2004 NATIONAL HEALTH INTERVIEW SURVEY
Episode
injpoiep : Identification Fields
PUBLIC USE
Document Version Date: 28-Feb-06

Question ID: IDN.000_00.000
Recode Instrument Variable Name:
Final Documentation Name: RECTYPE

Record Type
Universe:
Description:

Sources: None
Recodes: None
Keywords: None
Notes: None

File type identifier
10 Household
20 Person
30 Sample Adult
40 Sample Child
60 Family
70 Injury/Poisoning Episode
75 Injury/Poisoning Verbatim

Question ID: IDN.000_02.000
Recode Instrument Variable Name:
Final Documentation Name: SRVY_YR

Survey Year
Universe:
Description:

Sources: None
Recodes: None
Keywords: None
Notes: None

Year of National Health Interview Survey
2004 2004
### Household ID

**Question ID:** IDN.000_04.000  
**Recode** Yes  
**Instrument Variable Name:** HHX  
**Final Documentation Name:** HHX

**Universe:**  
**Description:** Use this variable to identify individual households.

**Sources:** None  
**Recodes:** None  
**Keywords:** Household number  
**Notes:** Use this variable to identify individual households.

### Family Number

**Question ID:** IDN.000_35.000  
**Recode** Yes  
**Instrument Variable Name:** FMX  
**Final Documentation Name:** FMX

**Universe:** All families  
**Description:** Use this variable in combination with HHX to identify individual families.

**Sources:** None  
**Recodes:** None  
**Keywords:** Family number  
**Notes:** Use this variable in combination with HHX to identify individual families.

### Person Number

**Question ID:** IDN.000_40.000  
**Recode** No  
**Instrument Variable Name:** FPX  
**Final Documentation Name:** FPX

**Universe:** All persons  
**Description:** Use this variable in combination with HHX and FMX to identify individual persons or use this variable in combination with FCTRLNUM to identify individual persons.

**Sources:** None  
**Recodes:** None  
**Keywords:** Person number  
**Notes:** Use this variable in combination with HHX and FMX to identify individual persons or use this variable in combination with FCTRLNUM to identify individual persons.

**Notes:** Person number 1 thru 25

**Notes:** Family number 1 - 25
### Injury/Poisoning Episode Number

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>First injury or poisoning</td>
</tr>
<tr>
<td>02</td>
<td>Second injury or poisoning</td>
</tr>
<tr>
<td>03</td>
<td>Third injury or poisoning</td>
</tr>
<tr>
<td>04</td>
<td>Fourth injury or poisoning</td>
</tr>
<tr>
<td>05</td>
<td>Fifth injury or poisoning</td>
</tr>
<tr>
<td>06</td>
<td>Sixth injury or poisoning</td>
</tr>
<tr>
<td>07</td>
<td>Seventh injury or poisoning</td>
</tr>
<tr>
<td>08</td>
<td>Eighth injury or poisoning</td>
</tr>
<tr>
<td>09</td>
<td>Ninth injury or poisoning</td>
</tr>
<tr>
<td>10</td>
<td>Tenth injury or poisoning</td>
</tr>
</tbody>
</table>

**Question ID:** IDN.000_70.000  □ Recode  Instrument Variable Name: WTFA

**Final Documentation Name:** WTFA

**Universe:**

**Description:**

**Sources:** None

**Recodes:** None

**Keywords:** None

**Notes:** None

Weight - Final Annual
When did {person's} [injury/poisoning] happen for which a medical professional was consulted?

Now I'm going to ask a few questions about the ["MTFINJ3M"/"MTFPOI3M"] times {person} [were/was] [injured/poisoned] for which a medical professional was consulted. Starting with the most recent time, when did this [injury/poisoning] happen?

You just told me about {person's} [month, day of previous event/"most recent"/"second most recent"/"third most recent"/"fourth most recent"] [injury/poisoning]. What was the date of the [injury/poisoning] before that for which a medical professional was consulted?

Universe: ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000
Question ID: FIJ.050_03.000

Recode Instrument Variable Name: IPDATEY

Final Documentation Name: IPDATEY

[If ((MTFINJ3M eq <1>) OR (MTFPOI3M eq <1>))]

When did {person's} [injury/poisoning] happen for which a medical professional was consulted?

[If ((MTFINJ3M eq <2-91> and the most recent injury episode is being asked about) OR (MTFPOI3M eq <2-91> and the most recent poisoning episode is being asked about))]

Now I'm going to ask a few questions about the [^MTFINJ3M/^MTFPOI3M] times {person} {were/was} [injured/poisoned] for which a medical professional was consulted. Starting with the most recent time, when did this [injury/poisoning] happen?

[If ((MTFINJ3Meq <2-91> and the other injury episodes are being asked about) OR (MTFPOI3M eq <2-91> and the other poisoning episodes are being asked about))]

You just told me about {person's} [month, day of previous event] [injury/poisoning]. What was the date of the [injury/poisoning] before that for which a medical professional was consulted?

Universe: ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91') and ('01' <= IPDATED <= '31') or (IPDATED = '99')

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, and a day was entered for the episode or "don't know" was entered for the day of the episode.

Sources: None

Recodes: None

Keywords: injury; poisoning; date

Notes: None

Year of injury/poisoning episode

<table>
<thead>
<tr>
<th>Year</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003</td>
<td>2003</td>
</tr>
<tr>
<td>2004</td>
<td>2004</td>
</tr>
<tr>
<td>2005</td>
<td>2005</td>
</tr>
<tr>
<td>9997</td>
<td>Refused</td>
</tr>
<tr>
<td>9998</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>9999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
Question ID: FIJ.051_01.000  Recode  Instrument Variable Name: IPDATENO  Final Documentation Name: IPDATENO

Can you tell me approximately how long ago [person's] [injury/poisoning] happened?

Universe: ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91') and IPDATEM = '99'

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where "don't know" is entered for the month of the episode

Sources: None
Recodes: None
Keywords: injury; poisoning; time period
Notes: None

Approximate time since injury/poisoning episode: Number

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-91</td>
<td>Days</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

Question ID: FIJ.051_02.000  Recode  Instrument Variable Name: IPDATETP  Final Documentation Name: IPDATETP

Can you tell me approximately how long ago [person's] [injury/poisoning] happened?

Universe: ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91') and IPDATEM = '99'

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where "don't know" is entered for the month of the episode

Sources: None
Recodes: None
Keywords: injury; poisoning; time period
Notes: None

Approximate time since injury/poisoning episode: Time period

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Days</td>
</tr>
<tr>
<td>2</td>
<td>Weeks</td>
</tr>
<tr>
<td>3</td>
<td>Months</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>8</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
Was this in the beginning of[^IPDATEM (text)], the middle of[^IPDATEM (text)], or the end of[^IPDATEM (text)]?

<table>
<thead>
<tr>
<th>Number</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Beginning</td>
</tr>
<tr>
<td>2</td>
<td>Middle</td>
</tr>
<tr>
<td>3</td>
<td>End</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>8</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

Universe: ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91') and IPDATED = '99'

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000, where "don't know" is entered for the day of the episode.

Notes: This variable was calculated by subtracting the date of the injury/poisoning episode from the date the injury/poisoning questions were asked. Only the month, day, and year of the injury/poisoning episode provided by the respondent was used to create this variable. No additional date questions or imputed data were used in the creation of this variable. For more information about this variable see the Survey Description Document.
### 2004 NATIONAL HEALTH INTERVIEW SURVEY

**Episode**

**injpoiep** : Injuries & Poisoning

PUBLIC USE

**Document Version Date:** 28-Feb-06

<table>
<thead>
<tr>
<th>Question ID:</th>
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<tbody>
<tr>
<td>FIJ.052_00.000</td>
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#### Recode

<table>
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<tbody>
<tr>
<td>'01' &lt;= MTFINJ3M &lt;= '91' or '01' &lt;= MTFPOI3M &lt;= '91'</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description:</th>
</tr>
</thead>
<tbody>
<tr>
<td>All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sources:</th>
</tr>
</thead>
<tbody>
<tr>
<td>IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATETP, IPDATEMT, IJDATE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Recodes:</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Keywords:</th>
</tr>
</thead>
<tbody>
<tr>
<td>injury; poisoning; elapsed time</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Notes:</th>
</tr>
</thead>
<tbody>
<tr>
<td>This variable provides the elapsed time in days between the injury/poisoning episode date and the date when the injury/poisoning questions were asked, calculated from date information provided by the respondent and imputed when necessary. For more information about this variable see the Survey Description Document.</td>
</tr>
</tbody>
</table>

Days between the date of the injury/poisoning episode and the date the injury/poisoning questions were asked

<table>
<thead>
<tr>
<th>000-499</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-499 days</td>
</tr>
</tbody>
</table>

### Recode

<table>
<thead>
<tr>
<th>Universe:</th>
</tr>
</thead>
<tbody>
<tr>
<td>'01' &lt;= MTFINJ3M &lt;= '91' or '01' &lt;= MTFPOI3M &lt;= '91'</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description:</th>
</tr>
</thead>
<tbody>
<tr>
<td>All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sources:</th>
</tr>
</thead>
<tbody>
<tr>
<td>IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATETP, IPDATEMT, IJDATE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Recodes:</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Keywords:</th>
</tr>
</thead>
<tbody>
<tr>
<td>injury; poisoning; elapsed time</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Notes:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The lower boundary of the interval specifying the number of days possibly elapsed between the injury/poisoning episode and the date when the injury/poisoning questions were asked consistent with the date information provided by the respondent. In the case where complete information is given, RPD, BIETD, and EIETD will be equal. For more information about this variable see the Survey Description Document.</td>
</tr>
</tbody>
</table>

Lower boundary of elapsed time interval in days

<table>
<thead>
<tr>
<th>000-499</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-499 days before the date the injury/poisoning questions were asked</td>
</tr>
</tbody>
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Question ID: FIJ.052_00.000  R04  Recode  Instrument Variable Name:  
Final Documentation Name: EIETD

Recode

Universe: ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')
Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

Sources: IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATETP, IPDATEMT, IJDATE
Recodes: None
Keywords: injury; poisoning; elapsed time
Notes: The upper boundary of the interval specifying the number of days possibly elapsed between the injury/poisoning episode and the date when the injury/poisoning questions were asked consistent with the date information provided by the respondent. In the case where complete information is given, RPD, BIETD, and EIETD will be equal. For more information about this variable see the Survey Description Document.

Upper boundary of elapsed time interval in days
000-499 0-499 days before the date the injury/poisoning questions were asked

Question ID: FIJ.052_00.000  R05  Recode  Instrument Variable Name:  
Final Documentation Name: EDIPBR

Recode

Universe: ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')
Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

Sources: IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATETP, IPDATEMT
Recodes: None
Keywords: injury; poisoning
Notes: None

Episode date information reported by the respondent
1  Month, day, and year
2  Month, beginning of month, and year
3  Month, middle of month, and year
4  Month, end of month, and year
5  Month and year
6  Elapsed time in days
7  Elapsed time in weeks
8  Elapsed time in months
9  No information
**Recode**

<table>
<thead>
<tr>
<th>Universe:</th>
<th>01' &lt;= MTFINJ3M &lt;= '91' or 01' &lt;= MTFPOI3M &lt;= '91'</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description:</td>
<td>All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000</td>
</tr>
<tr>
<td>Sources:</td>
<td>IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATEMT</td>
</tr>
<tr>
<td>Recodes:</td>
<td>None</td>
</tr>
<tr>
<td>Keywords:</td>
<td>injury; poisoning; elapsed time</td>
</tr>
<tr>
<td>Notes:</td>
<td>This variable indicates the part of the injury/poisoning date or time interval used in the creation of variable RPD that was imputed. For more information about the imputation methods used see the Survey Description Document.</td>
</tr>
</tbody>
</table>

**Imputed part of I/P date or elapsed time interval**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No imputation necessary (month, day, and year reported; or elapsed time interval width = 0)</td>
</tr>
<tr>
<td>1</td>
<td>Imputed day based on reported beginning, middle, or end of month</td>
</tr>
<tr>
<td>2</td>
<td>Imputed day of the month (no day of month information reported)</td>
</tr>
<tr>
<td>3</td>
<td>No imputation necessary (elapsed time reported in days)</td>
</tr>
<tr>
<td>4</td>
<td>Imputed time interval based on elapsed time reported in weeks</td>
</tr>
<tr>
<td>5</td>
<td>Imputed time interval based on elapsed time reported in months</td>
</tr>
<tr>
<td>6</td>
<td>Imputed elapsed time &amp; elapsed time interval using hot deck imputation (no date information reported or no valid date information reported)</td>
</tr>
</tbody>
</table>
Question ID: FIJ.052_00.000  R08

Instrument Variable Name: Recode

Final Documentation Name: MUMON

Universe: (01 <= MTFINJ3M <= '91) or (01 <= MTFPOI3M <= '91)

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

Sources: IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATETP, IPDATEMT

Recodes: None

Keywords: injury; poisoning

Notes: This variable contains the value of IPDATEM when no imputation was done, and it contains the imputed month when the month was imputed. For more information about this variable see the Survey Description Document.

Imputed month

01 January
02 February
03 March
04 April
05 May
06 June
07 July
08 August
09 September
10 October
11 November
12 December
2004 NATIONAL HEALTH INTERVIEW SURVEY
Episode
injpoiep: Injuries & Poisoning
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Document Version Date: 28-Feb-06

Question ID: FIJ.052_00.000  R10  Recode  Instrument Variable Name: MUYEAR
Final Documentation Name: MUYEAR

Recode

Universe: ¹⁰¹ <= MTFINJ3M <= '⁹¹' or ¹⁰¹ <= MTFPOI3M <= '⁹¹'
Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

Sources: IPDATEM, IPDATED, IPDATEY, IPDATENO, IPDATETP, IPDATEMT
Recodes: None
Keywords: injury; poisoning
Notes: This variable contains the value of IPDATEY when no imputation was done, and it contains the imputed year when the year was imputed. For more information about this variable see the Survey Description Document.

Imputed year
2003 2003
2004 2004
2005 2005

Question ID: FIJ.052_00.000  R11  Recode  Instrument Variable Name: ETFLG
Final Documentation Name: ETFLG

Recode

Universe: ¹⁰¹ <= MTFINJ3M <= '⁹¹' or ¹⁰¹ <= MTFPOI3M <= '⁹¹'
Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000

Sources: RPD
Recodes: None
Keywords: injury; poisoning; elapsed time
Notes: This variable indicates whether the elapsed time (RPD) between the date of the injury/poisoning episode and the date the injury/poisoning questions were asked is greater than the 3 month (91 days) reference period used in family level questions FIJ.010_01.000 and FIJ.020_00.000. A value greater than 91 days occurs if the injury/poisoning episode date information reported by the respondent subsequent to the family level questions is not consistent with the respondent's initial report that the injury/poisoning episode occurred during the past 3 months. For more information about this variable see the Survey Description Document.

Elapsed time flag
1 Elapsed time is > 91 days
2 Elapsed time is <= 91 days
2004 NATIONAL HEALTH INTERVIEW SURVEY
Episode
injpoep : Injuries & Poisoning
PUBLIC USE
Document Version Date: 28-Feb-06

Question ID: FIJ.052_00.000 R12 Recode Instrument Variable Name:
Final Documentation Name: BEIFLG

Recode

<table>
<thead>
<tr>
<th>Universe:</th>
<th>(01 &lt;= MTFINJ3M &lt;= '91) or (01 &lt;= MTFPOI3M &lt;= '91)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description:</td>
<td>All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01 to FIJ.028_00.000</td>
</tr>
<tr>
<td>Sources:</td>
<td>RPD; BIETD; EIETD</td>
</tr>
<tr>
<td>Recodes:</td>
<td>None</td>
</tr>
<tr>
<td>Keywords:</td>
<td>injury; poisoning; elapsed time</td>
</tr>
<tr>
<td>Notes:</td>
<td>This variable indicates if any part of the elapsed time interval is greater than the 3 month (91 days) reference period used in family level questions FIJ.010_01.000 and FIJ.020_00.000. A value greater than 91 days occurs if the injury/poisoning episode date information reported by the respondent subsequent to the family level questions is not consistent with the respondent's initial report that the injury/poisoning episode occurred during the past 3 months. For more information about this variable see the Survey Description Document.</td>
</tr>
</tbody>
</table>

Elapsed time interval boundary flag

| 1 | Only the upper boundary of the interval for elapsed time is > 91 days |
| 2 | Upper and lower boundary of the interval for elapsed time is > 91 days |
| 3 | Upper and lower boundary of the interval for elapsed time is <= 91 days |

Question ID: FIJ.065_00.000

* Do not read. Enter the number which best describes the cause of the person's injury from the list below.

<table>
<thead>
<tr>
<th>Universe:</th>
<th>(01 &lt;= MTFINJ3M &lt;= '91)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description:</td>
<td>All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000</td>
</tr>
<tr>
<td>Sources:</td>
<td>None</td>
</tr>
<tr>
<td>Recodes:</td>
<td>None</td>
</tr>
<tr>
<td>Keywords:</td>
<td>injury; motor vehicle; fall; burn</td>
</tr>
<tr>
<td>Notes:</td>
<td>None</td>
</tr>
</tbody>
</table>

Cause of injury episode

01 In a motor vehicle
02 On a bike, scooter, skateboard, skates, skis, horse, etc.
03 Pedestrian who was struck by a vehicle such as a car or bicycle
04 In a boat, train, or plane
05 Fall
06 Burned or scalded by substances such as hot objects or liquids, fire, or chemicals
07 Other
97 Refused
98 Not ascertained
99 Don't know
**2004 NATIONAL HEALTH INTERVIEW SURVEY**

**Episode**

**injpoiep : Injuries & Poisoning**

PUBLIC USE

Document Version Date: 28-Feb-06

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**Question ID:** FIJ.065_00.000  **R03**  **Recode**  **Instrument Variable Name:**

Final Documentation Name: ECAUS

**Universe:** ('01' <= MTFINJ3M <= '91') or ('01'<= MTFPOI3M <= '91')

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Sources:** ECODE_1

**Recodes:** None

**Keywords:** injury; transportation; fire; fall; poisoning; overexertion; struck by; animal; insect; cut; machinery

**Notes:** Transportation includes motor vehicle/bicycle/motorcycle/pedestrian/train/boat/airplane. This variable describes the cause of the injury/poisoning using categories based on ICD-9-CM external cause codes (E codes). See External Cause Codes included in the variable ECAUS Categories Appendix for a list of E codes found in each category.

---

**Cause of injury/poisoning based on E codes**

01  Transportation (see Notes above)
02  Fire/burn/scald related
03  Fall
04  Poisoning
05  Overexertion/strenuous movements
06  Struck by object or person
07  Animal or insect bite
08  Cut/pierce
09  Machinery
10  Other
97  Refused
98  Not ascertained
99  Don't know
In this injury, what parts of [person's] body were hurt?

Injury Universe: '01' <= MTFINJ3M <= '91'

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Sources: None

Recodes: None

Keywords: injury; body part

Notes: None

Parts of body hurt: 1st body part

01  Ankle
02  Back
03  Buttocks
04  Chest
05  Ear
06  Elbow
07  Eye
08  Face
09  Finger/thumb
10  Foot
11  Forearm
12  Groin
13  Hand
14  Head (not face)
15  Hip
16  Jaw
17  Knee
18  Lower leg
19  Mouth
20  Neck
21  Nose
22  Shoulder
23  Stomach
24  Teeth
25  Thigh
26  Toe
27  Upper arm
28  Wrist
29  Other
97  Refused
98  Not ascertained
99  Don't know
In this injury, what parts of {person's} body were hurt?

<table>
<thead>
<tr>
<th>Parts of body hurt</th>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No second response</td>
<td></td>
</tr>
<tr>
<td>01</td>
<td>Ankle</td>
<td></td>
</tr>
<tr>
<td>02</td>
<td>Back</td>
<td></td>
</tr>
<tr>
<td>03</td>
<td>Buttocks</td>
<td></td>
</tr>
<tr>
<td>04</td>
<td>Chest</td>
<td></td>
</tr>
<tr>
<td>05</td>
<td>Ear</td>
<td></td>
</tr>
<tr>
<td>06</td>
<td>Elbow</td>
<td></td>
</tr>
<tr>
<td>07</td>
<td>Eye</td>
<td></td>
</tr>
<tr>
<td>08</td>
<td>Face</td>
<td></td>
</tr>
<tr>
<td>09</td>
<td>Finger/thumb</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Foot</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Forearm</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Groin</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Hand</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Head (not face)</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Hip</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Jaw</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Knee</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Lower leg</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Mouth</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Neck</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Nose</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Shoulder</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Stomach</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Teeth</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Thigh</td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Toe</td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Upper arm</td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Wrist</td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
<td></td>
</tr>
</tbody>
</table>

Universe: ‘01’ <= MTFINJ3M <= '91'

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Sources: None

Recodes: None

Keywords: injury; body part

Notes: None
Don't know
In this injury, what parts of {person’s} body were hurt?

Universe: ‘01’ <= MTFINJ3M <= '91'

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Sources: None

Recodes: None

Keywords: injury; body part

Notes: None

Parts of body hurt: 3rd body part

00 No third response
01 Ankle
02 Back
03 Buttocks
04 Chest
05 Ear
06 Elbow
07 Eye
08 Face
09 Finger/thumb
10 Foot
11 Forearm
12 Groin
13 Hand
14 Head (not face)
15 Hip
16 Jaw
17 Knee
18 Lower leg
19 Mouth
20 Neck
21 Nose
22 Shoulder
23 Stomach
24 Teeth
25 Thigh
26 Toe
27 Upper arm
28 Wrist
29 Other
97 Refused
98 Not ascertained
Don't know
In this injury, what parts of {person's} body were hurt?

Universe: (01 <= MTFINJ <= 91)

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Parts of body hurt: 4th body part

- 00: No fourth response
- 01: Ankle
- 02: Back
- 03: Buttocks
- 04: Chest
- 05: Ear
- 06: Elbow
- 07: Eye
- 08: Face
- 09: Finger/thumb
- 10: Foot
- 11: Forearm
- 12: Groin
- 13: Hand
- 14: Head (not face)
- 15: Hip
- 16: Jaw
- 17: Knee
- 18: Lower leg
- 19: Mouth
- 20: Neck
- 21: Nose
- 22: Shoulder
- 23: Stomach
- 24: Teeth
- 25: Thigh
- 26: Toe
- 27: Upper arm
- 28: Wrist
- 29: Other
- 97: Refused
- 98: Not ascertained
In what way was [person's] [first entry--^IJBODY (text) or ^IJBODYOS] hurt? Was it a:

Universal: ('01' <= MTFINJ3M <= '91') and ('01' <= IJBODY1 <= '29')

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where a first body part was reported to be hurt.

Sources: None
Recodes: None
Keywords: injury; type of injury
Notes: None

How body part 1 was hurt: First response

01 Broken bone or fracture
02 Sprain, strain, or twist
03 Cut
04 Scrape
05 Bruise
06 Burn
07 Insect bite
08 Animal bite
09 Other
97 Refused
98 Not ascertained
99 Don't know
Question ID: FIJ.072_02.000  
Recode: none  
Instrument Variable Name: IJTYPE12  
Final Documentation Name: IJTYPE1B

In what way was {person's} [first entry--^IJBODY (text) or ^IJBODYOS] hurt? Was it a:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No second response</td>
</tr>
<tr>
<td>01</td>
<td>Broken bone or fracture</td>
</tr>
<tr>
<td>02</td>
<td>Sprain, strain, or twist</td>
</tr>
<tr>
<td>03</td>
<td>Cut</td>
</tr>
<tr>
<td>04</td>
<td>Scrape</td>
</tr>
<tr>
<td>05</td>
<td>Bruise</td>
</tr>
<tr>
<td>06</td>
<td>Burn</td>
</tr>
<tr>
<td>07</td>
<td>Insect bite</td>
</tr>
<tr>
<td>08</td>
<td>Animal bite</td>
</tr>
<tr>
<td>09</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

Universe: ('01' <= MTFINJ3M <= '91') and ('01' <= IJBODY1 <= '29')

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where a first body part was reported to be hurt
In what way was {person's} [second entry--^[I]BODY (text) or ^I]BODYOS] hurt? Was it a:

01 Broken bone or fracture
02 Sprain, strain, or twist
03 Cut
04 Scrape
05 Bruise
06 Burn
07 Insect bite
08 Animal bite
09 Other
97 Refused
98 Not ascertained
99 Don’t know
In what way was {person's} [second entry--^IJBODY (text) or ^IJBODYOS] hurt? Was it a:

| Universe:     | ('01' <= MTFINJ3M <= '91') and ('01' <= IJBODY2 <= '29') |
| Description:  | All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where a second body part was reported to be hurt |

Sources: None
Recodes: None
Keywords: injury; type of injury
Notes: None
In what way was {person's} [third entry--^IJBODY (text) or ^IJBODYOS] hurt? Was it a:

<table>
<thead>
<tr>
<th>Code</th>
<th>Injury Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Broken bone or fracture</td>
</tr>
<tr>
<td>02</td>
<td>Sprain, strain, or twist</td>
</tr>
<tr>
<td>03</td>
<td>Cut</td>
</tr>
<tr>
<td>04</td>
<td>Scrape</td>
</tr>
<tr>
<td>05</td>
<td>Bruise</td>
</tr>
<tr>
<td>06</td>
<td>Burn</td>
</tr>
<tr>
<td>07</td>
<td>Insect bite</td>
</tr>
<tr>
<td>08</td>
<td>Animal bite</td>
</tr>
<tr>
<td>09</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
2004 NATIONAL HEALTH INTERVIEW SURVEY
Episode
injpoiep : Injuries & Poisoning
PUBLIC USE
Document Version Date: 28-Feb-06

**Question ID:** FIJ.076_02.000  □ Recode  **Instrument Variable Name:** IJTYPE32
**Final Documentation Name:** IJTYPE3B

In what way was {person's} [third entry--^IJBODY (text) or ^IJBODYOS] hurt? Was it a:

| Universe: | ('01' <= MTFINJ3M <= '91') and ('01' <= IJBODY3 <= '29') |
| Sources: | None |
| Recodes: | None |
| Keywords: | injury; type of injury |
| Notes: | None |

How body part 3 was hurt: Second response

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No second response</td>
</tr>
<tr>
<td>01</td>
<td>Broken bone or fracture</td>
</tr>
<tr>
<td>02</td>
<td>Sprain, strain, or twist</td>
</tr>
<tr>
<td>03</td>
<td>Cut</td>
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<tr>
<td>04</td>
<td>Scrape</td>
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<td>08</td>
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<tr>
<td>09</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
In what way was {person’s} [fourth entry--\(^{IJBODY}\) (text) or \(^{IJBODYOS}\)] hurt? Was it a:

- **01** Broken bone or fracture
- **02** Sprain, strain, or twist
- **03** Cut
- **04** Scrape
- **05** Bruise
- **06** Burn
- **07** Insect bite
- **08** Animal bite
- **09** Other
- **97** Refused
- **98** Not ascertained
- **99** Don’t know
In what way was [person's] [fourth entry--^IJBODY (text) or ^IJBODYOS] hurt? Was it a:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No second response</td>
</tr>
<tr>
<td>01</td>
<td>Broken bone or fracture</td>
</tr>
<tr>
<td>02</td>
<td>Sprain, strain, or twist</td>
</tr>
<tr>
<td>03</td>
<td>Cut</td>
</tr>
<tr>
<td>04</td>
<td>Scrape</td>
</tr>
<tr>
<td>05</td>
<td>Bruise</td>
</tr>
<tr>
<td>06</td>
<td>Burn</td>
</tr>
<tr>
<td>07</td>
<td>Insect bite</td>
</tr>
<tr>
<td>08</td>
<td>Animal bite</td>
</tr>
<tr>
<td>09</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

Universe: \( '01' \leq MTFINJ3M \leq '91' \) and \( '01' \leq IJBODY4 \leq '29' \)

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, where a fourth body part was reported to be hurt.
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PUBLIC USE
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Question ID: FIJ.080_01.000  □ Recode  Instrument Variable Name: PPCC
Final Documentation Name: PPCC

Did {person} get MEDICAL ADVICE, TREATMENT, or FOLLOW-UP CARE for this poisoning from...

A phone call to a poison control center?

Universe: ('01' <= MTFPOI3M <= '91')
Description: All medically-consulted poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Sources: None
Recodes: None
Keywords: poisoning; poison control center
Notes: None

Where received medical care: Call to PCC

1 Yes
2 No
7 Refused
8 Not ascertained
9 Don't know

Question ID: FIJ.080_02.000  □ Recode  Instrument Variable Name: IPEV
Final Documentation Name: IPEV

Did {person} get MEDICAL ADVICE, TREATMENT, or FOLLOW-UP CARE for this injury/poisoning from...

An emergency vehicle, such as an ambulance or fire truck?

Universe: ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')
Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Sources: None
Recodes: None
Keywords: injury; poisoning; emergency vehicle
Notes: None

Where received medical care: Emergency vehicle

1 Yes
2 No
7 Refused
8 Not ascertained
9 Don't know
**Question ID:** FIJ.080_03.000  
**Recode**  
**Instrument Variable Name:** IPER  
**Final Documentation Name:** IPER

Did {person} get MEDICAL ADVICE, TREATMENT, or FOLLOW-UP CARE for this [injury/poisoning] from...

**A visit to an emergency room?**

- **Universe:** ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')
- **Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Refused</th>
<th>Not ascertained</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
</tbody>
</table>

Where received medical care: Emergency room

---

**Question ID:** FIJ.080_04.000  
**Recode**  
**Instrument Variable Name:** IPDO  
**Final Documentation Name:** IPDO

Did {person} get MEDICAL ADVICE, TREATMENT, or FOLLOW-UP CARE for this [injury/poisoning] from...

**A visit to a doctor's office or other health clinic?**

- **Universe:** ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')
- **Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Refused</th>
<th>Not ascertained</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
</tbody>
</table>

Where received medical care: Doctor's office/clinic

---
2004 NATIONAL HEALTH INTERVIEW SURVEY
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injpoiep : Injuries & Poisoning
PUBLIC USE
Document Version Date: 28-Feb-06

Question ID: FIJ.080_05.000

Did {person} get MEDICAL ADVICE, TREATMENT, or FOLLOW-UP CARE for this [injury/poisoning] from...

A phone call to a doctor, nurse, or other health care professional?

Universe: ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')
Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Sources: None
Recodes: None
Keywords: injury; poisoning; medical professional
Notes: None

Where received medical care: Call to medical prof
1 Yes
2 No
7 Refused
8 Not ascertained
9 Don't know

Question ID: FIJ.080_06.000

Did {person} get MEDICAL ADVICE, TREATMENT, or FOLLOW-UP CARE for this [injury/poisoning] from...

Any place else?

Universe: ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')
Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Sources: None
Recodes: None
Keywords: injury; poisoning; medical care
Notes: None

Where received medical care: Any place else
1 Yes
2 No
7 Refused
8 Not ascertained
9 Don't know
### Question ID: FIJ.090_00.000  
**Recode** | **Instrument Variable Name:** IPHOSP  
**Final Documentation Name:** IPHOSP  

**{Were/Was} {person} hospitalized for at least one night as a result of this [injury/poisoning]?**  

**Universe:** \((01' <= \text{MTFINJ3M} <= '91)\) or \((01' <= \text{MTFPOI3M} <= '91)\) and IPVER ne '1'  

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000  

**Sources:** None  

**Recodes:** None  

**Keywords:** injury; poisoning; hospitalized  

**Notes:** None  

Hospitalized overnight due to injury/poisoning episode  
1. Yes  
2. No  
7. Refused  
8. Not ascertained  
9. Don't know  

### Question ID: FIJ.091_00.000  
**Recode** | **Instrument Variable Name:** IPIHNO  
**Final Documentation Name:** IPIHNO  

**How many nights {were/was} {person} in the hospital?**  

**Universe:** \('(01'<= \text{MTFINJ3M} <= '91)\) or \('(01'<= \text{MTFPOI3M} <= '91)\) and IPHOSP = '1'  

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, resulting in hospitalization  

**Sources:** None  

**Recodes:** None  

**Keywords:** injury; poisoning; hospital  

**Notes:** None  

Number of nights in the hospital  
01-94 1-94 nights  
95 95+ nights  
97 Refused  
98 Not ascertained  
99 Don't know
Did this accident occur on a public highway, street, or road? Do not include non-traffic areas such as driveways or parking lots.

Universe: \((01 \leq MTFINJ3M \leq 91) \text{ and } ICAUS \in \{01',02',03'\} \text{ and } IPVER \neq '1'\)

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, that occurred while in a motor vehicle; while on a bike, scooter, skateboard, skis, horse, etc.; or as a pedestrian struck by a vehicle.

Sources: None

Recodes: None

Keywords: injury; traffic related

Notes: None

Traffic-related injury

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>8</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

{Were/Was} {person} injured as:

Universe: \'(01' \leq MTFINJ3M \leq '91') \text{ and } ICAUS \in \{01',02',03'\} \text{ and } IPVER \neq '1'\)

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, that occurred while in a motor vehicle; while on a bike, scooter, skateboard, skis, horse, etc.; or as a pedestrian struck by a vehicle.

Sources: None

Recodes: None

Keywords: injury; driver; passenger; pedestrian; rider

Notes: None

Injured as . . .

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>The driver of a motor vehicle</td>
</tr>
<tr>
<td>2</td>
<td>A passenger in a motor vehicle</td>
</tr>
<tr>
<td>3</td>
<td>A pedestrian</td>
</tr>
<tr>
<td>4</td>
<td>A bicycle rider or tricycle rider</td>
</tr>
<tr>
<td>5</td>
<td>The rider of a scooter, skateboard, skates, or other non-motorized vehicle</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>8</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
What type of vehicle {were/was} {person} in?

- **Universe:** '01' <= MTFINJ3M <= '91' and ICAUS IN('01','02','03') and IMVWHO IN('1','2')
- **Description:** All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, that occurred while a driver or passenger of a vehicle

- **Sources:** None
- **Recodes:** None
- **Keywords:** injury; vehicle
- **Notes:** None

Type of vehicle injured person was in:

- 01 Passenger car
- 02 Passenger truck, such as a pickup truck, van, or SUV
- 03 Bus
- 04 Large commercial truck, such as a semi-truck, big rig, or 18 wheeler
- 05 Motorcycle (including mopeds and minibikes)
- 06 All terrain vehicle or ski/snow-mobile
- 07 Farm equipment (such as a tractor)
- 08 Industrial or construction vehicle
- 09 Other
- 97 Refused
- 98 Not ascertained
- 99 Don’t know
2004 NATIONAL HEALTH INTERVIEW SURVEY
Episode
injpoep : Injuries & Poisoning
PUBLIC USE
Document Version Date: 28-Feb-06

Question ID: FIJ.112_00.000  □ Recode  Instrument Variable Name: ISBELT
Final Documentation Name: ISBELT

{Were/Was} {person} restrained at the time of the accident?

Universe: ('01' <= MTFINJ3M <= '91') and ICAUS IN ('01','02','03') and IMVWHO IN ('1','2') and IMVTYP IN ('01','02','04')

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, that occurred while a driver or passenger of a car or truck

Restrained at time of accident

1  Yes
2  No
7  Refused
8  Not ascertained
9  Don't know

Question ID: FIJ.113_00.000  □ Recode  Instrument Variable Name: IHELMT
Final Documentation Name: IHELMT

{Were/Was} {person} wearing a helmet at the time of the accident?

Universe: ('01' <= MTFINJ3M <= '91') and ICAUS IN ('01','02','03') and (IMVWHO IN ('4','5') or IMVTYP IN ('05','06'))

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, that occurred while riding a bicycle or tricycle; a scooter, skateboard, skates, or other non-motorized vehicle; a motorcycle; or an all terrain vehicle or ski/snowmobile

Wearing a helmet at the time of the accident

1  Yes
2  No
7  Refused
8  Not ascertained
9  Don't know
How did {person} fall? Anything else?

Universe:  

Description:  All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, due to a fall

Sources:  None

Recodes:  None

Keywords:  injury; fall

Notes:  None

How person fell: First response

01  Stairs, steps, or escalator
02  Floor or level ground
03  Curb (including sidewalk)
04  Ladder or scaffolding
05  Playground equipment
06  Sports field, court, or rink
07  Building or other structure
08  Chair, bed, sofa, or other furniture
09  Bathtub, shower, toilet, or commode
10  Hole or other opening
11  Other
97  Refused
98  Not ascertained
99  Don't know
How did {person} fall? Anything else?

Universe:  

\( '01' \leq MTFINJ3M \leq '91' \) and ICAUS = '05' and IPVER ne '1'

Description: All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, due to a fall

Sources: None

Recodes: None

Keywords: injury; fall

Notes: None

How person fell: Second response

00  No second response
01  Stairs, steps, or escalator
02  Floor or level ground
03  Curb (including sidewalk)
04  Ladder or scaffolding
05  Playground equipment
06  Sports field, court, or rink
07  Building or other structure
08  Chair, bed, sofa, or other furniture
09  Bathtub, shower, toilet, or commode
10  Hole or other opening
11  Other
97  Refused
98  Not ascertained
99  Don't know
### What caused [person] to fall?

**Universe:**  
ʻ01ʻ <= MTFINJ3M <= ʻ91ʻ and ICAUS = ʻ05ʻ and IPVER ne ʻ1ʻ

**Description:**  
All medically-consulted injury episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000, due to a fall

**Sources:**  
None

**Recodes:**  
None

**Keywords:**  
injury; fall

**Notes:**  
None

#### Cause of fall

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Slipping or tripping</td>
</tr>
<tr>
<td>2</td>
<td>Jumping or diving</td>
</tr>
<tr>
<td>3</td>
<td>Bumping into an object or another person</td>
</tr>
<tr>
<td>4</td>
<td>Being shoved or pushed by another person</td>
</tr>
<tr>
<td>5</td>
<td>Losing balance or having dizziness (becoming faint or having a seizure)</td>
</tr>
<tr>
<td>6</td>
<td>Other</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>8</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
What did {person’s} poisoning result from?

Universe: `'01' <= MTFPOI3M <= '91') and IPVER ne '1'

Description: All medically-consulted poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

Sources: None

Recodes: None

Keywords: poisoning

Notes: None

Cause of poisoning episode

1. Swallowing a drug or medical substance mistakenly or in overdose
2. Swallowing or touching a harmful solid or liquid substance
3. Inhaling harmful gases or vapors
4. Eating a poisonous plant or other substance mistaken for food
5. Being bitten by a poisonous animal
6. Other, please specify
7. Refused
8. Not ascertained
9. Don't know
### Activity at time of inj/pois episode: First response

<table>
<thead>
<tr>
<th>Code</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Driving or riding in a motor vehicle</td>
</tr>
<tr>
<td>02</td>
<td>Working at a paid job</td>
</tr>
<tr>
<td>03</td>
<td>Working around the house or yard</td>
</tr>
<tr>
<td>04</td>
<td>Attending school</td>
</tr>
<tr>
<td>05</td>
<td>Unpaid work (such as volunteer work)</td>
</tr>
<tr>
<td>06</td>
<td>Sports and exercise</td>
</tr>
<tr>
<td>07</td>
<td>Leisure activity (excluding sports)</td>
</tr>
<tr>
<td>08</td>
<td>Sleeping, resting, eating, or drinking</td>
</tr>
<tr>
<td>09</td>
<td>Cooking</td>
</tr>
<tr>
<td>10</td>
<td>Being cared for (hands-on care from other person)</td>
</tr>
<tr>
<td>11</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
What activity {were/was} {person} involved in at the time of the [injury/poisoning]?

**Universe:**
```
(('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91')) and IPVER ne '1'
```

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000

**Activity at time of inj/pois episode: Second response**

<table>
<thead>
<tr>
<th>Code</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No second response</td>
</tr>
<tr>
<td>01</td>
<td>Driving or riding in a motor vehicle</td>
</tr>
<tr>
<td>02</td>
<td>Working at a paid job</td>
</tr>
<tr>
<td>03</td>
<td>Working around the house or yard</td>
</tr>
<tr>
<td>04</td>
<td>Attending school</td>
</tr>
<tr>
<td>05</td>
<td>Unpaid work (such as volunteer work)</td>
</tr>
<tr>
<td>06</td>
<td>Sports and exercise</td>
</tr>
<tr>
<td>07</td>
<td>Leisure activity</td>
</tr>
<tr>
<td>08</td>
<td>Sleeping, resting, eating, or drinking</td>
</tr>
<tr>
<td>09</td>
<td>Cooking</td>
</tr>
<tr>
<td>10</td>
<td>Being cared for (hands on care from other person)</td>
</tr>
<tr>
<td>11</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
**Location at time of inj/pois episode: First response**

<table>
<thead>
<tr>
<th>Location</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Home (inside)</td>
</tr>
<tr>
<td>02</td>
<td>Home (outside)</td>
</tr>
<tr>
<td>03</td>
<td>School (not residential)</td>
</tr>
<tr>
<td>04</td>
<td>Child care center or preschool</td>
</tr>
<tr>
<td>05</td>
<td>Residential institution (exclude hospital)</td>
</tr>
<tr>
<td>06</td>
<td>Health care facility (include hospital)</td>
</tr>
<tr>
<td>07</td>
<td>Street or highway</td>
</tr>
<tr>
<td>08</td>
<td>Sidewalk</td>
</tr>
<tr>
<td>09</td>
<td>Parking lot</td>
</tr>
<tr>
<td>10</td>
<td>Sport facility, athletic field, or playground</td>
</tr>
<tr>
<td>11</td>
<td>Shopping center, restaurant, store, bank, gas station, or other place of business</td>
</tr>
<tr>
<td>12</td>
<td>Farm</td>
</tr>
<tr>
<td>13</td>
<td>Park or recreation area (include bike or jog path)</td>
</tr>
<tr>
<td>14</td>
<td>River, lake, stream, or ocean</td>
</tr>
<tr>
<td>15</td>
<td>Industrial or construction area</td>
</tr>
<tr>
<td>16</td>
<td>Other public building</td>
</tr>
<tr>
<td>17</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
Where {were/was} {person} when the [injury/poisoning] happened?

<table>
<thead>
<tr>
<th>Code</th>
<th>Location Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No second response</td>
</tr>
<tr>
<td>01</td>
<td>Home (inside)</td>
</tr>
<tr>
<td>02</td>
<td>Home (outside)</td>
</tr>
<tr>
<td>03</td>
<td>School (not residential)</td>
</tr>
<tr>
<td>04</td>
<td>Child care center or preschool</td>
</tr>
<tr>
<td>05</td>
<td>Residential institution (exclude hospital)</td>
</tr>
<tr>
<td>06</td>
<td>Health care facility (include hospital)</td>
</tr>
<tr>
<td>07</td>
<td>Street or highway</td>
</tr>
<tr>
<td>08</td>
<td>Sidewalk</td>
</tr>
<tr>
<td>09</td>
<td>Parking lot</td>
</tr>
<tr>
<td>10</td>
<td>Sport facility, athletic field, or playground</td>
</tr>
<tr>
<td>11</td>
<td>Shopping center, restaurant, store, bank, gas station, or other place of business</td>
</tr>
<tr>
<td>12</td>
<td>Farm</td>
</tr>
<tr>
<td>13</td>
<td>Park or recreation area (include bike or jog path)</td>
</tr>
<tr>
<td>14</td>
<td>River, lake, stream, or ocean</td>
</tr>
<tr>
<td>15</td>
<td>Industrial or construction area</td>
</tr>
<tr>
<td>16</td>
<td>Other public building</td>
</tr>
<tr>
<td>17</td>
<td>Other</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>98</td>
<td>Not ascertained</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
Question ID: FIJ.170_00.000  □ Recode  Instrument Variable Name: IPEMP  
Final Documentation Name: IPEMP  

At the time of this [injury/poisoning], {were/was} {person} employed full-time, part-time, or not employed?

Universe:  

Universe:  ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91') and AGE GE '013' and IPVER ne '1'

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 to persons 13 years of age or older

Sources: None  
Recodes: None  
Keywords: injury; poisoning; employed  
Notes: None  

Employed at the time of the injury/poisoning episode

1  Full-time  
2  Part-time  
3  Not employed  
7  Refused  
8  Not ascertained  
9  Don't know  

Question ID: FIJ.171_00.000  □ Recode  Instrument Variable Name: IPWKLS  
Final Documentation Name: IPWKLS  

As a result of this [injury/poisoning], how many days of work did {person} miss?

Universe:  

Universe:  ('01' <= MTFINJ3M <= '91') or ('01' <= MTFPOI3M <= '91') and AGE GE '013' and IPEMP IN('1','2')

Description: All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 to persons 13 years of age or older, where the person was employed at the time

Sources: None  
Recodes: None  
Keywords: injury; poisoning; work missed  
Notes: None  

Days of work missed

1  None  
2  Less than one day  
3  One to five days  
4  Six or more days  
7  Refused  
8  Not ascertained  
9  Don't know
## Question ID: FIJ.180_00.000

**Recode Instrument Variable Name:** IPSTU  
**Final Documentation Name:** IPSTU

**At the time of this [injury/poisoning], {were/was} {person} a full-time student, part-time student or not a student?**

**Universe:** 
\[
(('01' <= MTFINJ3M <= '91') \text{ or } ('01' <= MTFPOI3M <= '91')) \text{ and } AGE GE '005' \text{ and } IPVER ne '1'
\]

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 to persons 5 years of age or older

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; student

**Notes:** None

<table>
<thead>
<tr>
<th>Student at the time of the injury/poisoning episode</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Full-time</td>
</tr>
<tr>
<td>2 Part-time</td>
</tr>
<tr>
<td>3 Not a student</td>
</tr>
<tr>
<td>7 Refused</td>
</tr>
<tr>
<td>8 Not ascertained</td>
</tr>
<tr>
<td>9 Don't know</td>
</tr>
</tbody>
</table>

## Question ID: FIJ.181_00.000

**Recode Instrument Variable Name:** IPSCLS  
**Final Documentation Name:** IPSCLS

**As a result of this [injury/poisoning], how many days of school did {person} miss?**

**Universe:** 
\[
(('01' <= MTFINJ3M <= '91') \text{ or } ('01' <= MTFPOI3M <= '91')) \text{ and } (AGE GE '005') \text{ and } (IPSTU IN('1','2'))
\]

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 to persons 5 years of age or older, where the person was a student at the time

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; school missed

**Notes:** None

<table>
<thead>
<tr>
<th>Days of school missed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 None</td>
</tr>
<tr>
<td>2 Less than one day</td>
</tr>
<tr>
<td>3 One to five days</td>
</tr>
<tr>
<td>4 Six or more days</td>
</tr>
<tr>
<td>7 Refused</td>
</tr>
<tr>
<td>8 Not ascertained</td>
</tr>
<tr>
<td>9 Don't know</td>
</tr>
</tbody>
</table>
### Episode

**injpoiep : Injuries & Poisoning**

**PUBLIC USE**

**Document Version Date: 28-Feb-06**

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FIJ.181_01.000</th>
<th>R14</th>
<th>Recode</th>
<th>Instrument Variable Name:</th>
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<tbody>
<tr>
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<td>Final Documentation Name: ICD9_1</td>
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<td></td>
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<td></td>
</tr>
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<td>Description:</td>
<td>All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000</td>
<td></td>
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<td>Sources:</td>
<td>None</td>
<td></td>
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<td>Recodes:</td>
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<tr>
<td>Keywords:</td>
<td>injury; poisoning; ICD-9-CM</td>
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<tr>
<td>Notes:</td>
<td>ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.</td>
<td></td>
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</tr>
</tbody>
</table>

**ICD-9-CM diagnosis code**

80000-9999  ICD-9-CM codes

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FIJ.181_02.000</th>
<th>R15</th>
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<tr>
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<td></td>
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<td>Final Documentation Name: ICD9_2</td>
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<tr>
<td>Universe:</td>
<td>('01' &lt;= MTFINJ3M &lt;= '91') or ('01' &lt;= MTFPOI3M &lt;= '91')) and there was more than one injury or poisoning during the episode</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Description:</td>
<td>All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than one injury or poisoning during the episode</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sources:</td>
<td>None</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recodes:</td>
<td>None</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Keywords:</td>
<td>injury; poisoning; ICD-9-CM</td>
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</tr>
<tr>
<td>Notes:</td>
<td>ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ICD-9-CM diagnosis code**

0010-9999  ICD-9-CM codes
### Question ID: FIJ.181_03.000 R16

#### Recode

#### Instrument Variable Name: Final Documentation Name: ICD9_3

#### Universe:

\[(\text{MTFINJ3M} \leq 91) \text{ or } (\text{MTFPOI3M} \leq 91)\] and there were more than two injuries or poisonings during the episode

#### Description:

All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than two injuries or poisonings during the episode

#### Sources:

None

#### Recodes:

None

#### Keywords:

injury; poisoning; ICD-9-CM

#### Notes:

ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.

#### ICD-9-CM diagnosis code

0010-9999

### Question ID: FIJ.181_04.000 R17

#### Recode

#### Instrument Variable Name: Final Documentation Name: ICD9_4

#### Universe:

\[(\text{MTFINJ3M} \leq 91) \text{ or } (\text{MTFPOI3M} \leq 91)\] and there were more than three injuries or poisonings during the episode

#### Description:

All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than three injuries or poisonings during the episode

#### Sources:

None

#### Recodes:

None

#### Keywords:

injury; poisoning; ICD-9-CM

#### Notes:

ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.

#### ICD-9-CM diagnosis code

0010-9999

### ICD-9-CM diagnosis code

0010-9999

ICD-9-CM codes
**2004 NATIONAL HEALTH INTERVIEW SURVEY**  
**Episode**  
**injpoiep : Injuries & Poisoning**  
**PUBLIC USE**  
**Document Version Date: 28-Feb-06**

**Question ID:** FIJ.181_05.000  
**Recode**  
**Instrument Variable Name:**  
**Final Documentation Name:** ICD9_5

**Universe:** 

t((01' <= MTFINJ3M <= '91') or (01' <= MTFPOI3M <= '91')) and there were more than four injuries or poisonings during the episode

**Description:**  
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than four injuries or poisonings during the episode

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; ICD-9-CM

**Notes:** ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.

---

**ICD-9-CM diagnosis code**

0010-9999 ICD-9-CM codes

---

**Question ID:** FIJ.181_06.000  
**Recode**  
**Instrument Variable Name:**  
**Final Documentation Name:** ICD9_6

**Universe:** 

t((01' <= MTFINJ3M <= '91') or (01' <= MTFPOI3M <= '91')) and there were more than five injuries or poisonings during the episode

**Description:**  
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than five injuries or poisonings during the episode

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; ICD-9-CM

**Notes:** ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.

---

**ICD-9-CM diagnosis code**

0010-9999 ICD-9-CM codes
### Question ID: FIJ.181_07.000 R20

**Universe:**
\[
(('01' <= MTFINJ3M <= '91') \text{ or } ('01' <= MTFPOI3M <= '91')) \text{ and there were more than six injuries or poisonings during the episode}
\]

**Description:**
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than six injuries or poisonings during the episode.

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; ICD-9-CM

**Notes:**
ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.

### ICD-9-CM diagnosis code

0010-9999 ICD-9-CM codes

### Question ID: FIJ.181_08.000 R21

**Universe:**
\[
(('01' <= MTFINJ3M <= '91') \text{ or } ('01' <= MTFPOI3M <= '91')) \text{ and there were more than seven injuries or poisonings during the episode}
\]

**Description:**
All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than seven injuries or poisonings during the episode.

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; ICD-9-CM

**Notes:**
ICD-9-CM codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of ICD-9-CM codes.

### ICD-9-CM diagnosis code

0010-9999 ICD-9-CM codes
### Episode

**injpoiep** : Injuries & Poisoning

**PUBLIC USE**

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<th>Recode</th>
<th>Instrument Variable Name: ECODE_1</th>
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<td></td>
<td>('01' &lt;= MTFINJ3M &lt;= '91') or ('01' &lt;= MTFPOI3M &lt;= '91')</td>
</tr>
<tr>
<td><strong>Description:</strong></td>
<td></td>
<td></td>
<td>All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000</td>
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<td><strong>Sources:</strong></td>
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<td><strong>Recodes:</strong></td>
<td>ECAUS</td>
<td></td>
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<tr>
<td><strong>Keywords:</strong></td>
<td>injury; poisoning; E code</td>
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<tr>
<td><strong>Notes:</strong></td>
<td>External cause codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of E codes.</td>
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**ICD-9-CM external cause code**

- E8000- E codes
- E999

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<th>Recode</th>
<th>Instrument Variable Name: ECODE_2</th>
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<td>(('01' &lt;= MTFINJ3M &lt;= '91') or ('01' &lt;= MTFPOI3M &lt;= '91')) and there was more than one external cause for the episode</td>
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<tr>
<td><strong>Description:</strong></td>
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<td>All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than one external cause for the episode</td>
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<td><strong>Sources:</strong></td>
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<td><strong>Recodes:</strong></td>
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<tr>
<td><strong>Keywords:</strong></td>
<td>injury; poisoning; E code</td>
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</tr>
<tr>
<td><strong>Notes:</strong></td>
<td>External cause codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of E codes.</td>
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**ICD-9-CM external cause code**

- E8000- E codes
- E999
### 2004 NATIONAL HEALTH INTERVIEW SURVEY
**Episode**

**injpoiep** : Injuries & Poisoning

**PUBLIC USE**

Document Version Date: 28-Feb-06

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<th>FIJ.181_30.000</th>
<th>Recode</th>
<th>R24</th>
<th>Recode Instrument Variable Name:</th>
<th>Final Documentation Name: ECODE_3</th>
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**Universe:**

\(('01' \leq MTFINJ3M \leq '91') \text{ or } ('01' \leq MTFPOI3M \leq '91')\) and there were more than two external causes for the episode

**Description:** All medically-consulted injury/poisoning episodes that reportedly occurred during the past 3 months based on responses to family level questions FIJ.010_01.000 to FIJ.028_00.000 that had more than two external causes for the episode

**Sources:** None

**Recodes:** None

**Keywords:** injury; poisoning; E code

**Notes:** External cause codes were assigned according to responses given to questions FIJ.060_00.000 to FIJ.079_00.000 and FIJ.109_00.000 to FIJ.160_02.000. See the ICD-9-CM Code Book for text descriptions of E codes.

**ICD-9-CM external cause code**

- **E8000-** E codes
- **E999**

---
<table>
<thead>
<tr>
<th>ECAUS Category</th>
<th>External Cause Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transportation</td>
<td>E810.0 to E819.9, E958.5, E988.5, E800.3, E801.3, E802.3, E803.3, E804.3, E805.3, E806.3, E807.3, E820.6, E821.6, E822.6, E823.6, E824.6, E825.6, E826.1, E826.9, E827.1, E828.1, E829.1, E800.2, E801.2, E802.2, E803.2, E804.2, E805.2, E806.2, E807.2, E820.7, E821.7, E822.7, E823.7, E824.7, E825.7, E826.0, E827.0, E828.0, E829.0, E800.0, E801.0, E802.0, E803.0, E804.0, E805.0, E806.0, E807.0, E800.1, E801.1, E802.1, E803.1, E804.1, E805.1, E806.1, E807.1, E800.8, E801.8, E802.8, E803.8, E804.8, E805.8, E806.8, E807.8, E800.9, E801.9, E802.9, E803.9, E804.9, E805.9, E806.9, E807.9, E820.0, E821.0, E822.0, E823.0, E824.0, E825.0, E820.1, E821.1, E822.1, E823.1, E824.1, E825.1, E820.2, E821.2, E822.2, E823.2, E824.2, E825.2, E820.3, E821.3, E822.3, E823.3, E824.3, E825.3, E820.4, E821.4, E822.4, E823.4, E824.4, E825.4, E820.5, E821.5, E822.5, E823.5, E824.5, E825.5, E820.8, E821.8, E822.8, E823.8, E824.8, E825.8, E820.9, E821.9, E822.9, E823.9, E824.9, E825.9, E826.2, E826.3, E826.4, E826.5, E826.6, E826.7, E826.8, E827.2, E827.3, E827.4, E827.5, E827.6, E827.7, E827.8, E827.9, E828.2, E828.3, E828.4, E828.5, E828.6, E828.7, E828.8, E828.9, E829.2, E829.3, E829.4, E829.5, E829.6, E829.7, E829.8, E829.9, E831.0 to E831.9, E833.0 to E845.9, E958.6, E968.5, E988.6, E825, E826, E828</td>
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<tr>
<td>Fire/burn/scald related</td>
<td>E890.0 to E899, E924.0 to E924.9, E958.1, E958.2, E958.7, E961, E968.0, E968.3, E979.3, E988.1, E988.2, E988.7</td>
</tr>
</tbody>
</table>
### External Cause Codes Included in Variable ECAUS Categories

**Appendix – 1**

#### 2004 National Health Interview Survey

**Injury/Poisoning Episode File**

<table>
<thead>
<tr>
<th>ECAUS Category</th>
<th>External Cause Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall</td>
<td>E880.0 to E886.9, E888, E888.0, E888.1, E888.8, E888.9, E957.0 to E957.9, E968.1, E987.0 to E987.9</td>
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<tr>
<td>Poisoning</td>
<td>E850.0 to E869.9, E950.0 to E952.9, E962.0 to E962.9, E980.0 to E982.9, E972</td>
</tr>
<tr>
<td>Overexertion/strenuous movements</td>
<td>E927</td>
</tr>
<tr>
<td>Struck by object or person</td>
<td>E916 to E917.9, E960.0, E968.2, E973, E975</td>
</tr>
<tr>
<td>Animal or insect bite</td>
<td>E905.0, E905.1, E905.2, E905.3, E905.4, E905.5, E905.6, E905.9, E906.0, E906.1, E906.2, E906.3, E906.4, E906.5, E906.9</td>
</tr>
<tr>
<td>Cut/pierce</td>
<td>E920.0 to E920.9, E956, E966, E986, E974</td>
</tr>
<tr>
<td>Machinery</td>
<td>E919.0 to E919.9</td>
</tr>
<tr>
<td>Other</td>
<td>All E codes not listed above</td>
</tr>
</tbody>
</table>