

**NIS Adult COVID Module (NIS-ACM) Hard Copy Questionnaire**

**Q2/2024**

**Confidential Information**

Information contained on this form which would permit identification of any individual or establishment will be held in strict confidence by NORC and CDC, will be used only for purposes stated in this study, and will not be disclosed or released to anyone other than authorized staff of CDC or its agent without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 U.S.C. 242.m)

ADLT\_INTRO

Thank you for your responses. [(If S\_NUMB=1-9 or ZTUNDR18=1-9 or LF\_UNDR18=1-9) and case did not do any of the 3 surveys, then FILL: "Your ["child's age does" / "children's ages do"] not qualify your household for the questions about childhood vaccinations."] We now have a few additional questions for you about vaccines to prevent respiratory diseases.

CONTINUE ..... 1

IF S3\_INTRO, T\_INTRO1, or LF\_S3\_IN NOT MISSING GO TO ADULT\_TIME; ELSE GO TO AD\_CONSENT

AD\_CONSENT

Before we continue, I'd like you to know that taking part in this survey is voluntary. You may choose not to answer any questions you don't wish to answer, or end the interview at any time with no impact on the benefits you may receive. We are required by Federal laws to develop and follow strict procedures to protect your information and use your answers only for statistical analyses. I can describe these laws if you wish. I'd like to continue now unless you have any questions.

CONTINUE ..... 1 GO TO ADULT\_TIME  
RESPONDENT ASKS FOR DESCRIPTION OF LAW..... 2

ADULT\_S3\_LAW

The Public Health Service Act is Volume 42 of the US Code, Section 242k. The collection of information in this survey is authorized by Section 306 of this Act. Through the National Center for Immunization and Respiratory Diseases, the confidentiality of your responses is assured by Section 308d of this Act. Would you like me to read the Confidential Information Protection provisions to you?

IF RESPONDENT WOULD LIKE TO HEAR PROVISIONS, READ:

The information you provide will be used for statistical purposes only. In accordance with Section 308d of the Public Health Service Act, your responses will be kept confidential and will not be disclosed in identifiable form to anyone other than employees or agents. Every employee who works on this survey, from the National Center for Immunization and Respiratory Diseases and its collaborating agency and contractor, NORC at the University of Chicago, and their agents and contractors who work on this survey has taken an oath to protect the confidentiality of your information. These employees are subject to disciplinary action, including fines and criminal charges that may result in imprisonment, if he or she willingly discloses ANY identifiable information about you or your household members. Additionally, in compliance with applicable federal law requiring the protection of federal computer networks from cybersecurity risks like hacking, internet attacks, and other security weaknesses, computer network experts working for, or on behalf, of the government, may intercept and review information sent through government networks for cyber threats if the information sent through the government network triggers a cyber threat indicator.

CONTINUE ..... 1

ADULT\_TIME

The remainder of the survey will take about 8 minutes.  
CONTINUE ..... 1

VAX1

In the past two years, have you received any type of vaccine that was not a COVID-19 vaccine, such as seasonal flu, pneumonia, or a shingles vaccine?

INTERVIEWER NOTE: IF RESPONDENT MENTIONS THEY GOT ANY TYPE OF VACCINE EXCEPT A COVID-19 VACCINE IN THE PAST TWO YEARS, CODE AS YES

YES ..... 1  
NO ..... 2  
DON'T KNOW ..... 77  
REFUSED ..... 99

VAX\_FLU

Since July 1, 2023, have you received a flu vaccination?

YES ..... 1  
NO ..... 2 GO TO VAX\_RSV1  
DON'T KNOW ..... 77 GO TO VAX\_RSV1  
REFUSED ..... 99 GO TO VAX\_RSV1

VAX\_FLUM

During what month did you receive your first dose of the flu vaccine, since July 1, 2023?

INTERVIEW INSTRUCTION: ENTER 77 FOR DON'T KNOW AND 99 FOR REFUSED

MONTH[YEAR=FILL] .....  
DON'T KNOW ..... 77 GO TO FLVAX\_PL  
REFUSED ..... 99 GO TO FLVAX\_PL

VAX\_FLUC

That was [FILL MONTH] of [FILL YEAR], correct?

YES ..... 1  
NO ..... 2 GO TO VAX\_FLUM

VAXFL\_WK\_CHK

IF VAX\_FLUM=THE CURRENT MONTH GO TO FLVAX\_WEEK; ELSE GO TO FLVAX\_PL

FLVAX\_WEEK

Was the vaccine received [IF CURRENT DAY IS SUNDAY, FILL: "today"; ELSE FILL: "on or after Sunday, [FILL DATE WITH MOST RECENT SUNDAY'S DATE]"?]

YES ..... 1  
NO ..... 2  
DON'T KNOW ..... 77  
REFUSED ..... 99

FLVAX\_PL At what kind of place did you get your most recent flu vaccination?

INTERVIEWER NOTE: IF A RESPONDENT SAYS VACCINATION WAS RECEIVED AT A DRIVE-THRU/DRIVE-UP FACILITY, PROBE TO COLLECT WHICH TYPE OF PLACE PROVIDED THIS OPTION.

READ RESPONSES AS NECESSARY.

DOCTOR’S OFFICE [IF PUERTO RICO, THEN SHOW:

INTERVIEWER NOTE: DOCTOR’S OFFICE

INCLUDES PRIVATE PROVIDER AND

- REFORMA PROVIDER] ..... 1
- HEALTH DEPARTMENT ..... 2
- CLINIC OR HEALTH CENTER ..... 3
- HOSPITAL ..... 4
- OTHER MEDICALLY-RELATED PLACE ..... 5
- MASS VACCINATION SITE ..... 6
- PHARMACY OR DRUG STORE ..... 7
- WORKPLACE ..... 8
- HIGH SCHOOL/COLLEGE/UNIVERSITY ..... 9
- OTHER NONMEDICALLY-RELATED PLACE ..... 10
- MALL OUTREACH [DISPLAY ONLY IF GUAM] ..... 11
- VILLAGE OUTREACH [DISPLAY ONLY IF GUAM] ..... 12
- DON’T KNOW ..... 77
- REFUSED ..... 99

VAX\_RSV1 There is a vaccine that was recently recommended for some people that helps prevent the respiratory virus called RSV. Have you received the RSV vaccine?

INTERVIEWER NOTE: THIS VACCINE IS ALSO KNOWN AS RSVREF3 (AREXVY) OR RSVREF4 (ABRYSVO).

- YES ..... 1
- NO ..... 2 GO TO VAX\_RSV3
- DON’T KNOW ..... 77 GO TO VAX\_RSV3
- REFUSED ..... 99 GO TO VAX\_RSV3

VAX\_RSV2\_M/Y

During what month and year did you receive the RSV vaccine?

ENTER 77 / 7777 FOR DON'T KNOW

ENTER 99 / 9999 FOR REFUSED

IT IS ACCEPTABLE TO ENTER 77/99 FOR ANY PART OF THE DATE. FOR EXAMPLE:  
77/2023

IF MONTH REPORTED IS BEFORE 7/2023, DISPLAY: IF R SAYS SHOT WAS BEFORE  
JULY 2023, PROBE: An RSV vaccine was not available before July 2023. Were you in a clinical  
trial?]

MONTH[YEAR=FILL] .....	
DON'T KNOW .....	77
REFUSED .....	99

VAXRV\_WK\_CHK

IF VAX\_RSV2\_M=THE CURRENT MONTH GO TO RSVAX\_WEEK; ELSE GO TO  
RSVAX\_PL

RSVAX\_WEEK

Was the vaccine received [IF CURRENT DAY IS SUNDAY, FILL: "today"; ELSE FILL: "on or  
after Sunday, [FILL DATE WITH MOST RECENT SUNDAY'S DATE]"?]

YES .....	1
NO .....	2
DON'T KNOW .....	77
REFUSED .....	99

RSVAX\_PL At what kind of place did you get your RSV vaccination?

INTERVIEWER NOTE: IF A RESPONDENT SAYS VACCINATION WAS RECEIVED AT A DRIVE-THRU/DRIVE-UP FACILITY, PROBE TO COLLECT WHICH TYPE OF PLACE PROVIDED THIS OPTION.

READ RESPONSES AS NECESSARY.

DOCTOR'S OFFICE [IF PUERTO RICO, THEN SHOW:

INTERVIEWER NOTE: DOCTOR'S OFFICE

INCLUDES PRIVATE PROVIDER AND

REFORMA PROVIDER] .....	1	GO TO VAX2
HEALTH DEPARTMENT .....	2	GO TO VAX2
CLINIC OR HEALTH CENTER .....	3	GO TO VAX2
HOSPITAL .....	4	GO TO VAX2
OTHER MEDICALLY-RELATED PLACE .....	5	GO TO VAX2
MASS VACCINATION SITE .....	6	GO TO VAX2
PHARMACY OR DRUG STORE .....	7	GO TO VAX2
WORKPLACE .....	8	GO TO VAX2
HIGH SCHOOL/COLLEGE/UNIVERSITY .....	9	GO TO VAX2
OTHER NONMEDICALLY-RELATED PLACE .....	10	GO TO VAX2
MALL OUTREACH [DISPLAY ONLY IF GUAM] .....	11	GO TO VAX2
VILLAGE OUTREACH [DISPLAY ONLY IF GUAM] .....	12	GO TO VAX2
DON'T KNOW .....	77	GO TO VAX2
REFUSED .....	99	GO TO VAX2

VAX\_RSV3 How likely are you to get the RSV vaccine when you are eligible? Would you say you would definitely get the vaccine, probably get the vaccine, probably not get the vaccine, definitely not get the vaccine, or are not sure?

DEFINITELY GET A VACCINE .....	1
PROBABLY GET A VACCINE .....	2
PROBABLY NOT GET A VACCINE .....	3
DEFINITELY NOT GET A VACCINE .....	4
NOT SURE .....	5
DON'T KNOW .....	77
REFUSED .....	99

VAX2 Have you received at least one dose of a COVID-19 vaccine?

YES .....	1	
NO .....	2	GO TO VAX_BRIDGE
DON'T KNOW .....	77	GO TO VAX_BRIDGE
REFUSED .....	99	GO TO VAX_BRIDGE

VAX2\_SEP Since September 14, 2023, have you received a COVID-19 vaccine?

READ IF NECESSARY: This vaccine is sometimes called the ‘updated vaccine’ or the ‘2023-24 vaccine.’

YES ..... 1  
 NO ..... 2 GO TO VAX\_BRIDGE  
 DON’T KNOW ..... 77 GO TO VAX\_BRIDGE  
 REFUSED ..... 99 GO TO VAX\_BRIDGE

VAX3\_SEP How many doses of a COVID-19 vaccine have you received **since September 14, 2023?**

ONE ..... 1  
 TWO ..... 2  
 THREE ..... 3  
 FOUR OR MORE ..... 4  
 DON’T KNOW ..... 77 GO TO VAX\_BRIDGE  
 REFUSED ..... 99 GO TO VAX\_BRIDGE

VAX4A\_M During what month and year did you receive your **most recent** COVID-19 vaccine?

ENTER 77 / 7777 FOR DON'T KNOW  
 ENTER 99 / 9999 FOR REFUSED

IT IS ACCEPTABLE TO ENTER 77/99 FOR ANY PART OF THE DATE. FOR EXAMPLE:  
 77/2021

[IF MONTH REPORTED IS BEFORE 9/2023, DISPLAY: DATE MUST BE ON OR AFTER  
 9/2023]

MONTH[YEAR=FILL] .....  
 DON’T KNOW ..... 77  
 REFUSED ..... 99

VAXCV\_WK\_CHK  
 IF VAX4A\_M/Y=THE CURRENT MONTH AND YEAR GO TO CVVAX\_WEEK; ELSE IF  
 VAX3\_SEP IN (2,3,4) GO TO VAX4C\_M; ELSE GO TO VAX\_PL

CVVAX\_WEEK  
 Was the vaccine received [IF CURRENT DAY IS SUNDAY, FILL: “today”; ELSE FILL: “on or  
 after Sunday, [FILL DATE WITH MOST RECENT SUNDAY’S DATE]”?

YES ..... 1  
 NO ..... 2  
 DON’T KNOW ..... 77  
 REFUSED ..... 99

IF VAX3\_SEP IN (2,3,4) GO TO VAX4C\_M; ELSE GO TO VAX\_PL

VAX4C\_M During what month and year did you receive your **second most recent** COVID-19 vaccine; that is the one before your most recent COVID-19 vaccine?

ENTER 77 / 7777 FOR DON'T KNOW  
ENTER 99 / 9999 FOR REFUSED

IT IS ACCEPTABLE TO ENTER 77/99 FOR ANY PART OF THE DATE. FOR EXAMPLE:  
77/2021

[IF MONTH REPORTED IS BEFORE 9/2023, DISPLAY: DATE MUST BE ON OR AFTER  
9/2023]

MONTH[YEAR=FILL] .....  
DON'T KNOW ..... 77  
REFUSED ..... 99

VAXCV\_WK\_CHK2

IF VAX4C\_M/Y =THE CURRENT MONTH AND YEAR GO TO CVVAX\_WEEK2; ELSE  
GO TO VAX\_PL

CVVAX\_WEEK2

Was the vaccine received [IF CURRENT DAY IS SUNDAY, FILL: "today"; ELSE FILL: "on or  
after Sunday, [FILL DATE WITH MOST RECENT SUNDAY'S DATE]"?]

YES ..... 1  
NO ..... 2  
DON'T KNOW ..... 77  
REFUSED ..... 99



VAX\_PL At what kind of place did you get your most recent COVID-19 vaccination?

INTERVIEWER NOTE: IF A RESPONDENT SAYS VACCINATION WAS RECEIVED AT A DRIVE-THRU/DRIVE-UP FACILITY, PROBE TO COLLECT WHICH TYPE OF PLACE PROVIDED THIS OPTION.

READ RESPONSES AS NECESSARY.

DOCTOR’S OFFICE [IF PUERTO RICO, THEN SHOW:

INTERVIEWER NOTE: DOCTOR’S OFFICE

INCLUDES PRIVATE PROVIDER AND

- REFORMA PROVIDER] ..... 1
- HEALTH DEPARTMENT ..... 2
- CLINIC OR HEALTH CENTER ..... 3
- HOSPITAL ..... 4
- OTHER MEDICALLY-RELATED PLACE ..... 5
- MASS VACCINATION SITE ..... 6
- PHARMACY OR DRUG STORE ..... 7
- WORKPLACE ..... 8
- HIGH SCHOOL/COLLEGE/UNIVERSITY ..... 9
- OTHER NONMEDICALLY-RELATED PLACE ..... 10
- MALL OUTREACH [DISPLAY ONLY IF GUAM] ..... 11
- VILLAGE OUTREACH [DISPLAY ONLY IF GUAM] ..... 12
- DON’T KNOW ..... 77
- REFUSED ..... 99

IF VAX2\_SEP EQ 1 GO TO VAX\_COST; ELSE GO TO VAX\_BRIDGE

VAX\_COST How much of the cost of your most recent COVID vaccination did you pay out-of-pocket? Did you pay the total cost out-of-pocket, some of the cost out-of-pocket, or did you have no out-of-pocket cost for that vaccination?

INTERVIEWER NOTE: OUT-OF-POCKET COSTS MEAN MONEY YOU HAD TO PAY AT THE TIME YOU GOT YOUR VACCINATION. IT COULD HAVE BEEN TO PAY FOR THE WHOLE COST OF THE VACCINE OR ONLY A PORTION IF THE INSURANCE OR A GOVERNMENT PROGRAM PAID PART OF THE COST.

IF A RESPONDENT REPORTS PAYING A COPAY, PLEASE CODE AS 2 (SOME OF THE COST OUT-OF-POCKET)

- TOTAL COST OUT-OF-POCKET ..... 1
- SOME OF THE COST OUT-OF-POCKET ..... 2
- NO OUT-OF-POCKET COST ..... 3
- DON’T KNOW ..... 77
- REFUSED ..... 99

VAX\_BRIDGE Are you aware that there are places you can go to get the COVID-19 vaccine for free?

INTERVIEWER NOTE: A NEW PROGRAM, CALLED THE BRIDGE ACCESS PROGRAM, CAN PROVIDE FREE COVID-19 VACCINES FOR A LIMITED TIME. YOUR LOCAL HEALTHCARE PROVIDER OR HEALTH CENTER MAY HAVE MORE INFORMATION ABOUT THIS IF YOU HAVE QUESTIONS ABOUT ELIGIBILITY.

YES .....	1
NO .....	2
DON'T KNOW .....	77
REFUSED .....	99

IF VAX2\_SEP EQ 1 THEN DO: IF VAX4A\_M/Y LT 9/2023 AND VAX3\_SEP IN (77,99) GO TO VAX6; ELSE IF VAX\_FLU EQ 1, VAX\_RSV\_2M/Y EQ/GT 9/2023, AND VAX4A\_M/Y EQ/GT 9/2023 GO TO ALLVAX; ELSE IF (VAX\_FLU EQ 1, VAX\_RSV\_2M/Y LT 9/2023 AND VAX4A\_M/Y EQ GT 9/2023) OR (VAX\_FLU NE 1, VAX\_RSV\_2M/Y EQ/GT 9/2023 AND VAX4A\_M/Y EQ/GT 9/2023) GO TO TWOVAX2; ELSE GO TO ACIP3; END; ELSE IF VAX2\_SEP IN ( ' ',2,77,99) GO TO VAX6

VAX6 How likely are you to get [IF VAX2 EQ 1 then display: 'another'; ELSE display: 'a'] COVID-19 vaccine? Would you say you would definitely get [IF VAX2 EQ 1 then display: 'another'; ELSE display: 'a'] vaccine, probably get [IF VAX2 EQ 1 then display: 'another'; ELSE display: 'a'] vaccine, probably not get [IF VAX2 EQ 1 then display: 'another'; ELSE display: 'a'] vaccine, definitely not get [IF VAX2 EQ 1 then display: 'another'; ELSE display: 'a'] vaccine, or are not sure?

INTERVIEWER NOTE: THIS IS IN REFERENCE TO ANY FURTHER VACCINE DOSES THAT MIGHT BE RECOMMENDED IN ADDITION TO THE BOOSTER(S)/UPDATED VACCINE THEY HAVE ALREADY RECEIVED.

DEFINITELY GET A VACCINE .....	1
PROBABLY GET A VACCINE .....	2
PROBABLY NOT GET A VACCINE .....	3
DEFINITELY NOT GET A VACCINE .....	4
NOT SURE .....	5
DON'T KNOW .....	77
REFUSED .....	99

IF VAX\_FLU EQ 1 AND VAX\_RSV\_2M/Y EQ/GT 7/2023 GO TO TWOVAX2; ELSE GO TO ACIP3

ALLVAX      You said that recently received your flu vaccine, RSV vaccine, and a COVID-19 vaccine. Did you get all three vaccines at the same visit, get two of the three vaccines at the same visit, or get each at a different visit?

RECEIVED ALL THREE AT THE SAME VISIT .....	1	GO TO ACIP3
RECEIVED TWO OF THE THREE VACCINES AT THE SAME VISIT .....	2	
RECEIVED EACH AT A DIFFERENT VISIT .....	3	GO TO ACIP3
DON'T KNOW .....	77	GO TO ACIP3
REFUSED .....	99	GO TO ACIP3

TWOVAX      Which two vaccines did you get at the same visit? Flu and RSV, flu and COVID-19, or RSV and COVID-19?

FLU AND RSV .....	1	GO TO ACIP3
FLU AND COVID-19 .....	2	GO TO ACIP3
RSV AND COVID-19 .....	3	GO TO ACIP3
DON'T KNOW .....	77	GO TO ACIP3
REFUSED .....	99	GO TO ACIP3

TWOVAX2      You said that you recently received both a [IF VAX\_FLU EQ 1 AND RSV\_2M/Y EQ/GT 7/2023 THEN DISPLAY: "flu and RSV"; ELSE IF VAX\_FLU EQ 1 AND VAX4A\_M/Y EQ/GT 9/2023 THEN DISPLAY: "flu and COVID-19"; ELSE DISPLAY: "RSV and COVID-19"] vaccine. Did you receive both vaccines at the same visit or each vaccine at a different visit?

RECEIVED BOTH AT THE SAME VISIT .....	1
RECEIVED EACH AT A DIFFERENT VISIT .....	2
DON'T KNOW .....	77
REFUSED .....	99

ACIP3      Do you have a health condition that may put you at higher risk for getting very sick from COVID-19?

YES .....	1	
NO .....	2	GO TO ACIP5
DON'T KNOW .....	77	GO TO ACIP5
REFUSED .....	99	GO TO ACIP5

ACIP4

Can you please tell me what that is?

SELECT ALL THAT APPLY

CANCER .....	1	
CHRONIC KIDNEY DISEASE .....	2	
CHRONIC LUNG DISEASES (COPD [CHRONIC OBSTRUCTIVE PULMONARY DISEASE], ASTHMA [MODERATE TO SEVERE], INTERSTITIAL LUNG DISEASE, CYSTIC FIBROSIS, AND PULMONARY HYPERTENSION .....	3	GO TO ACIP5
DEMENTIA OR OTHER NEUROLOGICAL CONDITIONS .....	4	GO TO ACIP5
DIABETES (TYPE 1 OR 2) .....	5	GO TO ACIP5
DOWN SYNDROME .....	6	GO TO ACIP5
HEART CONDITIONS (SUCH AS HEART FAILURE, CORONARY ARTERY DISEASE, CARDIOMYOPATHIES OR HYPERTENSION) .....	7	GO TO ACIP5
HIV INFECTION .....	8	GO TO ACIP5
IMMUNOCOMPROMISED STATE (WEAKENED IMMUNE SYSTEM) .....	9	GO TO ACIP5
LIVER DISEASE (CHRONIC LIVER DISEASE, SUCH AS ALCOHOL-RELATED LIVER DISEASE, NONALCOHOLIC FATTY LIVER DISEASE, AND CIRRHOSIS [SCARRING OF THE LIVER]) .....	10	GO TO ACIP5
OVERWEIGHT (HIGH BMI) .....	11	GO TO ACIP5
PREGNANCY .....	12	GO TO ACIP5
SICKLE CELL DISEASE OR THALASSEMIA (HEMOGLOBIN BLOOD DISORDER) .....	13	GO TO ACIP5
SMOKING (CURRENT OR FORMER) .....	14	GO TO ACIP5
SOLID ORGAN OR BLOOD STEM CELL TRANSPLANT (INCLUDING BONE MARROW TRANSPLANT) .....	15	GO TO ACIP5
STROKE OR CEREBROVASCULAR DISEASE .....	16	GO TO ACIP5
SUBSTANCE USE DISORDERS (EX: ALCOHOL, OPIOID, OR COCAINE USE DISORDER) .....	17	GO TO ACIP5
OLDER AGE .....	18	GO TO ACIP5
OTHER .....	19	
DON'T KNOW .....	77	GO TO ACIP5
REFUSED .....	99	GO TO ACIP5

ACIP4\_OTH ENTER OTHER SPECIFY: \_\_\_\_\_

ACIP5

Do you have serious difficulty seeing, hearing, walking, remembering, making decisions, or communicating?

YES .....	1
NO .....	2
DON'T KNOW .....	77
REFUSED .....	99

VAX\_CONF2 How concerned are you about getting COVID-19? Would you say you are: not at all concerned; a little concerned; moderately concerned; or very concerned?

NOT AT ALL CONCERNED ..... 1  
A LITTLE CONCERNED ..... 2  
MODERATELY CONCERNED ..... 3  
VERY CONCERNED ..... 4  
DON'T KNOW ..... 77  
REFUSED ..... 99

VAX\_CONF4 How safe do you think a COVID-19 vaccine is for you? Would you say not at all safe; somewhat safe; very safe; or completely safe?

NOT AT ALL SAFE ..... 1  
SOMEWHAT SAFE ..... 2  
VERY SAFE ..... 3  
COMPLETELY SAFE ..... 4  
DON'T KNOW ..... 77  
REFUSED ..... 99

VAX\_CONF5 How important do you think getting a COVID-19 vaccine is to protect yourself against COVID-19? Would you say it is not at all important, a little important, somewhat important, or very important?

NOT AT ALL IMPORTANT ..... 1  
A LITTLE IMPORTANT ..... 2  
SOMEWHAT IMPORTANT ..... 3  
VERY IMPORTANT ..... 4  
DON'T KNOW ..... 77  
REFUSED ..... 99

VAX\_CONF7A

[IF VAX2 IN (2,77,99) OR VAX4A\_M/Y LT 9/2023 THEN DISPLAY: Has a doctor, nurse, or other health professional recommended that you get a COVID-19 vaccine since September 14, 2023?; ELSE DISPLAY: Did you receive a recommendation from a doctor, nurse, or other health professional before you got your **most recent dose**?]

YES ..... 1  
NO ..... 2  
DON'T KNOW ..... 77  
REFUSED ..... 99

VAX\_CONF11A

How difficult [IF VAX2 IN (2,77,99) DISPLAY: "would it be for you to get a COVID-19 vaccine"]; ELSE DISPLAY "was it for you to get your **most recent** COVID-19 vaccine dose? Would you say: not at all difficult, a little difficult, somewhat difficult, or very difficult?

- NOT AT ALL DIFFICULT ..... 1
- A LITTLE DIFFICULT ..... 2
- SOMEWHAT DIFFICULT ..... 3
- VERY DIFFICULT ..... 4
- DON'T KNOW ..... 77
- REFUSED ..... 99

IF VAX\_CONF11A NE 1 GO TO VAX\_CONF13; ELSE IF C5/TIS\_C5 EQ 1 AND NIS/TEEN COMPLETE GO TO ACM\_SEX1; ELSE GO TO ACM\_AGE

VAX\_CONF13

Many things might make it difficult to get a COVID-19 vaccine. Please tell me if anything I list [IF VAX2 EQ 1 DISPLAY: "made"; ELSE DISPLAY: "makes"] it difficult for you.

- CONTINUE ..... 1

VAX\_CONF13A

Getting an appointment online.

[IF VAX2 EQ 1 DISPLAY: "Did"; ELSE DISPLAY: "Has"] this [IF VAX2 EQ 1 DISPLAY: "make"; ELSE DISPLAY: "made"] it difficult for you to get a COVID-19 vaccine?

- YES ..... 1
- NO ..... 2
- DON'T KNOW ..... 77
- REFUSED ..... 99

VAX\_CONF13D

Not knowing where to get a vaccine.

READ IF NECESSARY:

[IF VAX2 EQ 1 DISPLAY: "Did"; ELSE DISPLAY: "Has"] this [IF VAX2 EQ 1 DISPLAY: "make"; ELSE DISPLAY: "made"] it difficult for you to get a COVID-19 vaccine?

- YES ..... 1
- NO ..... 2
- DON'T KNOW ..... 77
- REFUSED ..... 99

VAX\_CONF13E

Hard to get to vaccination sites.

READ IF NECESSARY:

[IF VAX2 EQ 1 DISPLAY: "Did"; ELSE DISPLAY: "Has"] this [IF VAX2 EQ 1 DISPLAY: "make"; ELSE DISPLAY: "made"] it difficult for you to get a COVID-19 vaccine?

- YES ..... 1
- NO ..... 2
- DON'T KNOW ..... 77
- REFUSED ..... 99

VAX\_CONF13F

Vaccination sites aren't open at convenient times.

READ IF NECESSARY:

[IF VAX2 EQ 1 DISPLAY: "Did"; ELSE DISPLAY: "Has"] this [IF VAX2 EQ 1 DISPLAY: "make"; ELSE DISPLAY: "made"] it difficult for you to get a COVID-19 vaccine?

- YES ..... 1
- NO ..... 2
- DON'T KNOW ..... 77
- REFUSED ..... 99

IF VAX2 IN (2,77,99) GO TO VAX\_CONF13I; ELSE GO TO VAX\_CONF13G

VAX\_CONF13G

Not knowing whether you were eligible for another vaccine or not.

READ IF NECESSARY:

[IF VAX2 EQ 1 DISPLAY: "Did"; ELSE DISPLAY: "Has"] this [IF VAX2 EQ 1 DISPLAY: "make"; ELSE DISPLAY: "made"] it difficult for you to get a COVID-19 vaccine?

- YES ..... 1
- NO ..... 2
- DON'T KNOW ..... 77
- REFUSED ..... 99

VAX\_CONF13H

Having a reaction to a previous dose of the COVID-19 vaccine.

READ IF NECESSARY:

[IF VAX2 EQ 1 DISPLAY: "Did"; ELSE DISPLAY: "Has"] this [IF VAX2 EQ 1 DISPLAY: "make"; ELSE DISPLAY: "made"] it difficult for you to get a COVID-19 vaccine?

- YES ..... 1
- NO ..... 2
- DON'T KNOW ..... 77
- REFUSED ..... 99

VAX\_CONF13I

Cost, including any payments to the clinic, the cost of getting there, or the cost of taking time away from work.

READ IF NECESSARY:

[IF VAX2 EQ 1 DISPLAY: "Did"; ELSE DISPLAY: "Has"] this [IF VAX2 EQ 1 DISPLAY: "make"; ELSE DISPLAY: "made"] it difficult for you to get a COVID-19 vaccine?

- YES ..... 1
- NO ..... 2
- DON'T KNOW ..... 77
- REFUSED ..... 99

IF C5/TIS\_C5 EQ 1 AND NIS/TEEN COMPLETE GO TO ACM\_SEX1; ELSE GO TO ACM\_AGE

ACM\_AGE What is your current age?

ENTER 999 FOR REFUSED

\_\_\_\_\_ Age

IF AGE IN (65-99) AND VAX3\_SEP=1, GO TO ACM\_COV65; ELSE GO TO ACM\_SEX1

ACM\_COV65

Since March 2024, a second dose of the updated 2023-24 COVID vaccine has been recommended for persons age 65 years and older. How likely are you to get another COVID-19 vaccine? Would you say you would definitely get another vaccine, probably get another vaccine, probably not get another vaccine, definitely not get another vaccine, or are not sure?

- DEFINITELY GET ANOTHER VACCINE ..... 1
- PROBABLY GET ANOTHER VACCINE ..... 2
- PROBABLY NOT GET ANOTHER VACCINE ..... 3
- DEFINITELY NOT GET ANOTHER VACCINE ..... 4
- NOT SURE ..... 5
- DON'T KNOW ..... 77
- REFUSED ..... 99

ACM\_SEX1 What sex were you assigned at birth, on your original birth certificate, male or female?

- MALE ..... 1
- FEMALE ..... 2
- DON'T KNOW ..... 77
- REFUSED ..... 99



ACM\_TRANS1

How do you currently describe yourself: male, female, transgender, or by a different term?

- MALE ..... 1
- FEMALE ..... 2
- TRANSGENDER ..... 3
- A DIFFERENT TERM ..... 4
- DON'T KNOW ..... 77
- REFUSED ..... 99

ACM\_Q93

What best describes your sexual orientation? Is it Heterosexual or straight; Lesbian or gay; Bisexual; or Something else?

- HETEROSEXUAL/STRAIGHT ..... 1
- LESBIAN OR GAY ..... 2
- BISEXUAL ..... 3
- SOMETHING ELSE ..... 4
- DON'T KNOW ..... 77
- REFUSED ..... 99

IF (ACM\_AGE<50,777,999) AND ACM\_SEX1 EQ 2 AND ACIP4 NOT IN (12), GO TO ACM\_PREG; ELSE IF C5/TIS\_C5/LF\_C1Q02 EQ 1 AND NIS/TEEN/FLU COMPLETE AND C9/TIS\_C9/Z\_Q02BZ EQ 2 SKIP TO ACM\_RACE\_AAB; ELSE IF C5/TIS\_C5/LF\_C1Q02 EQ 1 AND NIS/TEEN/FLU COMPLETE AND C9/TIS\_C9/Z\_Q02BZ NE 2 SKIP TO ACM\_MEDEQ; ELSE GO TO ACM\_HISP

ACM\_PREG

Are you currently trying to get pregnant, pregnant, or breastfeeding?

- TRYING TO GET PREGNANT ..... 1
- PREGNANT ..... 2
- BREASTFEEDING ..... 3
- NONE OF THE ABOVE ..... 4
- DON'T KNOW ..... 77
- REFUSED ..... 99

IF C5/TIS\_C5/LF\_C1Q02 EQ 1 AND NIS/TEEN/FLU COMPLETE AND C9/TIS\_C9/Z\_Q02BZ EQ 2 SKIP TO ACM\_RACE\_AAB; ELSE IF C5/TIS\_C5/LF\_C1Q02 EQ 1 AND NIS/TEEN/FLU COMPLETE AND C9/TIS\_C9/Z\_Q02BZ NE 2 SKIP TO ACM\_MEDEQ; ELSE GO TO ACM\_HISP

ACM\_HISP

Are you of Hispanic or Latino origin?

- YES ..... 1
  - NO ..... 2
  - DON'T KNOW ..... 77
  - REFUSED ..... 99
- GO TO ACM\_RACE  
GO TO ACM\_RACE  
GO TO ACM\_RACE

ACM\_HISP\_Y Are you Mexican, Mexican-American, Chicano/a, Puerto Rican, Cuban, Central American, South American, (IF USVI THEN DISPLAY: (Dominican)), or of other Hispanic, Latino/a, or Spanish origin?

SELECT ALL THAT APPLY

MEXICAN/MEXICANO, MEXICAN AMERICAN, CHINCANO/A .....	1	GO TO ACM_RACE
PUERTO RICAN .....	2	GO TO ACM_RACE
CUBAN .....	3	GO TO ACM_RACE
CENTRAL AMERICAN .....	4	GO TO ACM_RACE
SOUTH AMERICAN .....	5	GO TO ACM_RACE
OTHER HISPANIC, LATINO/A, OR SPANISH ORIGIN (SPECIFY) .....	10	
DOMINICAN [SHOW ONLY IF USVI] .....	11	GO TO ACM_RACE
DON'T KNOW .....	77	GO TO ACM_RACE
REFUSED .....	99	GO TO ACM_RACE

ACM\_HISP\_Y\_O

ENTER OTHER SPECIFY: \_\_\_\_\_

ACM\_RACE Now, I am going to read a list of categories. Please choose one or more of the following categories to describe your race. Are you White, Black or African American, American Indian, Alaska Native, Asian, Native Hawaiian or other Pacific Islander?

SELECT ALL THAT APPLY

WHITE .....	1	GO TO ACM_MEDEQ
BLACK OR AFRICAN AMERICAN .....	2	GO TO ACM_RACE_AAB
AMERICAN INDIAN .....	3	GO TO ACM_MEDEQ
ALASKA NATIVE .....	4	GO TO ACM_MEDEQ
ASIAN .....	5	IF GUAM THEN DO: GO TO ACM_RACEAAPI; ELSE IF NOT GUAM DO: GO TO ACM_RACE_AS
NATIVE HAWAIIAN .....	6	GO TO ACM_MEDEQ
PACIFIC ISLANDER .....	7	IF GUAM THEN DO: GO TO ACM_RACEAAPI; ELSE IF NOT GUAM DO: GO TO ACM_RACE_PI
OTHER .....	8	
DON'T KNOW .....	77	GO TO ACM_MEDEQ
REFUSED .....	99	GO TO ACM_MEDEQ

ACM\_RACE\_OS  
ENTER OTHER SPECIFY: \_\_\_\_\_ GO TO ACM\_MEDEQ

ACM\_RACE\_AS  
Are you Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, or other Asian?

READ IF NECESSARY: Please choose the one category that describes you best.

- |                    |    |                 |
|--------------------|----|-----------------|
| ASIAN INDIAN ..... | 1  | GO TO ACM_MEDEQ |
| CHINESE .....      | 2  | GO TO ACM_MEDEQ |
| FILIPINO .....     | 3  | GO TO ACM_MEDEQ |
| JAPANESE .....     | 4  | GO TO ACM_MEDEQ |
| KOREAN .....       | 5  | GO TO ACM_MEDEQ |
| VIETNAMESE .....   | 6  | GO TO ACM_MEDEQ |
| OTHER .....        | 7  |                 |
| DON'T KNOW .....   | 77 | GO TO ACM_MEDEQ |
| REFUSED .....      | 99 | GO TO ACM_MEDEQ |

ACM\_RACE\_ASO  
ENTER OTHER SPECIFY: \_\_\_\_\_ GO TO ACM\_MEDEQ

ACM\_RACE\_PI  
Are you Guamanian or Chamorro, Samoan, or other Pacific Islander?

READ IF NECESSARY: Please choose the one category that describes you best.

- |                        |    |                 |
|------------------------|----|-----------------|
| CHAMORRO/GUAMIAN ..... | 1  | GO TO ACM_MEDEQ |
| SAMOAN .....           | 2  | GO TO ACM_MEDEQ |
| OTHER .....            | 3  |                 |
| DON'T KNOW .....       | 77 | GO TO ACM_MEDEQ |
| REFUSED .....          | 99 | GO TO ACM_MEDEQ |

ACM\_RACE\_PIO  
ENTER OTHER SPECIFY: \_\_\_\_\_ GO TO ACM\_MEDEQ

ACM\_RACEAAPI

Are you Chamorro, Filipino, Chuukese, Pohnpeian, Palauan, Yapese, Kosraean, Marshallese, Japanese, Korean, Chinese, Vietnamese, or Thai?

READ IF NECESSARY: Please choose the one category that describes you best.

CHAMORRO .....	1	GO TO ACM_MEDEQ
FILIPINO .....	2	GO TO ACM_MEDEQ
CHUUKESE .....	3	GO TO ACM_MEDEQ
POHNPEIAN .....	4	GO TO ACM_MEDEQ
PALAUAN .....	5	GO TO ACM_MEDEQ
YAPESE .....	6	GO TO ACM_MEDEQ
KOSRAEAN .....	7	GO TO ACM_MEDEQ
MARSHALLESE .....	8	GO TO ACM_MEDEQ
JAPANESE .....	9	GO TO ACM_MEDEQ
KOREAN .....	10	GO TO ACM_MEDEQ
CHINESE .....	11	GO TO ACM_MEDEQ
VIETNAMESE .....	12	GO TO ACM_MEDEQ
THAI .....	13	GO TO ACM_MEDEQ
OTHER .....	14	
DON'T KNOW .....	77	GO TO ACM_MEDEQ
REFUSED .....	99	GO TO ACM_MEDEQ

ACMRACEAAPIO

ENTER OTHER SPECIFY: \_\_\_\_\_

GO TO ACM\_MEDEQ

ACM\_RACE\_AAB

[IF C5/TIS\_C5/LF\_C1Q02 EQ 1 and C9/TIS\_C9/Z\_Q02BZ EQ 2 THEN DISPLAY: "Previously, you indicated you were Black or African American." ELSE JUST DISPLAY:] Are you African American, Jamaican, Haitian, Nigerian, Ethiopian, Somalian, or other?

READ IF NECESSARY: Please choose the one category that describes you best.

AFRICAN AMERICAN .....	1	GO TO ACM_MEDEQ
JAMAICAN .....	2	GO TO ACM_MEDEQ
HAITIAN .....	3	GO TO ACM_MEDEQ
NIGERIAN .....	4	GO TO ACM_MEDEQ
ETHIOPIAN .....	5	GO TO ACM_MEDEQ
SOMALI .....	6	GO TO ACM_MEDEQ
OTHER .....	7	
DON'T KNOW .....	77	GO TO ACM_MEDEQ
REFUSED .....	99	GO TO ACM_MEDEQ

ACM\_RACEAABO

ENTER OTHER SPECIFY: \_\_\_\_\_

ACM\_MEDEQ

When seeking health care in the last 2 years, do you feel your experiences were worse than, the same as, or better than people of other races or ethnicities?

- WORSE THAN OTHER RACES OR ETHNICITIES ..... 1
- THE SAME AS OTHER RACES OR ETHNICITIES ..... 2
- BETTER THAN OTHER RACES OR ETHNICITIES ..... 3
- DON'T KNOW ..... 77
- REFUSED ..... 99

IF MOTHER WAS RESPONDENT IN NIS/TEEN/FLU SURVEY SKIP TO ACM\_INSURE; ELSE GO TO ACM\_EDUC

ACM\_EDUC What is the highest grade or year of school you have completed?

- 8TH GRADE OR LESS ..... 1
- 9TH-12TH GRADE NO DIPLOMA ..... 2
- HIGH SCHOOL GRADUATE OR GED COMPLETED ..... 3
- COMPLETED A VOCATIONAL, TRADE, OR BUSINESS SCHOOL PROGRAM ..... 4
- SOME COLLEGE CREDIT BUT NO DEGREE ..... 5
- ASSOCIATE DEGREE (AA, AS) ..... 6
- BACHELOR'S DEGREE (BA, BS, AB) ..... 7
- MASTER'S DEGREE (MA, MS, MSW, MBA ..... 8
- DOCTORATE (PhD, EdD) or PROFESSIONAL DEGREE (MD, DDS, DVM, JD) ..... 9
- DON'T KNOW ..... 77
- REFUSED ..... 99

ACM\_INSURE

Do you have any kind of health care coverage? This includes health insurance, prepaid plans such as HMOs, or government plans such as Medicare, or Indian Health Service?

- YES ..... 1
- NO ..... 2
- DON'T KNOW ..... 77
- REFUSED ..... 99

IF NIS/TEEN/FLU INCOME QUESTION ANSWERED, SKIP TO ACM\_BORN; ELSE GO TO ACM\_INCOME

ACM\_INCOME

Please think about your total combined family income during (FILL LAST CALENDAR YEAR) for all members of the family. Include money for jobs, social security, retirement income, unemployment payments, public assistance, and so forth. Also include income from interest, dividends, net income from business, farm, rent, or any other money income received. Can you tell me that amount before taxes?

ENTER 77 FOR DON'T KNOW AND 99 FOR REFUSED

_____		GO TO
		ACM_INC_CONF
DON'T KNOW .....	77	
REFUSED .....	99	

ACM\_INC\_RANG

We understand that people might not feel comfortable giving out their exact income. I would like to read you some income ranges, and let you select the category which best describes your total combined family income from all sources for all members of your household during (FILL LAST CALENDAR YEAR), before taxes?

READ LIST UNTIL R STOPS YOU AT THE CORRECT INCOME GROUP

Less than \$5,000 .....	1
\$5,001-\$10,000 .....	2
\$10,001-\$20,000 .....	3
\$20,001-\$40,000 .....	4
\$40,001-\$60,000 .....	5
\$60,001-\$75,000 .....	6
\$75,001-\$150,000 .....	7
\$150,001 or more .....	8
DON'T KNOW .....	77
REFUSED .....	99

IF NIS/TEEN/FLU SURVEY COMPLETE, SKIP TO ACM\_BORN; ELSE IF USVI, GO TO ACM\_ISLAND; IF GUAM, GO TO ACM\_C19VIL; ELSE GO TO ACM\_C19A

ACM\_INC\_CONF

Just to confirm that I entered the number correctly, the total combined family income was [FILL ACM\_Q91]?

YES .....	1	IF NIS/TEEN/FLU SURVEY COMPLETE, SKIP TO ACM_BORN; ELSE IF USVI, GO TO ACM_ISLAND; IF GUAM, GO TO ACM_C19VIL; ELSE GO TO ACM_C19A
NO .....	2	GO TO ACM_INCOME
DON'T KNOW .....	77	GO TO ACM_INCOME
REFUSED .....	99	GO TO ACM_INCOME

ACM\_ISLAND

On what island do you live?

SAINT CROIX .....	1	GO TO ACM_BORN
SAINT THOMAS .....	2	GO TO ACM_BORN
SAINT JOHN .....	3	GO TO ACM_BORN
WATER ISLAND .....	4	GO TO ACM_BORN
NOT IN USVI .....	5	GO TO ACM_C19A
DON'T KNOW .....	77	GO TO ACM_BORN
REFUSED .....	99	GO TO ACM_BORN

ACM\_C19VIL

In which village do you live?

AGANA HEIGHTS .....	1
AGAT .....	2
ASAN .....	3
BARRIGADA .....	4
CHALAN PAGO .....	5
DEDEDO .....	6
HAGATNA/AGANA .....	7
INARAJAN .....	8
MAINA .....	9
MAITE .....	10
MANGILAO .....	11
MERIZO .....	12
MONGMONG .....	13
ORDOT .....	14
PITI .....	15
SANTA RITA .....	16
SINAJANA .....	17
TALOFOFO .....	18
TAMUNING-TUMON .....	19
TOTO .....	20
UMATAC .....	21
YIGO .....	22
YONA .....	23
DON'T KNOW .....	77
DO NOT LIVE IN GUAM .....	98
REFUSED .....	99



ACM\_C19A What is your zip code?

\_\_\_\_\_

IF GUAM, AND  
ACM\_C19VIL NE 98,  
GO TO ACM\_BORN,  
ELSE IF PUERTO  
RICO GO TO  
ACM\_C19PR (DOES  
NOT GO THROUGH  
LOOKUP TABLE)

DON'T KNOW .....77777

IF ACM\_C19A= 77777  
or 99999 or ZIP Code  
not in the LOOK-UP  
table GO TO  
ACM\_C19 / ELSE GO  
TO ACM\_C19\_CONF  
IF ACM\_C19A= 77777  
or 99999 or ZIP Code  
not in the LOOK-UP  
table GO TO  
ACM\_C19 / ELSE GO  
TO ACM\_C19\_CONF

REFUSED .....99999

ELSE IF a proper zip code entered, then Fill CITY, COUNTY AND STATE from the look-up table.

ACM\_C19 In what city, county and state do you live?

IF CITY OR COUNTY IS DON'T KNOW, ENTER "DK"  
IF CITY OR COUNTY IS REFUSED, ENTER "REF"

IF LOCATION IS OUT OF THE COUNTRY, SELECT 'FC – FOREIGN COUNTRY'

\_\_\_\_\_

ACM\_C19\_CONF

To confirm, you live in [CITY], [COUNTY], [STATE]. Is that correct?

YES ..... 1  
NO ..... 2

GO TO ACM\_BORN  
GO TO ACM\_C19

ACM\_C19\_ZIPC

To confirm, I have your zip code as [FILL]. Is that correct?

YES ..... 1  
NO ..... 2  
DON'T KNOW ..... 77  
REFUSED ..... 99

GO TO ACM\_BORN  
GO TO ACM\_BORN  
GO TO ACM\_BORN

ACM\_C19\_NEWZ

What is your zip code?

ENTER ZIP CODE: \_\_\_\_\_

GO TO ACM\_BORN

ACM\_C19PR In what city and state do you live?

IF RESPONDENT DOES NOT LIVE IN PUERTO RICO, SELECT NOT IN PUERTO RICO IN THE DROP DOWN MENU

- [CITIES IN PUERTO RICO] ..... 1-78
- NOT IN PUERTO RICO ..... 98
- DON'T KNOW ..... 88
- REFUSED ..... 99

GO TO ACM\_C19  
 GO TO ACM\_BORN  
 GO TO ACM\_BORN

ACM\_C19PR\_ST

ENTER STATE: \_\_\_\_\_

ACM\_BORN Were you born in the United States?

- YES ..... 1
- NO ..... 2
- DON'T KNOW ..... 77
- REFUSED ..... 99

IF ACM\_BORN IN (1,77,99), THEN DO: IF NIS/TEEN/FLU SURVEY ANSWERED, SKIP TO ACM\_LANG; ELSE GO TO ACM\_C1

ACM\_FCBORN

In which country were you born?

ENTER COUNTRY: \_\_\_\_\_

IF NIS/TEEN/FLU SURVEY ANSWERED, SKIP TO ACM\_LANG; ELSE GO TO ACM\_C1

ACM\_C1

Now I have some questions about your entire household.

Including the adults and all the children, how many people live in this household?

ENTER 77 FOR DON'T KNOW AND 99 FOR REFUSED

NUMBER OF PEOPLE: \_\_\_\_\_

ACM\_LANG Do you speak a language other than English at home?

- YES ..... 1
- NO ..... 2
- DON'T KNOW ..... 77
- REFUSED ..... 99

IF ACM\_LANG IN (2,77,99), THEN DO: IF NIS/TEEN/FLU SURVEY ANSWERED, SKIP TO K\_D16; ELSE GO TO ACM\_LL

ACM\_HHLANG

What is this language?

- SPANISH ..... 1
- MANDARIN ..... 2
- ARABIC ..... 3
- VIETNAMESE ..... 4
- RUSSIAN ..... 5
- PORTUGUESE ..... 6
- KOREAN ..... 7
- FRENCH ..... 8
- CANTONESE ..... 9
- HAITIAN CREOLE ..... 10
- NEPALI ..... 11
- OTHER ..... 88
- DON'T KNOW ..... 77
- REFUSED ..... 99

IF ACM\_HHLANG IN (1,2,3,4,5,6,7,8,9,10,11,77,99), THEN DO: IF NIS/TEEN/FLU SURVEY ANSWERED, SKIP TO K\_D16; ELSE GO TO ACM\_LL

ACM\_HHLANGO

ENTER OTHER SPECIFY: \_\_\_\_\_

IF NIS/TEEN/FLU SURVEY ANSWERED, SKIP TO K\_D16; ELSE GO TO ACM\_LL

ACM\_LL

Do you have landline telephone in your household?

INTERVIEWER NOTE, READ AS NECESSARY: Please do not include:

- Modem-only lines,
- Fax-only lines,
- Lines used just for home security systems,
- Beepers,
- Skype,
- Pagers, or
- Cell phones.

Please include Voice Over I.P. or VOIP numbers.

YES .....	1
NO .....	2
DON'T KNOW .....	77
REFUSED .....	99

K\_D16

Those are all the questions I have. You may be re-contacted in the future to participate in related surveys. If you are contacted to participate in future surveys, you have the right to refuse. I'd like to thank you again on behalf of the [IF GUAM, DISPLAY: "Department of Public Health and Social Services and the"] [IF PUERTO RICO, DISPLAY "Puerto Rico Department of Health and the"] Centers for Disease Control and Prevention for the time and effort you've spent answering these questions. If you would like more information about the National Immunization Survey, please call 1-877-220-4805.

EXIT SURVEY