

SAS Varname (HOS 1.0)	SAS Varname (HOS 2.0)	SAS Varname (HOS 2.0) 2012	SAS Varname (HOS 2.0) 2013	SAS Varname (HOS 2.0) 2014	SAS Varname (HOS 3.0) 2015	Code	Description	HOS 1.0								HOS 2.0								HOS 2.5				HOS 3.0					
								1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
								Bas 1	Bas 2	Bas 3/ FU 1	Bas 4/ FU 2	Bas 5/ FU 3	Bas 6/ FU 4	Bas 7/ FU 5	Bas 8/ FU 6	Bas 9/ FU 7	Bas 10/ FU 8	Bas 11/ FU 9	Bas 12/ FU 10	Bas 13/ FU 11	Bas 14/ FU 12	Bas 15/ FU 13	Bas 16/ FU 14	Bas 17/ FU 15	Bas 18/ FU 16	Bas 19/ FU 17	Bas 20/ FU 18	Bas 21/ FU 19	Bas 22/ FU 20	FU 21	FU 22		
DIFDRS	ADLDRS recode	ADLDRS recode	ADLDRS recode	ADLDRS recode	ADLDRS recode		Dressing Question	.	Missing I am unable to do this activity Yes, I have difficulty No, I do not have difficulty																								
DIFEAT	ADLEAT recode	ADLEAT recode	ADLEAT recode	ADLEAT recode	ADLEAT recode		Eating Question	.	Missing I am unable to do this activity Yes, I have difficulty No, I do not have difficulty	12b	12b	12b	12b	12b	12b	12b																	
DIFCHR	ADLCHR recode	ADLCHR recode	ADLCHR recode	ADLCHR recode	ADLCHR recode		Getting In/Out of Chairs Question	.	Missing I am unable to do this activity Yes, I have difficulty No, I do not have difficulty	12c	12c	12c	12c	12c	12c	12c																	
DIFWLK	ADLWLK recode	ADLWLK recode	ADLWLK recode	ADLWLK recode	ADLWLK recode		Walking Question	.	Missing I am unable to do this activity Yes, I have difficulty No, I do not have difficulty	12d	12d	12d	12d	12d	12d	12d																	
DIFTOI	ADLTLT recode	ADLTLT recode	ADLTLT recode	ADLTLT recode	ADLTLT recode		Using the Toilet Question	.	Missing I am unable to do this activity Yes, I have difficulty No, I do not have difficulty	12e	12e	12e	12e	12e	12e	12e																	
CFNEXR	CHSTEX	CHSTEX	not collected				Chest Pain/Pressure on Exertion Question	.	Missing All of the time Most of the time Some of the time A little of the time None of the time	13a	13a	13a	13a	13a	16a	16a	16a	14a	14a	14a	14a	14a	14a	14a									
CFNRST	CHSTRST	CHSTRST	not collected				Chest Pain/Pressure at Rest Question	.	Missing All of the time Most of the time Some of the time A little of the time None of the time	13b	13b	13b	13b	13b	16b	16b	16b	14b	14b	14b	14b	14b	14b	14b									
SOBFLT	SOBFLT	SOBFLT	not collected				Shortness of Breath when Lying Flat Question	.	Missing All of the time Most of the time Some of the time A little of the time None of the time	14a	14a	14a	14a	14a	17a	17a	17a	15a	15a	15a	15a	15a	15a	15a									
SOBSIT	SOBSIT	SOBSIT	not collected				Shortness of Breath when Sitting/Resting Question	.	Missing All of the time Most of the time Some of the time A little of the time None of the time	14b	14b	14b	14b	14b	17b	17b	17b	15b	15b	15b	15b	15b	15b	15b									
SOBWLK	SOBWLK	SOBWLK	not collected				Shortness of Breath when Walking Less than One Block Question	.	Missing All of the time Most of the time Some of the time A little of the time None of the time	14c	14c	14c	14c	14c	17c	17c	17c	15c	15c	15c	15c	15c	15c	15c									
SOBSTR	SOBSTR	SOBSTR	not collected				Shortness of Breath when Climbing One Flight of Stairs Question	.	Missing All of the time Most of the time Some of the time A little of the time None of the time	14d	14d	14d	14d	14d	17d	17d	17d	15d	15d	15d	15d	15d	15d	15d									
NMBFET	FTNUMB	FTNUMB	not collected				Numbness in Feet Question	.	Missing All of the time Most of the time Some of the time A little of the time None of the time	15a	15a	15a	15a	15a	18a	18a	18a	16a	16a	16a	16a	16a	16a	16a									
ANKSWL	not collected						Ankle/Leg Swelling Question	.	Missing All of the time Most of the time Some of the time A little of the time None of the time	15b	15b	15b	15b	15b																			
TINGFT	FTSENS	FTSENS	not collected				Foot Tingling/Burning Question	.	Missing All of the time Most of the time Some of the time A little of the time None of the time	15c	15c	15c	15c	15c	18b	18b	18b	16b	16b	16b	16b	16b	16b	16b									
DECSNS	FTHC	FTHC	not collected				Decreased Ability to Feel Hot or Cold in Feet Question	.	Missing All of the time Most of the time Some of the time A little of the time None of the time	15d	15d	15d	15d	15d	18c	18c	18c	16c	16c	16c	16c	16c	16c	16c									
DECHEL	FTSRS	FTSRS	not collected				Sores/Wounds on Feet Question	.	Missing All of the time Most of the time Some of the time A little of the time None of the time	15e	15e	15e	15e	15e	18d	18d	18d	16d	16d	16d	16d	16d	16d	16d									
PARLYS	not collected						Paralysis or Weakness on One Side of Body Question	.	Missing Yes, I have it Yes, but it went away No	16a	16a	16a	16a	16a	19a	19a	19a																
LSTTLK	not collected						Lost Ability to Talk Question	.	Missing Yes, I have lost it Yes, but it returned No	16b	16b	16b	16b	16b	19b	19b	19b																
RDNWEP	READ	READ	DIFSEE recode	DIFSEE recode	DIFSEE recode		See Well Enough to Read Newspaper Question	.	Missing Yes No	17	17	17	17	17	20	20	20	18	18	18	18	18	18	18									
HRMOST	HEAR	HEAR	DIFHEAR recode	DIFHEAR recode	DIFHEAR recode		Hear Most Things People Say Question	.	Missing Yes No	18	18	18	18	18	21	21	21	19	19	19	19	19	19	19									

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								1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
								Bas 1	Bas 2	Bas 3/ FU 1	Bas 4/ FU 2	Bas 5/ FU 3	Bas 6/ FU 4	Bas 7/ FU 5	Bas 8/ FU 6	Bas 9/ FU 7	Bas 10/ FU 8	Bas 11/ FU 9	Bas 12/ FU 10	Bas 13/ FU 11	Bas 14/ FU 12	Bas 15/ FU 13	Bas 16/ FU 14	Bas 17/ FU 15	Bas 18/ FU 16	Bas 19/ FU 17	Bas 20/ FU 18	Bas 21/ FU 19	Bas 22/ FU 20	FU 21	FU 22	
ACDING	not collected						Now Have Acid Indigestion or Heartburn Question	. 1 2	Missing Yes No	19	19	19	19	19																		
CTRURN	not collected						Now Have Difficulty Controlling Urination Question	. 1 2	Missing Yes No	20	20	20	20	20	22	22	22															
HIGHBP	CCHBP	CCHBP	CCHBP	CCHBP	CCHBP		Ever Had Hypertension Question	. 1 2	Missing Yes No	21	21	21	21	21	23	23	23	20	20	20	20	20	20	20	22	20	20	20	20	20	20	20
ANGCAD	CC_CAD	CC_CAD	CC_CAD	CC_CAD	CC_CAD		Ever Had Angina Pectoris/Coronary Artery Disease Question	. 1 2	Missing Yes No	22	22	22	22	22	24	24	24	21	21	21	21	21	21	21	23	21	21	21	21	21	21	21
CHF	CC_CHF	CC_CHF	CC_CHF	CC_CHF	CC_CHF		Ever Had Congestive Heart Failure Question	. 1 2	Missing Yes No	23	23	23	23	23	25	25	25	22	22	22	22	22	22	22	24	22	22	22	22	22	22	22
AMI	CCMI	CCMI	CCMI	CCMI	CCMI		Ever Had Myocardial Infarction Question	. 1 2	Missing Yes No	24	24	24	24	24	26	26	26	23	23	23	23	23	23	23	25	23	23	23	23	23	23	23
OTHRT	CCHRTOT H	CCHRTOT H	CCHRTOT H	CCHRTOT H	CCHRTOT H		Ever Had Other Heart Conditions Question	. 1 2	Missing Yes No	25	25	25	25	25	27	27	27	24	24	24	24	24	24	24	26	24	24	24	24	24	24	24
STROKE	CCSTROKE E	CCSTROKE E	CCSTROKE E	CCSTROKE E	CCSTROKE E		Ever Had Stroke Question	. 1 2	Missing Yes No	26	26	26	26	26	28	28	28	25	25	25	25	25	25	25	27	25	25	25	25	25	25	25
COPD_E	CC_COPD	CC_COPD	CC_COPD	CC_COPD	CC_COPD		Ever Had Emphysema, Asthma, or COPD Question	. 1 2	Missing Yes No	27	27	27	27	27	29	29	29	26	26	26	26	26	26	26	28	26	26	26	26	26	26	26
GL_ETC	CCGI	CCGI	CCGI	CCGI	CCGI		Ever Had Crohn's Disease, Ulcerative Colitis, or Inflammatory Bowel Disease Question	. 1 2	Missing Yes No	28	28	28	28	28	30	30	30	27	27	27	27	27	27	27	29	27	27	27	27	27	27	27
ATHHIP	CCARTHIP	CCARTHIP	CCARTHIP	CCARTHIP	CCARTHIP		Ever Had Arthritis of Hip/Knee Question	. 1 2	Missing Yes No	29	29	29	29	29	31	31	31	28	28	28	28	28	28	28	30	28	28	28	28	28	28	28
ATHHAN	CCARTHND D	CCARTHND D	CCARTHND D	CCARTHND D	CCARTHND D		Ever Had Arthritis of Hand/Wrist Question	. 1 2	Missing Yes No	30	30	30	30	30	32	32	32	29	29	29	29	29	29	29	31	29	29	29	29	29	29	29
SCIATC	CCSCIATC	CCSCIATC	CCSCIATC	CCSCIATC	CCSCIATC		Ever Had Sciatica Question	. 1 2	Missing Yes No	31	31	31	31	31	33	33	33	31	31	31	31	31	31	31	33	31	31	31	31	31	31	31
DIABET	CCDIABET	CCDIABET	CCDIABET	CCDIABET	CCDIABET		Ever Had Diabetes, High Blood Sugar, or Sugar in Urine Question	. 1 2	Missing Yes No	32	32	32	32	32	34	34	34	32	32	32	32	32	32	32	34	32	32	32	32	32	32	32
ANYCAN	CCANYCA	CCANYCA	CCANYCA	CCANYCA	CCANYCA		Ever Had Any Cancer Question	. 1 2	Not Answered Yes No	33	33	33	33	33	35	35	35	33	33	33	33	33	33	33	36	34	34	34	34	34	34	34
ARTHPN	PNART	PNART	not collected				Arthritis Pain Question	. 1 2 3 4 5	Missing None Very Mild Mild Moderate Severe	34 rec	34	34	34	34	36	36	36	17	17	17	17	17	17	17	17	17						
COLNCA	CACOLON	CACOLON	CACOLON	CACOLON	CACOLON		Colon or Rectal Cancer Current Treatment Question	. 1 2	Not Answered Yes No	35a	35a	35a	35a	35a	37a	37a	37a	34a	34a	34a	34a	34a	34a	34a	37a	35a	35a	35a	35a	35a	35a	35a
LUNGCA	CALUNG	CALUNG	CALUNG	CALUNG	CALUNG		Lung Cancer Current Treatment Question	. 1 2	Not Answered Yes No	35b	35b	35b	35b	35b	37b	37b	37b	34b	34b	34b	34b	34b	34b	34b	37b	35b	35b	35b	35b	35b	35b	35b
BRSTCA	CABRST	CABRST	CABRST	CABRST	CABRST		Breast Cancer Current Treatment Question	. 1 2	Not Answered Yes No	35c	35c	35c	35c	35c	37c	37c	37c	34c	34c	34c	34c	34c	34c	34c	37c	35c	35c	35c	35c	35c	35c	35c
PROSCA	CAPROS	CAPROS	CAPROS	CAPROS	CAPROS		Prostate Cancer Current Treatment Question	. 1 2	Not Answered Yes No	35d	35d	35d	35d	35d	37d	37d	37d	34d	34d	34d	34d	34d	34d	34d	37d	35d	35d	35d	35d	35d	35d	35d
BACKPN	PNBACK	PNBACK	not collected				Low Back Pain Interfered with Daily Activities Question	. 1 2 3 4 5	Missing All of the time Most of the time Some of the time A little of the time None of the time	36	36	36	36	36	38	38	38	35	35	35	35	35	35	35	35							
NUMBLG	not collected						Pain, Numbness, Tingling Down Leg Question	. 1 2 3 4 5	Missing All of the time Most of the time Some of the time A little of the time None of the time	37	37	37	37	37																		
FELTS	DEP2WK	DEP2WK	not collected				Two Weeks of Depression in Past Year Question	. 1 2	Missing Yes No	38	38	38	38	38	39	39	39	36	36	36	36	36	36	36	36	36						
DEPMCH	DEPYR	DEPYR	not collected				Depression Much of the Time in Past Year Question	. 1 2	Missing Yes No	39	39	39	39	39	40	40	40	37	37	37	37	37	37	37	37							
DEP2YR	DEP2YR	DEP2YR	not collected				Depression Most of the Time for 2 Years Question	. 1 2	Missing Yes No	40	40	40	40	40	41	41	41	38	38	38	38	38	38	38	38							
CMPTH	CMPTH	CMPTH	CMPTH	CMPTH	CMPTH		Health Compared to Other People Your Age Question	. 1 2 3 4 5	Missing Excellent Very good Good Fair Poor	41	41	41	41	41	42	42	42	39	39	40	40	40	40	40	42	40	40	40	40	40	40	40
SMK100	not collected						Smoked At Least 100 Cigarettes in Entire Life Question	. 1 2 3	Missing Yes No Don't know	42	42	42	42	42																		

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								1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
								Bas 1	Bas 2	Bas 3/ FU 1	Bas 4/ FU 2	Bas 5/ FU 3	Bas 6/ FU 4	Bas 7/ FU 5	Bas 8/ FU 6	Bas 9/ FU 7	Bas 10/ FU 8	Bas 11/ FU 9	Bas 12/ FU 10	Bas 13/ FU 11	Bas 14/ FU 12	Bas 15/ FU 13	Bas 16/ FU 14	Bas 17/ FU 15	Bas 18/ FU 16	Bas 19/ FU 17	Bas 20/ FU 18	Bas 21/ FU 19	Bas 22/ FU 20	FU 21	FU 22	
			DIFHEAR				Deaf or have serious difficulty hearing question	1 2	Missing Yes No														16									
				DIFHEAR	DIFHEAR		Deaf or have serious difficulty hearing even with a hearing aid question	1 2	Missing Yes No														16	16	16	16	16	16	16	16	16	
			DIFREM	DIFREM	DIFREM		Serious difficulty concentrating, remembering or making decisions question	1 2	Yes No														17	17	17	17	17	17	17	17	17	
			DIFWKSTR	not collected			Serious difficulty walking or climbing stairs	1 2	Yes No														17	17	17	17	17	17	17	17	17	
			DIFDRBTH	not collected			Difficulty dressing or bathing	1 2	Yes No														18									
			DIFERRND	DIFERRND	DIFERRND		Because of a physical, mental, or emotional condition, difficulty doing errands alone such as visiting a doctor's office or shopping question	1 2	Yes No														19									
			DIFMPROB	DIFMPROB	DIFMPROB		In the past month, how often did memory problems interfere with your daily activities question	1 2 3 4 5	Every day (7 days a week) Most days (5-6 days a week) Some days (2-4 days a week) Rarely (Once a week or less) Never														20	18	18	18	18	18	18	18	18	
			CCDEP	CCDEP	CCDEP		Doctor ever told you that you have depression question	1 2	Yes No														21	19	19	19	19	19	19	19	19	
			CAOTHER	CAOTHER	CAOTHER		Other cancer (other than skin cancer)	1 2	Yes No														35	33	33	33	33	33	33	33	33	
			PAINDACT	PAINDACT	PAINDACT		In the past 7 days, how much did pain interfere with your day to day activities question	1 2 3 4 5	Not at all A little bit Somewhat Quite a bit Very much														37e	35e	35e	35e	35e	35e	35e	35e	35e	
			PAINSACT	PAINSACT	PAINSACT		In the past 7 days, how often did pain keep you from socializing with others question	1 2 3 4 5	Never Rarely Sometimes Often Always														38	36	36	36	36	36	36	36	36	
			PAINRATE	PAINRATE	PAINRATE		In the past 7 days, how would you rate your pain on average question	1-10															40	38	38	38	38	38	38	38	38	
					PAINRATEb		In the 2021 Cohort 22 Follow up, PAINRATE (Q38) was revised to add the (0) response to the pain scale. The scale responses range from 0 - 10 and zero now corresponds with the answer "No pain"	0-10	Missing																							38
			DEPNOPLS	DEPNOPLS	DEPNOPLS		Little interest or pleasure in doing things Question	1 2 3 4	Not at all Several days More than half the days Nearly every day														41a	39a	39a	39a	39a	39a	39a	39a	39a	
			DEPDOWN	DEPDOWN	DEPDOWN		Feeling down, depressed or hopeless Question	1 2 3 4	Not at all Several days More than half the days Nearly every day														41b	39b	39b	39b	39b	39b	39b	39b	39b	
			SPEAKENG	SPEAKENG			How well do you speak English question	1 2 3 4	Very well Well Not well Not at all														61	58								
			LVALONE	LVALONE	LVALONE		Live alone	0 1	Missing Respondent did not check live alone Respondent checked live alone														64(1)	61a	63a	63a	63a	63a	63a	63a	62a	
			LVSPOUSE	LVSPOUSE	LVSPOUSE		Live with spouse/significant other	0 1	Missing Respondent did not check live with spouse/significant other Respondent checked live with spouse/significant other														64(2)	61b	63b	63b	63b	63b	63b	63b	62b	
			LVCHILD	LVCHILD	LVCHILD		Live with children/other relatives	0 1	Missing Respondent did not check live with children/other relatives Respondent checked live with children/other relatives														64(3)	61c	63c	63c	63c	63c	63c	63c	62c	
			LVNONREL	LVNONREL	LVNONREL		Live with non-relatives	0 1	Missing Respondent did not check live with non-relatives Respondent checked live with non-relatives														64(4)	61d	63d	63d	63d	63d	63d	63d	62d	
			LVCAREGV	LVCAREGV	LVCAREGV		Live with paid caregiver	0 1	Missing Respondent did not check live with paid caregiver Respondent checked live with paid caregiver														64(5)	61e	63e	63e	63e	63e	63e	63e	62e	
			WHERELV				Where do you live question	1 2 3 4	Independent house, apartment, condominium or mobile home Assisted living apartment or board and care home Nursing home Other																							
				WHERELV	WHERELV		Where do you live question	1 2 3 4	House, apartment, condominium or mobile home Assisted living or board and care home Nursing home Other														65									
			CAREOTHR	not collected			Do you currently provide care for someone else in your home question	1 2 3	Yes No														62	64	64	64	64	64	64	64	63	
																							67									

