	

<i>IFIA36</i>		<i>Who started the resuscitation or CPR?</i>	<i>Q36</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
890	A	Bystander, non-health professional	
106	B	M. D.	
2433	C	Ambulance attendant, paramedic, or other health professional	
150	D	Fireman or policeman	
69	O	Other	
90	U	Unknown	
8980		Missing	

<i>IFIA37</i>		<i>Where was resuscitation or CPR started?</i>	<i>Q37</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
2672	A	Home (or other private residence)	
127	B	Work	
276	C	Public place	
132	D	Ambulance or other emergency vehicle	
128	E	Emergency room	
26	F	Hospital	
322	O	Other	
39	U	Unknown	
8996		Missing	

<i>IFIA38</i>		<i>Was () taken to a hospital?</i>	<i>Q38</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
1	=	Data management code, treat as missing	
4248	N	No	
174	U	Unknown	
3516	Y	Yes	
4779		Missing	

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<i>IFIA39</i>		<i>Could you tell me the name and location of this hospital?</i> Q39
<i>N</i>	<i>Value</i>	<i>Description</i>
64	N	No
2327	Y	Yes
10327		Missing

<i>IFIA40</i>		<i>Is there someone else whom we could contact, who might know more about the circumstances surrounding ()'s death or his/her usual state of health?</i> Q40
<i>N</i>	<i>Value</i>	<i>Description</i>
1	=	Data management code, treat as missing
5348	N	No
23	U	Unknown
445	Y	Yes
6901		Missing

<i>IFIA41</i>		<i>Could you tell me the name, address, and telephone number of this person?</i> Q41
<i>N</i>	<i>Value</i>	<i>Description</i>
11	N	No
434	Y	Yes
12273		Missing

<i>IFIA42</i>		<i>How was he/she related to the deceased?</i> Q42
<i>N</i>	<i>Value</i>	<i>Description</i>
126	C	Daughter/son
38	F	Friend
162	O	Other
15	P	Parent
76	R	Other relative
17	S	Spouse
6	W	Workmate
12278		Missing

<i>IFIA43</i>		<i>Did the respondent frequently contradict himself/herself or give information that he/she would have no way of knowing?</i> Q43
<i>N</i>	<i>Value</i>	<i>Description</i>
7990	N	No
109	Y	Yes
4619		Missing

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<i>IFIA44</i>		<i>Did the respondent seem to be reluctant to answer questions and thus might not have given all the information the interviewer would wish to know? Q44</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
7900	N	No
191	Y	Yes
4627		Missing

<i>IFIA45</i>		<i>On the basis of these questions, give your rating of reliability of the interview Q45</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1129	F	Fair
6684	G	Good
290	P	Poor
4615		Missing

<i>IFIA46</i>		<i>Would you like to add other details concerning the quality of the interview? Q46</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
5347	N	No
492	Y	Yes
6879		Missing

<i>IFIA47</i>		<i>Informant agreed to provide consent to gather further information? Q47</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
2681	A	Not applicable
1488	N	No
1679	Y	Yes
6870		Missing

<i>IFIA48_YEAR</i>		<i>Year Of Date Of Data Collection Q48</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
12657	Range	1987 - 2016 (median=2006 mean=2003.6 std=8.1)
61		Missing

<i>IFIA49</i>		<i>Method Of Data Collection Q49</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1502	C	Computer
11156	P	Paper
60		Missing

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<i>IFIA50</i>		<i>Interviewer Code Number</i>	<i>Q50</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
12666	Range	0 - 943 (median=276 mean=270.8 std=130.2)	
52		Missing	

<i>IFIA51</i>		<i>Second IFI Form Needed</i>	<i>Q51</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
538	A		
12180		Missing	

<i>IFIA52</i>		<i>PHQ Nursing Home Needed</i>	<i>Q52</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
841	B		
11877		Missing	

<i>IFIA53</i>		<i>PHQ Recent MD</i>	<i>Q53</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
2791	C		
9927		Missing	

<i>IFIA54</i>		<i>PHQ Usual MD PHQ Needed</i>	<i>Q54</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
3945	D		
8773		Missing	

<i>IFIA55</i>		<i>HRA Most Recent Hospitalization Needed</i>	<i>Q55</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
232	E		
12486		Missing	

<i>IFIA56</i>		<i>HRA Other Hospitalization Needed</i>	<i>Q56</i>
<i>N</i>	<i>Value</i>	<i>Description</i>	
2	F		
12716		Missing	

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<i>IFIAFLAG</i>		<i>=1 If IFIA (Or Later Version) Is Present</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
12718	1	