



# HCHS/SOL Question by Question Instructions, HOE(S) – Years 13-14-15-16

Updated on 1/25/2024

## HOE(S) (Hospitalized and Emergency Department Events)

The goal of this section is to record all the episodes where the participant was admitted to the hospital or seen at an emergency department. Although the more technically correct term for an emergency medical facility is “emergency department”, the most commonly used term will likely be “emergency room.” For the purpose of this section, consider an emergency department and emergency room as equivalent.

For the purpose of this section, admission to the hospital includes any stay in the hospital even if it less than 24 hours and not overnight. Visits to a physician’s offices or clinics located in a hospital should not be recorded as an admission to the hospital. Outpatient visits should not be included as either hospital admissions or emergency department visits.

When introducing this section, take care to clearly communicate that the time focus of the question is since the last SOL study contact with the participant.

English: “*The following questions are about any hospitalizations or visits to an emergency room you may have had since our last telephone interview with you on (date).*”

Spanish: “*La siguiente serie de preguntas trata sobre hospitalizaciones o visitas a la sala de emergencia en alguna ocasión desde su última entrevista telefónica el (date).*”

**Q3** Since our last telephone interview with you on (date), have you at any time been admitted to a hospital or seen in an emergency room?  
This question asks the participant to recall hospitalizations in acute or chronic care facilities, such as hospitals. It also asks the participant to recall visits to an emergency room. Stress that if there were several hospitalizations or emergency room visits since their last telephone interview on (date) that you would like to ask some questions about each of these separately, starting with the first occurrence since their last telephone interview.

If the participant or alternate responds “No” then the rest of this section will be skipped. If the participant responds that they are unsure, probe to find out if there is anything in the question that the participant didn’t understand. If the participant is still unsure, or if using an alternate respondent who is uncertain, then record “UNSURE” and the rest of this section will be skipped. If the participant or alternate respondent answers that the participant has been admitted to the hospital or seen at an emergency room, then go to Q4.

*“The next few questions are about one event. If there was more than one, we would like to talk about each one separately, let’s start with the first event since our last telephone interview with you on (date).”*

**Q4** Was this visit to the emergency room only, a hospital admission only, or a visit to the emergency room that resulted in being admitted to the hospital?

This question asks the participant to identify whether the event was a visit to an emergency room, a hospital admission, or both. If a participant reports that s/he went to an emergency room, which led to an admission to the hospital, then record this as

BOTH. If a participant went to an emergency room and then was released, record this response as EMERGENCY ROOM. If the participant indicates that s/he was admitted to a hospital without first going to the emergency room, record HOSPITAL ADMISSION.

An emergency room (ER) or emergency department (ED) for the purposes of this study is defined as a hospital department with a 24-hour ambulance bay where patients are treated for a variety of conditions and then sent home within a relatively short period of time. Generally, if a participant has an “Emergency Room Only” visit, they will arrive at the ED, be seen by a physician, be diagnosed and/or treated, and be sent home in less than 24 hours. However, an ED visit stay can last as long as 48 hours. The participant may be moved from the ED to radiology or another department for testing, but they will be returned to the ED and sent home from there.

A “Hospital Admission Only” visit is when a participant is taken directly to a hospital room on an acute care unit that is not in or connected to the ED, is formally “admitted” to the hospital, and spends at least one night. This can occur as a direct admit from a doctor’s office or clinic or can occur for overnight care following planned surgery. An example is an overnight stay after placement of a pacemaker, where the patient presented to the surgery center from home, had the procedure, and was taken directly to a unit bed.

**Please note** that in the context of hospitalizations for HCHS, an “acute care unit” means a hospital unit/section where the patient is monitored and actively treated for their condition. Acute care units include intensive care, medical and surgical units, neurological units, etc.

Non-acute care units in a hospital include inpatient hospice and rehabilitation units. Non-hospital stays at outpatient hospice, rehabilitation, or skilled nursing care facilities, psychiatric hospitals or any other type of care facility that does not have an ambulance bay and ED department are not considered a hospitalization. Treatment received in a doctor’s office, walk-in clinic and outpatient/day surgery are not considered an ED visit or hospitalization. Answer “No” on Q4 if patient was admitted to any of these types of facilities or units or seen in an outpatient setting.

ED observation or “observation stays” are considered an “Emergency Room Only” visit.

A “Both” visit is when a participant arrives at the hospital and is seen in the ED first, then later transferred to a bed on an acute care unit and spends the night. This visit is considered “Both” an ED visit and a hospital admission.

If the participant confidently answers Q4, record their answer. If they are not sure if the visit was emergency department only or if they were admitted to the hospital, please gently probe to try and focus the answer. Did they stay in or near the emergency department (except for tests)? Were they taken on a gurney or wheelchair to another floor in the hospital with new nurses and doctors to their own (or a shared) room with a door? It may be possible to help clarify the nature of the visit in this way.

HCHS/SOL records the occurrence of all hospitalizations and all emergency department visits and captures the discharge diagnosis and procedure codes (ICD-9 codes) but only conducts detailed investigations for the selected kinds of medical events noted above.

**Q4a** What was the main reason for going to the (*insert emergency room or hospital*) that day? (*Check one and do not read choices*)

This question asks the participant to recall the nature of this episode. When asking the question, be sure to insert the appropriate response from question 4 above. For example, if the participant responded to Q4 by saying they went to an emergency room for several hours and then were sent home, insert the phrase “emergency room” into these questions (“What was the main reason for going to the emergency room?”). Do not read the responses. Listen to what the participant describes and record the category that is the best match.

If there is no obvious match with items 0-7 or 9, record OTHER (response 8) and record the reason in the space provided under “specify”. If the participant reports that a hospitalization or emergency room visit was for several reasons, record the one that fits any of the categories listed (0-7 or 9). For example, if the participant reports that they called 9-1-1 because of chest pain and dizziness that led to a fall and cut on their head, record CHEST PAIN (response 1).

In many cases, the participant will not use the terms listed in 4a. If it is not possible to select a main reason from the participant’s first response, consider gently probing to gather enough information to make a reasonable categorization of the main reason for this event (e.g., “Can you tell me more about this event?”).

If no additional information is forthcoming, record OTHER and specify the exact description of the episode provided by the participant.

**NOTE:** To record visits related to the novel coronavirus pandemic, if the participant indicates the reason for their visit was coronavirus or COVID, choose new answer option 10-COVID-19, COVID, SARS-CoV-2 or Coronavirus. If the participant only reports shortness of breath or some other symptom but does not specifically say coronavirus or COVID, record their response as usual.

**Q4b** What was the date of this event?  
Collect and record the approximate date of the visit. This should be the first date of the event. For example, if a person reports being hospitalized for 3 days, record the date of the first day. Stress that what you are seeking is the approximate date of the first event since their last telephone interview. If there are several events that have occurred since their last telephone interview, explain that you would like to take each of these in order. If you are unable to obtain an exact date, try to enter at least a month and year (e.g., 06/==/2012).

**Q4c** What is the name of the medical facility?

Collect the name of the hospital or emergency room visited for this reported event.

**Q4d** What is the address of this medical facility?

Collect the address of the hospital or emergency room visited for this reported event, including city and state.

**Q4e** For clarification or our records, under what name is this record?

This question asks for the participant to clarify under which name is the record. Since HCHS/SOL will be attempting to locate the record, it is important for the interviewer to discern the exact names used for the admission or visit to the emergency room.

**Q4e1** First Name

**Q4e2** Second Name

**Q4e3** Last Name

**Q4e4** Second Name

**Q4f** Were you admitted to a hospital or seen at an ER at any other time since your last SOL telephone interview?

This question asks for the participant to recall if there was another episode that led to them being hospitalized or seen at an emergency room since their last telephone interview. If a participant reported that they went to an emergency room and then were admitted to the hospital the same day as a continuation of the emergency room visit (Q4 above equals BOTH), do not consider the hospitalization as a separate event from the emergency room visit.

#### **END OF THIS PORTION OF THE ANNUAL FOLLOW-UP CALL**

*“Thank you for answering the questions about your health.”*