

CHD Community Surveillance**Community Surveillance Informant Interview Form****Data set name: S14IFIA1**

Instructions: The Informant Interview Form is completed for each informant for an out-of-hospital death as determined by the ARIC Event Investigation Summary.

<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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IFIA02		<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

IFIA03		<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 [skip to Q5]
90	F	Yes, Hospice facility [skip to Q5]
2208	H	Yes, at home [skip to Q5]
4549	N	No [skip to Q5]
195	O	Yes, other [skip to Q5]
1000	R	Yes, nursing home
9	U	Unknown
4601		Missing

IFIA04		<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 [skip to Q5]
757	Y	Yes
11887		Missing

IFIA05		<i>Hospitalized In Past Four Week Q5</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
6387	N	No [skip to Q9]
196	U	Unknown [skip to Q9]
1552	Y	Yes
4583		Missing

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<i>IFIA06A</i>		<i>Hospitalized For Heart Attack or Chest Pain</i> <i>Q6a</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1257	N	No [skip to Q9]
40	U	Unknown [skip to Q9]
236	Y	Yes
11185		Missing

<i>IFIA06B</i>		<i>Hospitalized For Heart Surgery</i> <i>Q6b</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
1438	N	No [skip to Q9]
32	U	Unknown [skip to Q9]
54	Y	Yes
11194		Missing

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

<i>IFIA07</i>		<i>Date Of Hospital Admission</i> <i>Q7</i>
<i>N</i>	<i>Value</i>	<i>Description</i>
157	Range	01/02/1987 - 10/01/2014
12561		Missing

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

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IFIA09		Was () seen by a physician anytime in the last four weeks prior to death? Q9
N	Value	Description
2910	N	No [skip to Q11]
892	U	Unknown [skip to Q11]
4320	Y	Yes
4596		Missing

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

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

IFIA12		Before ()'s final illness, had he/she ever had pains in the chest from heart disease, for example angina pectoris? Q12
N	Value	Description
4329	N	No [skip to Q14]
887	U	Unknown
2911	Y	Yes
4591		Missing

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

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IFIA14		Did a doctor ever say that () had a heart attack prior to his/her final illness? Q14
N	Value	Description
5280	N	No [skip to Q16]
448	U	Unknown [skip to Q16]
2390	Y	Yes
4600		Missing

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

IFIA16		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
N	Value	Description
6137	N	No
204	U	Unknown
1783	Y	Yes
4594		Missing

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

IFIA18		Did () ever have a stroke? Q18
N	Value	Description
6422	N	No [skip to Q19b]
312	U	Unknown [skip to Q19b]
1393	Y	Yes
4591		Missing

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<i>IFIA19</i>		<i>Stroke In Four Weeks Before Death</i> <i>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?</i> <i>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?</i> <i>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?</i> <i>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>Dummy Field</i> <i>Q20</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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IFIA21		Were you present when () died? Q21
N	Value	Description
1	=	Data management code, treat as missing
5814	N	No
2292	Y	Yes [skip to Q25]
4611		Missing

IFIA22		Did anyone see or hear () when he/she died? Q22
N	Value	Description
3424	N	No
333	U	Unknown
2037	Y	Yes [skip to Q25]
6924		Missing

IFIA23		Was anyone close enough to hear () if he/she had called out? Q23
N	Value	Description
1989	N	No
496	U	Unknown
1250	Y	Yes [skip to Q25]
8983		Missing

IFIA24		How long after () was last known to be alive was he/she found dead? Q24
N	Value	Description
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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IFIA25		Where was () when he/she died? Q25
N	Value	Description
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

IFIA26		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
N	Value	Description
1	=	Data management code, treat as missing
3939	N	No [skip to Q30]
2795	U	Unknown [skip to Q30]
1365	Y	Yes
4618		Missing

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

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

<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?</i> Q29
<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</i> Q30a
<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</i> Q30b
<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

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<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

<i>IFIA30D</i>		<i>Marked or increased fatigue, tiredness, or weakness 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 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 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

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<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	

<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	

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

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

IFIA33		How long was it from the time the last episode of symptoms started to the time that medical assistance was called for? Q33
N	Value	Description
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

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IFIA34		How long was it from the time that medical care was called to the time when it arrived? Q34
N	Value	Description
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

IFIA35		Were resuscitation measures, such as closed chest massage or CPR, attempted at the time? Q35
N	Value	Description
1	=	Data management code, treat as missing
3505	N	No [skip to Q38]
848	U	Unknown [skip to Q38]
3741	Y	Yes
4623		Missing

IFIA36		Who started the resuscitation or CPR? Q36
N	Value	Description
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

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IFIA37		Where was resuscitation or CPR started?	Q37
N	Value	Description	
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	

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

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

IFIA40		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?	Q40
N	Value	Description	
1	=	Data management code, treat as missing	
5348	N	No	
23	U	Unknown	
445	Y	Yes	
6901		Missing	

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

IFIA42		How was he/she related to the deceased? Q42
N	Value	Description
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

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

IFIA44		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
N	Value	Description
7900	N	No
191	Y	Yes
4627		Missing

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

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<i>IFIA46</i>		<i>Would you like to add other details concerning the quality of the interview?</i> Q46
<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?</i> Q47
<i>N</i>	<i>Value</i>	<i>Description</i>
2681	A	Not applicable
1488	N	No
1679	Y	Yes
6870		Missing

<i>IFIA48</i>		<i>Date Of Data Collection</i> Q48
<i>N</i>	<i>Value</i>	<i>Description</i>
12657	Range	01/05/1987 - 08/26/2016
61		Missing

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

<i>IFIA50</i>		<i>Interviewer Code Number</i> Q50
<i>N</i>	<i>Value</i>	<i>Description</i>
12666	Present	Text suppressed
52		Missing

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

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<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 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	

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