

Predeployment Assessment Data Dictionary

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Document Summary

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Predeployment Assessment: Data Dictionary

Section 1: Identifiers

Variable	Label	Description	Format Text
dod_build	DoD Build	Build	Character
macs_id	Military Aviators Cancer Study ID	Study ID	Character
pre_form_version_exp	Pre-Deployment: DoD Form Number Expanded		1999="1999" 2012="2012" 2015="2015"
pre_year_certified	Predeployment: Year Certified		Numeric .M="Missing"
pre_year_completed	Predeployment: Year Completed		Numeric

Section 2: Deployment History

Variable	Label	Description	Format Text
days_from_event	Predeployment: Days From Event (Raw)	Days from enlistment to the completion of the form.	Numeric
pre_operation_location	Predeployment Operation Location	Deployment Question: Location of Operation	.M="Missing" .V="Not Asked On Form Version" 1="Europe" 2="Southwest Asia" 3="Southeast Asia" 4="Asia (Other)" 5="South America" 6="Australia" 7="Africa" 8="Central America" 9="Unknown"

Section 3: Medical History And Readiness

Variable	Label	Description	Format Text
pre_care_head	Predeployment Care for Head Injury	Deployer Question 06: In the PAST YEAR did you receive care for a head injury?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_care_mental	Predeployment Care for Mental Health	Deployer Question 08: In the PAST YEAR did you receive care for any mental health condition or concern such as, but not limited to post traumatic stress disorder (PTSD), depression, anxiety disorder, alcohol abuse, or substance abuse?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_current_meds	Predeployment Current Medications	Deployer Question 07: What prescription or over the counter medications (including herbals/supplements) for sleep, pain, combat stress, or mental health conditions or concerns are you CURRENTLY taking?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_health_assessment	Predeployment Health Assessment	Deployer Question 01: Overall, how would you rate your health during the past month?	.M="Missing" 1="Poor" 2="Fair" 3="Good" 4="Very Good" 5="Excellent"
pre_health_concerns	Predeployment Health Concerns	Deployer Question 04: What problems, questions or concerns do you have about your medical, dental, or mental health?	.M="Missing" 0="No" 1="Yes"
pre_hearing	Predeployment Trouble Hearing	Deployer Question 09b: During the PAST MONTH how much have you been bothered by any of the following problems? Trouble hearing	.M="Missing" .V="Not Asked On Form Version" 0="Not bothered at all" 1="Bothered a little" 2="Bothered a lot"
pre_light_duty	Predeployment Light Duty	Deployer Question 02: Are you currently on a profile, limited duty, waiting on a MOS/Medical Retention Board (MMRB) decision, or being referred to a medical evaluation board (MEB) or physical evaluation board (PEB)?	.M="Missing" 0="No" 1="Yes" 9="Don't Know"
pre_noises	Predeployment Bothered By Noises	Deployer Question 09a: During the PAST MONTH how much have you been bothered by any of the following problems? Noises in your head or ears (such as ringing, buzzing, crickets, humming, tone, etc.)	.M="Missing" .V="Not Asked On Form Version" 0="Not bothered at all" 1="Bothered a little" 2="Bothered a lot"
pre_pregnant	Predeployment Pregnant (Raw)	Deployer Question 05: FEMALES ONLY - Are you pregnant or is there a chance you could be pregnant?	.G="Missing due to Gender" .M="Missing" 0="No" 1="Yes" 9="Don't Know"

Section 4: PTSD

Variable	Label	Description	Format Text
pre_pclc_score_calc	Predeployment PCL-C Calculation	PCL-C is a standard self-report scale for PTSD of 17 separate questions corresponding to the key symptoms of PTSD.	Numeric .V="Not Asked On Form Version"
pre_ptsd_severity_calc	Predeployment: PTSD Severity	A measurement of the severity of a participant's PTSD score.	.V="Not Asked On Form Version" 0="Not Affected" 1="Mild" 2="Moderate" 3="Severe"

Section 5: Alcohol

Variable	Label	Description	Format Text
pre_alcohol_binge	Predeployment Alcohol Binge	Deployer Question 10c: How often do you have six or more drinks on one occasion?	.M="Missing" .V="Not Asked On Form Version" 0="Never" 1="Less than monthly" 2="Monthly" 3="Weekly" 4="Daily"
pre_alcohol_day	Predeployment Drinks on Typical Day	Deployer Question 10b: How many drinks containing alcohol do you have on a typical day when you are drinking?	.M="Missing" .V="Not Asked On Form Version" 1="1 or 2" 2="3 or 4" 3="5 or 6" 4="7 to 9" 5="10 or more"
pre_alcohol_often	Predeployment How Often Do You Drink Alcohol	Deployer Question 10a: How often do you have a drink containing alcohol?	.M="Missing" .V="Not Asked On Form Version" 0="Never" 1="Monthly" 2="2-4 times a month" 3="2-3 times a week" 4="4 or more times a week"
pre_alcohol_severity_calc	Predeployment: Alcohol Severity	Alcohol Use Intervention Matrix	.V="Not Asked On Form Version" 0="Not Affected" 1="Mild" 2="Moderate" 3="Severe"
pre_alcohol_total_provider	Predeployment Maximum Number of Drinks on Occasion	Provider Question 03a: Maximum number of drinks per occasion.	Numeric .M="Missing" .V="Not Asked On Form Version"
pre_alcohol_week_provider	Predeployment Number of Drinks Per Week	Provider Question 03a: Number of drinks per week	Numeric .M="Missing" .V="Not Asked On Form Version"
pre_auditc_score_calc	Predeployment: Audit-C Score	AUDIT-C is a standard self-report scale for alcohol use of separate The Alcohol Use Disorders Identification Test (AUDIT-C) is an alcohol screen that can help identify patients who are hazardous drinkers or who may have an active alcohol use disorder.	Numeric .V="Not Asked On Form Version"
pre_auditc_screen	Predeployment Deployer's AUDIT-C Screening Score	Provider Question 03a: Deployer's AUDIT-C screening score was _____. (If score between 0-4 (men) or 0-3 (women) nothing required, go to block 4.	Numeric .M="Missing" .V="Not Asked On Form Version" .X="Not Answered by Deployer"
pre_ever_drinker	Predeployment: Ever Drinker		.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"

Section 6: Depression

Variable	Label	Description	Format Text
pre_depression_severity_calc	Predeployment: Depression Severity	Depression Intervention Matrix	.V="Not Asked On Form Version" 0="Not Affected" 1="Mild" 2="Moderate" 3="Severe"
pre_phq8_score_calc	Predeployment PHQ-8 Calculation	The eight-item Patient Health Questionnaire depression scale (PHQ-8) is established as a valid diagnostic and severity measure for depressive disorders in large clinical studies.	Numeric .V="Not Asked On Form Version"
pre_weeks_appetite	Predeployment Poor Appetite	Deployer Question 12e: Over the LAST 2 WEEKS, how often have you been bothered by poor appetite or over eating?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="Few or several days" 2="More than half the days" 3="Nearly every day"
pre_weeks_concentrate	Predeployment Trouble Concentrating	Deployer Question 12g: Over the LAST 2 WEEKS, how often have you been bothered by trouble concentrating on things, such as reading the newspaper or watching television?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="Few or several days" 2="More than half the days" 3="Nearly every day"
pre_weeks_depressed	Predeployment Depressed	Deployer Question 12b: Over the LAST 2 WEEKS, how often have you been bothered by feeling down, depressed, or hopeless	.M="Missing" .V="Not Asked On Form Version" 0="Not at all" 1="Few or several days" 2="More than half the days" 3="Nearly every day"
pre_weeks_failure	Predeployment Feeling Failure	Deployer Question 12f: Over the LAST 2 WEEKS, how often have you been bothered by feeling bad about yourself - or that you are a failure or have let yourself or your family down?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="Few or several days" 2="More than half the days" 3="Nearly every day"
pre_weeks_lethargic_jumpy	Predeployment Feeling Lethargic or Jumpy	Deployer Question 12h: Over the LAST 2 WEEKS, how often have you been bothered by moving or speaking so slowly that other people could have noticed. Or the opposite - being so fidgety that you have been moving around a lot more than usual?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="Few or several days" 2="More than half the days" 3="Nearly every day"
pre_weeks_little_interest	Predeployment Little Interest	Deployer Question 12a: Over the LAST 2 WEEKS, how often have you been bothered by having little interest or pleasure in doing things?	.M="Missing" .V="Not Asked On Form Version" 0="Not at all" 1="Few or several days" 2="More than half the days" 3="Nearly every day"

Variable	Label	Description	Format Text
pre_weeks_sleep	Predeployment Trouble Sleeping	Deployer Question 12c: Over the LAST 2 WEEKS, how often have you been bothered by having trouble falling/staying asleep or sleeping too much?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="Few or several days" 2="More than half the days" 3="Nearly every day"
pre_weeks_tired	Predeployment Feeling Tired	Deployer Question 12d: Over the LAST 2 WEEKS, how often have you been bothered by feeling tired or having little energy?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="Few or several days" 2="More than half the days" 3="Nearly every day"

Section 7: Suicide

Variable	Label	Description	Format Text
pre_suicide_severity	Predeployment: Suicide Severity		0="Not Affected" 1="Mild" 2="Moderate" 3="Severe"
pre_suicide_risk_eval_a	Predeployment Thoughts of Suicide	Provider Question 07a: Over the PAST MONTH, have you been bothered by thoughts that you would be better off dead or of hurting yourself in some way?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_suicide_risk_eval_b	Predeployment Suicidal Thought Occurrence	Provider Question 07b: How often have you been bothered by these thoughts?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 1="Few or several days" 2="More than half the time" 3="Nearly every day"
pre_suicide_risk_eval_c	Predeployment Thoughts of Self Harm	Provider Question 07c: Have you had thoughts of actually hurting yourself?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_suicide_risk_eval_d	Predeployment Self Harm Plans	Provider Question 07d: Have you thought about how you might actually hurt yourself?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_suicide_risk_eval_e	Predeployment Self Harm Likelihood	Provider Question 07e: There's a big difference between having a thought and acting on a thought. How likely do you think it is that you will act on these thoughts about hurting yourself or ending your life over the next month?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 1="Not at all likely" 2="Somewhat likely" 3="Very likely"
pre_suicide_risk_eval_f	Predeployment Self Harm Prevention	Provider Question 07f: Is there anything that would prevent or keep you from harming yourself?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_suicide_risk_eval_g	Predeployment Self Harm in the Past	Provider Question 07g: Have you ever attempted to harm yourself in the past?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"

Section 8: Mental Health

Variable	Label	Description	Format Text
pre_alert	Predeployment Alert	Deployer Question 11u: How much in the PAST MONTH have you been bothered by feeling jumpy or easily startled?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_avoid_activities	Predeployment Avoiding Activities	Deployer Question 11k: How much in the PAST MONTH have you avoided activities or situations because they remind you of a stressful experience from the past?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_avoid_situations	Predeployment Avoiding Situations	Deployer Question 11b: Have you ever had any experience that was so frightening, horrible, or upsetting that, in the PAST MONTH, you tried hard not to think about it or went out of your way to avoid situations that remind you of it?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_avoid_think	Predeployment Avoid Thinking	Deployer Question 11j: How much in the PAST MONTH have you avoided thinking about or talking about a stressful experience from the past or avoid having feelings related to it?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_concentrate	Predeployment Concentrate	Deployer Question 11s: How much in the PAST MONTH have you been bothered by having difficulty concentrating?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_detached	Predeployment Detached	Deployer Question 11d: Have you ever had any experience that was so frightening, horrible, or upsetting that, in the PAST MONTH, you felt numb or detached from others, activities, or your surroundings?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_disinterest	Predeployment Disinterest	Deployer Question 11m: How much in the PAST MONTH have you been bothered by having a loss of interest in things that you used to enjoy?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"

Variable	Label	Description	Format Text
pre_distant	Predeployment Distant	Deployer Question 11n: How much in the PAST MONTH have you been bothered by feeling distant or cut off from other people?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_doom	Predeployment Doom	Deployer Question 11p: How much in the PAST MONTH have you been bothered by feeling as if your future will somehow be cut short?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_dreams	Predeployment Dreams	Deployer Question 11f: How much in the PAST MONTH have you been bothered by repeated, disturbing dreams of a stressful experience from the past?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_insomnia	Predeployment Insomnia	Deployer Question 11q: How much in the PAST MONTH have you been bothered by trouble falling or staying asleep?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_irritable	Predeployment Irritable	Deployer Question 11r: How much in the PAST MONTH have you been bothered by feeling irritable or having angry outbursts?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_life_difficult	Predeployment Life Difficult	Deployer Question 11v: How difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not difficult at all" 1="Somewhat difficult" 2="Very difficult" 3="Extremely Difficult"
pre_memories	Predeployment Memories	Deployer Question 11e: How much in the PAST MONTH have you been bothered by repeated, disturbing memories, thoughts, or images of a stressful experience from the past?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"

Variable	Label	Description	Format Text
pre_mental_health	Predeployment: During the past year, have you sought counseling for your mental health?	Provider Question: During the past year, have you sought counseling for your mental health?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_nightmares	Predeployment Nightmares	Deployer Question 11a: Have you ever had any experience that was so frightening, horrible, or upsetting that, in the PAST MONTH, you have had nightmares about it or thought about it when you did not want to?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_numb	Predeployment Numb	Deployer Question 11o: How much in the PAST MONTH have you been bothered by feeling emotionally numb or being unable to have loving feelings for those close to you?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_on_guard	Predeployment On Guard	Deployer Question 11c: Have you ever had any experience that was so frightening, horrible, or upsetting that, in the PAST MONTH, you were constantly on guard, watchful, or easily startled?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_phys_reaction	Predeployment Physical Reaction	Deployer Question 11i: How much in the PAST MONTH have you been bothered by having physical reactions (e.g., heart pounding, trouble breathing, or sweating) when something reminded you of a stressful experience from the past?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_reftime_mental_spec_ial	Predeployment: Referral indicated - Mental Health	Provider Question 12c: Recommended Referral for Mental Health Specialty Care?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reliving	Predeployment Reliving	Deployer Question 11g: How much in the PAST MONTH have you been bothered by suddenly acting or feeling as if a stressful experience were happening again (as if you were reliving it)?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_stressors	Predeployment Major Life Stressors	Deployer Question 13a: Over the PAST MONTH, what major life stressors have you experienced that are a cause of significant concern or make it difficult for you to do your work, take care of things at home, or get along with other people (for example, serious conflicts with others, relationship problems, or a legal, disciplinary or financial problem)?	.M="Missing" .V="Not Asked On Form Version" 0="None" 1="1 or More Stressors"
pre_stressors_help	Predeployment Major Life Stressors Help	Deployer Question 13b: Are you currently in treatment or getting professional help for this concern?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"

Variable	Label	Description	Format Text
pre_trouble_memory	Predeployment Trouble with Memory	Deployer Question 11l: How much in the PAST MONTH have you been bothered by having trouble remembering important parts of a stressful experience from the past?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_upset	Predeployment Upset	Deployer Question 11h: How much in the PAST MONTH have you been bothered by feeling very upset when something reminded you of a stressful experience from the past?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_violence	Predeployment Thoughts of Violence	Provider Question 08a: Over the past month have you had thoughts or concerns that you might hurt or lose control with someone?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_violence_risk	Predeployment Violence Risk	Provider Question 08b: Does member pose a current risk to others?	.N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_violence_severity	Predeployment: Violence Severity	A measurement of the severity of the potential for violence reported by a participant.	0="Not Affected" 2="Moderate" 3="Severe"
pre_watchful	Predeployment Watchful	Deployer Question 11t: How much in the PAST MONTH have you been bothered by being "super alert" or watchful, on guard?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not at all" 1="A little bit" 2="Moderately" 3="Quite a bit" 4="Extremely"
pre_weeks_problems	Predeployment How Difficult Has This Been	Deployer Question 12i: How difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="Not difficult at all" 1="Somewhat difficult" 2="Very difficult" 3="Extremely Difficult"

Section 9: Smoking

Variable	Label	Description	Format Text
pre_ever_smoker	Predeployment: Ever Smoker	Was the participant ever a smoker, based on this or previously submitted pre-deployment forms?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_tobacco	Predeployment Smoking	Deployer Question 03: How often do you smoke tobacco (for example cigarettes, cigars, pipe or hookah)?	.M="Missing" .V="Not Asked On Form Version" 0="Not at all" 1="Some days" 2="Just about every day"

Section 10: Medical Review

Variable	Label	Description	Format Text
pre_appointment_assist	Predeployment Appointment Assistance	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"
pre_chaplain	Predeployment Chaplain	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"
pre_community	Predeployment Community Service	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"
pre_contract_support	Predeployment Contract Support	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"
pre_depression_reported	Predeployment Depression Reported	Provider Question 05a: Did deployer mark "More than half the days" or "Nearly every day" on quesiotn 12a or 12b?	.M="Missing" .V="Not Asked On Form Version" .X="Not Answered by Deployer" 0="No" 1="Yes"
pre_family_support	Predeployment Family Support	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"
pre_head_followup	Predeployment Head Injury Followup	Provider Question 01: Address Concerns identified on deployer questions 1 through 8 - Head injury	.M="Missing" .V="Not Asked On Form Version" 0="Not Answered" 1="Deployer Indicated Concern or Yes"
pre_health_ed	Predeployment Health Education and Information	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"
pre_health_resources	Predeployment Health Care Benefits and Resources Information	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"
pre_hearing_reported	Predeployment Hearing Issue Reported	Provider Question 02a: Did deployer mark he/she bother a little or a lot in the past month by "noises in head or ears" or "trouble hearing"?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_hx_mh_followup	Predeployment History of Mental Health Care Followup	Provider Question 01: Address Concerns identified on deployer questions 1 through 8 - History of Mental Health Care	.M="Missing" .V="Not Asked On Form Version" 0="Not Answered" 1="Deployer Indicated Concern or Yes"

Variable	Label	Description	Format Text
pre_in_transition	Predeployment In Transition	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"
pre_mdm_followup	Predeployment Medical/Dental/Mental Health Concern Followup	Provider Question 01: Address Concerns identified on deployer questions 1 through 8 - Medical, dental, or mental health concern	.M="Missing" .V="Not Asked On Form Version" 0="Not Answered" 1="Deployer Indicated Concern or Yes"
pre_meb_followup	Predeployment MEB or PEB Followup	Provider Question 01: Address Concerns identified on deployer questions 1 through 8 - MEB or PEB	.M="Missing" .V="Not Asked On Form Version" 0="Not Answered" 1="Deployer Indicated Concern or Yes"
pre_med_disp	Predeployment Medical assessment/disposition	Provider Question 14:	.M="Missing" 1="Deployable" 2="Deployable With Conditions" 3="Not Deployable, Potentially Disqualifying Condition" 4="Not Deployable, Other" 5="Not Deployable" 9="Unknown"
pre_med_followup	Predeployment Medications Followup	Provider Question 01: Address Concerns identified on deployer questions 1 through 8 - Medications	.M="Missing" .V="Not Asked On Form Version" 0="Not Answered" 1="Deployer Indicated Concern or Yes"
pre_med_hx_review	Predeployment Medical History Review	Provider Question 09: Medical History Review	.M="Missing" .V="Not Asked On Form Version" 1="Completed" 2="No health records available"
pre_med_limit_deploy	Predeployment Deployment Limiting Conditions or Medications	Provider Question 09b: Evidence of deployment limiting conditions or medications?	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_med_problems	Predeployment: Medical assessment/disposition Problems	Provider Question 14:	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_meds_supply	Predeployment: Medical assessment/disposition Supply	Provider Question 14:	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_one_source	Predeployment Military One Source	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"
pre_other_support	Predeployment Other, list:	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"

Variable	Label	Description	Format Text
pre_pclc_matrix	Predeployment PCL-C Matrix	Provider Question 04: Post-Traumatic Stress Disorder Intervention Matrix	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 1="Not Difficult at All or Somewhat Difficult" 2="Very Difficult to Extremely Difficult"
pre_pclc_score	Predeployment PCL-C Score	Provider Question 04b: If yes, deployer's responses to questions 11e through 11u resulted in a PCL-C score of _____ and the deployer's response to level of impairment with life events (11v.) is indicated in the table below.	Numeric .M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" .X="Not Answered Or Incomplete"
pre_personal_med_equip	Predeployment: Medical assessment/disposition Medical Equipment	Provider Question 14:	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_phq8_matrix	Predeployment PHQ-8 Depression Intervention Matrix	Provider Question 05: Depression Intervention Matrix	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 1="Not Difficult at All or Somewhat Difficult" 2="Very Difficult to Extremely Difficult"
pre_phq8_score	Predeployment PHQ-8 Score	Provider Question 05b: If yes, deployer's responses to questions 12a through 12h resulted in a total PHQ-8 score of _____ and the deployer's response to level of impairment with life events is indicated in the level below.	Numeric .M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" .X="Not Answered Or Incomplete"
pre_pregnant_followup	Predeployment Pregnancy Followup	Provider Question 01: Address Concerns identified on deployer questions 1 through 8 - Pregnancy	.G="Missing due to Gender" .M="Missing" .V="Not Asked On Form Version" 0="Not Answered" 1="Deployer Indicated Concern or Yes"
pre_ptsd_reported	Predeployment PTSD Reported	Provider Question 04a: Did deployer mark yes on two or more of questions 11a through 11d?	.M="Missing" .V="Not Asked On Form Version" .X="Not Answered By Deployer" 0="No" 1="Yes"
pre_self_health_followup	Predeployment Self Health Rating Followup	Provider Question 01: Address Concerns identified on deployer questions 1 through 8 - Self Health Rating	.M="Missing" .V="Not Asked On Form Version" 0="Not Answered" 1="Deployer Indicated Concern or Yes"
pre_stressors_reported	Predeployment Stressors Reported	Provider Question 06a: Did deployer mark they have a concern or a difficulty with a major life stressor?	.M="Missing" .V="Not Asked On Form Version" .X="Not Answered by Deployer" 0="No" 1="Yes"
pre_suicide_risk	Predeployment Self Harm Risk	Provider Question 07i: Does deployer pose a current risk for harm to self?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"

Variable	Label	Description	Format Text
pre_tricare	Predeployment TRICARE Provider	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"
pre_va_med	Predeployment VA Medical Center or Community Clinic	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"
pre_vet	Predeployment Vet Center	Provider Question 16: Supplemental Services Recommended/Information Provided?	.M="Missing" .V="Not Asked On Form Version" 0="Not Checked" 1="Checked"

Section 11: Referrals

Variable	Label	Description	Format Text
pre_ref_abuse	Predeployment: Recommended Substance Abuse Program	Provider Question 7h:	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_alcohol	Predeployment Alcohol Issue Referral	Provider Question 03b: Referral indicated for evaluation?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_alcohol_neg	Predeployment Reason for No Alcohol Issue Referral	Provider Question 03b: Referral indicated for evaluation?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 1="Already under care" 2="Already has referral" 3="No significant impairment" 4="Other reason"
pre_ref_audiology	Predeployment: Other specialty care: Audiology	Provider Question 12: Recommended Referrals?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_cardiac	Referral indicated - cardiac	Provider Question 12: Recommended Referrals?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_case	Referral indicated - Case Manager	Provider Question 12: Recommended Referrals?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_combat	Referral indicated - combat / operational stress reaction	Provider Question 12: Recommended Referrals?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_dental	Referral indicated - dental	Provider Question 12: Recommended Referrals?	0="No" 1="Yes"
pre_ref_depression	Predeployment Depression Referral Indicated?	Provider Question 05c: Referral Indicated?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_depression_neg	Predeployment Reason for No Depression Referral	Provider Question 05c: Referral Indicated?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 1="Already under care" 2="Already has referral" 3="No significant impairment" 4="Other reason"
pre_ref_derm	Referral indicated - dermatologic	Provider Question 12: Recommended Referrals?	0="No" 1="Yes"
pre_ref_ent	Referral indicated - ENT	Provider Question 12: Recommended Referrals?	.V="Not Asked On Form Version" 0="No" 1="Yes"

Variable	Label	Description	Format Text
pre_ref_eye	Referral indicated - Eye	Provider Question 12: Recommended Referrals?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_family	Referral indicated - Family Problems	Provider Question 12: Recommended Referrals?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_fatigue	Referral indicated - Fatigue, Malaise, Multisystem complaint	Provider Question 12: Recommended Referrals?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_gi	Referral indicated - GI	Provider Question 12: Recommended Referrals?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_gu	Referral indicated - GU	Provider Question 12: Recommended Referrals?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_gyn	Referral indicated - GYN	Provider Question 12: Recommended Referrals?	0="No" 1="Yes"
pre_ref_hearing	Predeployment Hearing Issue Referral	Provider Question 02b: If yes, referral indicated?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_hearing_neg	Predeployment Reason for No Hearing Issue Referral	Provider Question 02b: If yes, referral indicated?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 1="Already under care" 2="Already has referral" 3="No significant impairment" 4="Other reason"
pre_ref_immunization	Referral To Immunization Clinic	Referral Indicated?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_lab	Referral to laboratory	Referral Indicated?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_mental	Referral indicated - Mental Health	Referral Indicated?	0="No" 1="Yes"
pre_ref_neuro	Referral indicated - Neurologic	Referral Indicated?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_ortho	Referral indicated - Orthopedic	Referral Indicated?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_other	Referral indicated - Other	Referral Indicated?	0="No" 1="Yes"
pre_ref_other_spec	Referral to other specialty care listed	Referral Indicated?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_podiatry	Referral indicated - Podiatry	Referral Indicated?	.V="Not Asked On Form Version" 0="No" 1="Yes"

Variable	Label	Description	Format Text
pre_ref_pregnancy	Referral indicated - Pregnancy	Referral Indicated?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_primary	Referral indicated - Primary Care, Family Practice, Internal Medicine	Referral Indicated?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_pt	Referral indicated - PT	Referral Indicated?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_ptsd	Predeployment PTSD Referral Indicated?	Provider Question 04c: Referral Indicated?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_ptsd_neg	Predeployment Reason for No PTSD Referral	Provider Question 04c: Referral Indicated?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 1="Already under care" 2="Already has referral" 3="No significant impairment" 4="Other reason"
pre_ref_pulmonary	Referral indicated - Pulmonary	Referral Indicated?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_spec_other	Referral indicated - Other specialty care	Referral Indicated?	.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_stressors	Predeployment Stressors Referral	Provider Question 06c: Consider need for referral. Referral Indicated?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_ref_stressors_neg	Predeployment Reason for No Stressors Referral	Provider Question 06c: Consider need for referral. Referral Indicated?	.M="Missing" .N="Not Applicable" .V="Not Asked On Form Version" 1="Already under care" 2="Already has referral" 3="No significant impairment" 4="Other reason"
pre_ref_tbi	Referral indicated - TBI/Rehab Med		.V="Not Asked On Form Version" 0="No" 1="Yes"
pre_refer_alcohol	Predeployment Alcohol Use Concerns Needing Referral	Provider Question 11: Summary of provider's identified concerns needing referral	.A="Ambiguous" .M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_refer_dental	Predeployment Dental Health Concerns Needing Referral	Provider Question 11: Summary of provider's identified concerns needing referral	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"

Variable	Label	Description	Format Text
pre_refer_depression	Predeployment Depression Symptom Concerns Needing Referral	Provider Question 11: Summary of provider's identified concerns needing referral	.A="Ambiguous" .M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_refer_harm	Predeployment Self-Harm Concerns Needing Referral	Provider Question 11: Summary of provider's identified concerns needing referral	.A="Ambiguous" .M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_refer_mh	Predeployment Mental Health Symptom Concerns Needing Referral	Provider Question 11: Summary of provider's identified concerns needing referral	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_refer_none	Predeployment No Concerns Needing Referral	Provider Question 11: Summary of provider's identified concerns needing referral	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_refer_other	Predeployment Other Concerns Needing Referral	Provider Question 11: Summary of provider's identified concerns needing referral	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_refer_ph	Predeployment Physical Health Concerns Needing Referral	Provider Question 11: Summary of provider's identified concerns needing referral	.M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_refer_ptsd	Predeployment PTSD Symptom Concerns Needing Referral	Provider Question 11: Summary of provider's identified concerns needing referral	.A="Ambiguous" .M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_refer_violence	Predeployment Risk of Violence Concerns Needing Referral	Provider Question 11: Summary of provider's identified concerns needing referral	.A="Ambiguous" .M="Missing" .V="Not Asked On Form Version" 0="No" 1="Yes"
pre_referred	Referred for any of the conditions listed on the form	Provider Question 11: Summary of provider's identified concerns needing referral	0="No" 1="Yes"
pre_reftime_abuse	Predeployment: Substance Abuse Program	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_audiology	Predeployment: Other specialty care: Audiology	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_care	Predeployment: Behavioral Health in Primary Care	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"

Variable	Label	Description	Format Text
pre_reftime_dental	Predeployment: Dental	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_derm	Predeployment: Other specialty care: Dermatology	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_gyn	Predeployment: Other specialty care: OB/GYN	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_immunization	Predeployment: Referral Immunization Clinic	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_lab	Predeployment: Referral Laboratory	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_mental_prim	Predeployment: Mental Health Specialty Care	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_other	Predeployment: Referral Other	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_other_spec	Predeployment: Other specialty care: Other, list	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_podiatry	Predeployment: Other specialty care: Podiatry	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_primary	Predeployment: Primary Care, Family Practice, Internal Medicine	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_pt	Predeployment: Other specialty care: Physical Therapy	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"

Variable	Label	Description	Format Text
pre_reftime_spec_other	Predeployment: Referral to other specialty care listed	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"
pre_reftime_tbi	Predeployment: Other specialty care: TBI/Rehab Med	Provider Question 12: Recommended Referrals?	.M="Missing" .V="Not Asked On Form Version" 1="Within 24 hours" 2="Within 7 days" 3="Within 30 days"