



Public reporting burden for this collection of information is estimated to average 07 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0584). Do not return the completed form to this address.

OMB#: 0925-0584  
Exp. 2/28/2011

# HCHS/SOL Occupation Classification and Exposures Questionnaire

ID NUMBER:

FORM CODE: OCE  
VERSION: A 8/23/07

Contact Occasion

SEQ #

Acrostic: \_\_\_\_\_

## ADMINISTRATIVE INFORMATION

0a. Completion Date:

/  /   
Month Day Year

0b. Staff ID:

**Instructions:** Enter the answer given by the participant for each response. The special value, "Q", is allowed for cases where the response 'Don't know/refused' is not listed as an option.

## A. Current Employment Status

1. Are you retired?

No 0  → **GO TO QUESTION 4**  
Yes 1

2. In what year did you retire?

3. Before you retired, in what job did you work the majority of hours per week?

\_\_\_\_\_ Occupation

Occupation Code (Select occupation code from list A)

4. Are you a...?

	No	Yes
a. homemaker (i.e. care for family home)	0 <input type="checkbox"/>	1 <input type="checkbox"/>
b. student	0 <input type="checkbox"/>	1 <input type="checkbox"/>

5. Please indicate your current employment status. (Mark only one)

Employed full time (>35 hours/week in one job or more than one job) 1

Employed part time (≤35 hours/week) 2

Not currently employed 3  → **GO TO QUESTION 28**

6. How many months in a year did you work in the past year?

Months

7. In a typical week, how many days do you go to work per week?

Number of days per week

8. How many hours does your work day usually last at your job(s)?

Hours

9. On a typical day, do you have a regular work schedule?

No 0  → **GO TO QUESTION 12**  
Yes 1

10. When do you usually begin work?   :   \_\_ \_\_  
am / pm

11. When do you usually end work?   :   \_\_ \_\_  
am / pm

12. How many days per month do you work extra hours beyond your usual schedule?  
  Days per month

13. Which of the following best describes your usual work schedule? (Mark only one)

- Day shift 1
- Afternoon shift 2
- Night shift 3
- Split shift 4
- Irregular shift/on-call 5
- Rotating shift 6

14. At your current job(s), do you ever work the late night shift (after midnight)?  
No 0  → **GO QUESTION 16**  
Yes 1

15. Do you work the late night shift (after midnight)...?  
Usually 1   
Sometimes 2   
On a rotating schedule 3  (Please specify): \_\_\_\_\_

**B. Current Occupation(s)**

16. In what job do you currently work the majority of your work hours per week?  
\_\_\_\_\_ Occupation

Occupation Code (Select occupation code from list A)

17. How many hours per week do you work at that job?   Number of hours/week

18. Do you have any other job(s) that you work at in addition to the job that you work the majority of hours per week?

No 0  → **GO TO QUESTION 21**  
Yes 1

19. How many hours per week do you work at that job?   Number of hours/week

20. What do you do in that job? \_\_\_\_\_ Occupation

Occupation Code (Select occupation code from list A)

**C. Occupational Exposures – Current Job(s)**

21. At the job you currently work the majority of your work hours per week, how often is it noisy (you need to speak in a raised voice or louder to be heard when a person is two feet away)?

- None of the time 1
- 25% of the time 2
- 50% 3
- 75% 4
- 100% 5
- Occasionally 6
- Don't know 9

22. At the job you currently work the majority of your work hours per week, how often do you wear hearing (ear) protection?

- None of the time 1
- 25% of the time 2
- 50% 3
- 75% 4
- 100% 5
- Occasionally 6
- Don't know 9

23. At the job you currently work the majority of your work hours per week, how often are you exposed to any type of organic solvents, for example styrene, trichloroethylene, toluene, or xylene?

- None of the time 1
- 25% of the time 2
- 50% 3
- 75% 4
- 100% 5
- Occasionally 6
- Don't know 9

24. At the job you currently work the majority of your work hours per week, how often are you exposed to metals such as manganese, lead, or mercury?

- None of the time 1
- 25% of the time 2
- 50% 3
- 75% 4
- 100% 5
- Occasionally 6
- Don't know 9

25. In your current job(s) are you exposed to vapors, gas, dust or fumes at work?

- No 0  → **GO TO QUESTION 27**
- Yes 1

26. How often do you wear a respirator while you are at your current job(s)?

- None of the time 1
- 25% of the time 2
- 50% 3
- 75% 4
- 100% 5
- Occasionally 6
- Don't know 9





IDNUMBER:									FORM CODE: OCE	Contact			SEQ #		
									VERSION: A 8/23/07	Occasion					

**List A: Occupational Codes for Question 3, 15, 19, and 27**

- 01    **Senior professional/technical worker** (doctor, professor, lawyer, architect, engineer)
- 02    **Junior professional/Technical worker** (midwife, nurse, teacher, editor, photographer)
- 03    **Administrator/executive/manager** (working proprietor, government official, section chief, department or bureau director, administrative cadre, village leader)
- 04    **Office staff** (secretary, office helper)
- 05    **Farmer, fisherman, hunter**
- 06    **Skilled worker** (foreman, group leader, craftsman)
- 07    **Non-skilled worker** (ordinary laborer, construction, yard, migrant laborer)
- 08    **Army officer, police officer**
- 09    **Ordinary soldier, policeman**
- 10    **Driver**
- 11    **Service worker** (housekeeper, cook, waiter, doorkeeper, hairdresser, counter salesperson, launderer, child care worker)
- 12    **Athlete, actor, musician**
- 13    **Other**
- 99    **Don't know/refused**