

Medicare Current Beneficiary Survey

Section Specifications for IRQ

INTERVIEWER REMARKS QUESTIONNAIRE

ROUND 70

Created on 4/30/2015

IR1

No Entry

QUESTION TEXT

THE ROUND (CURRENT ROUND) COMMUNITY INTERVIEW FOR (SP) WAS CONDUCTED WITH [(SP)/(PROXY NAME)] ON (INTERVIEW COMPLETION DATE).

FIELD 1: IR_CASEOK**FIELD 1 ROUTING**

Value	Label	Route
	CONTINUE	SUM1 - IRQINTRO

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

SUM1

Code One

QUESTION TEXT

**ARE THERE ANY MEDICAL EVENTS, HEALTH INSURANCE PLANS, OR
PRESCRIPTION MEDICINES THAT NEED TO BE ADDED OR DELETED FOR THE
CURRENT ROUND?**

PROBE FOR DETAILS IF NECESSARY.

FIELD 1: IRQINTRO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	IR3 - RRECHelp
2	NO	DO NOT DISPLAY.
	DON'T KNOW	
	REFUSED	

SUM2

Code One

QUESTION TEXT**DOES AN ITEM NEED TO BE ADDED OR DELETED?****FIELD 1: IRQEDITTYPE****FIELD 1 ROUTING**

Value	Label	Route
1	ADD AN ITEM	SUM3 - IRQITEMTYPE
2	DELETE AN ITEM	SUM3 - IRQITEMTYPE

SUM3

Code One

QUESTION TEXT**WHAT TYPE OF ITEM NEEDS TO BE [ADDED/DELETED]?****FIELD 1: IRQITEMTYPE****FIELD 1 ROUTING**

Value	Label	Route
1	A MEDICAL EVENT	SUM4 - IRQMETYPE
2	A PRESCRIPTION DRUG	SUM10 - IRQRXNAME
3	A HEALTH INSURNACE	SUM16 - IRQHITYPE

SUM4

Code One

QUESTION TEXT**WHAT TYPE OF MEDICAL EVENT WAS IT?****FIELD 1: IRQMETYPE****FIELD 1 ROUTING**

Value	Label	Route
1	DENTAL EVENT	SUM7-IRQDOCNAME
2	INPATIENT EVENT	SUM7-IRQDOCNAME
3	OUTPATIENT EVENT	SUM7-IRQDOCNAME
4	MEDICAL PROVIDER EVENT	SUM7-IRQDOCNAME
5	OTHER MEDICAL EVENT	SUM7-IRQDOCNAME
6	INSITUTIONAL EVENT	SUM7-IRQDOCNAME
7	HOME HEALTH EVENT	SUM7-IRQDOCNAME
8	EMERGENCY ROOM EVENT	SUM7-IRQDOCNAME

SUM7

Verbatim

QUESTION TEXT**TYPE THE NAME OF THE DOCTOR OR HOSPITAL.****FIELD 1: IRQDOCNAME****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUOUS ANSWER	SUM21-IRQDATEMM
	DON'T KNOW	SUM21-IRQDATEMM
	REFUSED	SUM21-IRQDATEMM

SUM10

Verbatim

QUESTION TEXT**TYPE THE NAME OF THE PRESCRIPTION MEDICINE.****FIELD 1: IRQRXNAME****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUOUS ANSWER	SUM11-IRQRXFORM
	DON'T KNOW	SUM11-IRQRXFORM
	REFUSED	SUM11-IRQRXFORM

SUM11

Code one

QUESTION TEXT

IN WHAT FORM IS THE MEDICINE?

FIELD 1: IRQRXFORM

FIELD 1 ROUTING

Value	Label	Route
1	PILLS (TABLETS, CAPSULES)	SUM13-IRQSTRUNIT
2	LIQUID (TO BE TAKEN ORALLY)	SUM13-IRQSTRUNIT
3	DROPS (EYE/EAR/NOSE)	SUM13-IRQSTRUNIT
4	OINTMENT, CREAM, LOTION (TOPICAL OR INTERNAL)	SUM13-IRQSTRUNIT
5	SUPPOSITORIES	SUM13-IRQSTRUNIT
6	AEROSOL/SPRAY, INHALANT, SOLUTIONS, DISKUS	SUM13-IRQSTRUNIT
7	SHAMPOO, SOAP	SUM13-IRQSTRUNIT
8	INJECTION	SUM13-IRQSTRUNIT
9	IV INJECTION	SUM13-IRQSTRUNIT
10	PATCHES	SUM13-IRQSTRUNIT
11	GEL OR JELLY (TOPICAL OR INTERNAL)	SUM13-IRQSTRUNIT
12	POWDER, GRANULES	SUM13-IRQSTRUNIT
91	OTHER	SUM12-IRQRXFORMOTH
	DON'T KNOW	SUM13-IRQSTRUNIT

SUM12

Verbatim

QUESTION TEXT**OTHER (SPECIFY)****FIELD 1: IRQRXFORMOTH****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUOUS ANSWER	SUM11-IRQRXFORM

SUM13

Code one

QUESTION TEXT

WHAT WAS THE UNIT OF THE STRENGTH OF THE MEDICINE?

FIELD 1: IRQSTRUNIT

FIELD 1 ROUTING

Value	Label	Route
1	MICROGRAMS (mcg, mc)	SUM15 - IRQTABTAKE
2	MILLIGRAMS (mg)	SUM15 - IRQTABTAKE
3	GRAINS (gr)	SUM15 - IRQTABTAKE
4	MILLIEQUIVALENTS (meq)	SUM15 - IRQTABTAKE
5	GRAMS (g, gm)	SUM15 - IRQTABTAKE
6	PERCENT (%)	SUM15 - IRQTABTAKE
7	INTERNATIONAL UNITS (IU)	SUM15 - IRQTABTAKE
8	UNITS (U)	SUM15 - IRQTABTAKE
91	OTHER	SUM14 – IRQSTRUNITOTH
96	COMPOUND/MORE THAN ONE MEDICINE COMBINED	SUM15 - IRQTABTAKE
	DON'T KNOW	SUM15 - IRQTABTAKE

SUM14

Verbatim

QUESTION TEXT**OTHER (SPECIFY)****FIELD 1: IRQSTRUNITOTH****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUOUS ANSWER	SUM15- IRQTABTAKE

SUM15

Numeric

QUESTION TEXT**HOW MANY [PILLS/SUPPOSITORIES] ARE TO BE TAKEN IN A DAY?****FIELD 1: IRQTABTAKE****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUOUS ANSWER	SUM21-IRQDATEMM

SUM16

Code one

QUESTION TEXT**WHAT TYPE OF HEALTH INSURANCE PLAN NEEDS TO BE [ADDED/DELETED]?****FIELD 1: IRQHITYPE****FIELD 1 ROUTING**

Value	Label	Route
1	MEDICARE	SUM18-IRQHIPLANSTART
2	MEDICARE MANAGED CARE PLAN	SUM17-IRQHINAME
3	MEDICAID	SUM17-IRQHINAME
4	TRICARE	SUM18-IRQHIPLANSTART
5	PRIVATE PLAN	SUM17-IRQHINAME
6	PUBLIC PLAN (OTHER THAN MEDICAID)	SUM17-IRQHINAME
7	MEDICARE PRESCRIPTION DRUG PLAN	SUM17-IRQHINAME

SUM17

Verbatim

QUESTION TEXT**WHAT IS THE NAME OF THE HEALTH INSURANCE PLAN?****FIELD 1: IRQHINAME****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUOUS ANSWER	SUM17-IRQHIPLANSTART
	DON'T KNOW	SUM22-IRQENDLOOP
	REFUSED	SUM22-IRQENDLOOP

SUM18

Date

QUESTION TEXT**ON WHAT DATE DID COVERAGE BEGIN FOR THIS HEALTH INSURANCE PLAN?****FIELD 1: IRQHIPLANSTART****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUOUS ANSWER	SUM19-IRQHIPLANCOVER
	DON'T KNOW	SUM19-IRQHIPLANCOVER
	REFUSED	SUM19-IRQHIPLANCOVER

SUM19

Code one

QUESTION TEXT**IS THE SP STILL COVERED BY THIS HEALTH INSURANCE PLAN AS OF THE DATE OF THIS INTERVIEW?****FIELD 1: IRQHIPLANCOVER****FIELD 1 ROUTING**

Value	Label	Route
1	YES	SUM22-IRQENDLOOP
2	NO	SUM20-IRQHIPLANEND
	DON'T KNOW	SUM22-IRQENDLOOP
	REFUSED	SUM22-IRQENDLOOP

SUM20

Date

QUESTION TEXT**ON WHAT DATE DID COVERAGE STOP?****FIELD 1: IRQHIPLANEND****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUOUS ANSWER	SUM22-IRQENDLOOP
	DON'T KNOW	SUM22-IRQENDLOOP
	REFUSED	SUM22-IRQENDLOOP

SUM21

Date

QUESTION TEXT

WHAT WAS THE DATE [OF THE MEDICAL EVENT/THE PRESCRIPTION WAS FILLED]?

FIELD 1: IRQDATEMM

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	SUM21 - IRQDATEDD
	Empty	SUM21 - IRQDATEDD
	Don't Know	SUM21 - IRQDATEDD
	Refused	SUM21 - IRQDATEDD

FIELD 2: IRQDATEDD

FIELD 2 ROUTING

Value	Label	Route
1	[Continuous answer.]	SUM21- IRQDATEYY
	Empty	SUM21- IRQDATEYY
	Don't Know	SUM21- IRQDATEYY
	Refused	SUM21- IRQDATEYY

FIELD 3: IRQDATEYY**FIELD 3 ROUTING**

Value	Label	Route
1	[Continuous answer.]	SUM22-IRQENDLOOP
	Empty	SUM22-IRQENDLOOP
	Don't Know	SUM22-IRQENDLOOP
	Refused	SUM22-IRQENDLOOP

SUM22

Code one

QUESTION TEXT

**ARE THERE ANY MORE MEDICAL EVENTS, HEALTH INSURANCE PLANS, OR
PRESCRIPTION MEDICINES THAT NEED TO BE ADDED OR DELETED FOR THIS
ROUND?**

FIELD 1: IRQENDLOOP**FIELD 1 ROUTING**

Value	Label	Route
1	YES	SUM2-EDITTYPE
2	NO	IR3-RRECHLP

IR3

Yes/No

QUESTION TEXT

DID [(SP)/(PROXY NAME)] RECEIVE ANY HELP IN ANSWERING THE QUESTIONS?

FIELD 1: RRECHHELP**FIELD 1 ROUTING**

Value	Label	Route
1	YES	IR4 - PERSON_HELPER
2	NO	IR5 - RINFOSAT

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
IRQS.RRECHHELP	1

IR4

Roster

QUESTION TEXT

WHO HELPED [(SP)/(PROXY NAME)] ANSWER THE QUESTIONS?

SELECT OR ADD ONLY ONE PERSON.

FIELD 1: PERSON HELPER

TEMP

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	IR5 - RINFOSAT

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS

ROSTER/GRID INSTRUCTIONS

Display all persons from Person Roster.

Display SP on first line, where ROST.ROSTNUM=01.

If Proxy interview, display Proxy on second line, where ROST.ROSTNUM=MRES.RROSTNUM.

Display remaining persons in the order that they were entered in Person Roster.

Display the following persons as protected rows:

- 1) The SP, if SP interview or SP deceased.
- 2) The Proxy, if Proxy interview.
- 3) All persons who are deceased. These are persons who at some point lived in the Household but were later reported deceased.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	First Name	Display ROST.ROSTFNAM
2	Last Name	Display ROST.ROSTLNAM
3	Relationship to SP	Display relationship: If ROST.ROSTREL=91/OtherRelative or 92/OtherNon-Relative, display ROST.ROSTREOS Else display ROST.ROSTREL relationship.

BACKGROUND VARIABLE ASSIGNMENTS

If Person added, see PERSON ROSTER POP-UP specifications for pop-up window programming instructions.

Variables populated in Person Roster:

ROST.ROSTNUM Person's unique #
ROST.ROSTRNDC Round # ROST created
ROST.ROSTFNAM First Name
ROST.ROSTLNAM Last Name
ROST.ROSTREL Relationship to SP
ROST.ROSTREOS Relationship to SP, Other Specify.

Set reason why person added to Person Roster. See instructions below.

Person select at Person Roster is the helper. Store the respondent number on IRQS.RHELPNUM. See instructions below.

Variable Name	Assignment Instructions
RHELPNUM	IRQS.RHELPNUM=ROST.ROSTNUM of person selected as helper at IR4.
ROSTREAS	If person added to person roster, set ROST.ROSTREAS = 10/AssistantToRespondent.

IR5

Yes/No

QUESTION TEXT

DO YOU FEEL THAT THE INFORMATION PROVIDED BY [(SP)/(PROXY NAME)] WAS SATISFACTORY?

FIELD 1: RINFOSAT**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX IR3
2	NO	IR5OV - RINFOVB

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
IRQS.RINFOSAT	1

IR5OV

Verbatim Text

QUESTION TEXT

RECORD THE REASONS WHY YOU THINK THAT THE INFORMATION PROVIDED WAS UNSATISFACTORY.

FIELD 1: RINFOVB**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX IR3

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
NONE REPLACES CHESHIRE VARIABLES: IRQS.RINFOVB1 IRQS.RINFOVB2 IRQS.RINFOVB3	1

BOX IR3

BOX INSTRUCTIONS

IF SP'S PREVIOUS ROUND INTERVIEW WAS IN A FACILITY, GO TO BOX IR3A.

IF SP IS IN THE SUPPLEMENTAL SAMPLE, GO TO IR5B - USEBATRY.

IF THIS IS AN EXIT CASE AND THE PREVIOUS ROUND INTERVIEW WAS NOT SKIPPED,
GO TO IR5C - INTVTIME.

ELSE GO TO IR5A - REFERCAL.

IR5A

Yes/No

QUESTION TEXT

DURING THE INTERVIEW, DID THE RESPONDENT REFER TO ENTRIES MADE BY THE RESPONDENT OR THE SP IN THE CALENDAR PROVIDED BY MCBS?

FIELD 1: REFERCAL

FIELD 1 ROUTING

Value	Label	Route
1	YES- PLANNER PROVIDED BY MCBS	BOX IR3A
2	YES- A PERSONAL CALENDAR OR PLANNER (INCLUDING PAPER OR DIGITAL CALENDAR OR PLANNER)	BOX IR3A
3	NO- DID NOT REFERENCE A CALENDAR OR PLANNER	BOX IR3A

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
IRQS.REFERCAL	1

BOX IR3A

BOX INSTRUCTIONS

ROUTE TO IR5B - STATEMENTTYPE

NOTES:

Routing at this item was omitted in R70. All cases routed to IR5B-STATEMENTTYPE.

IR5B

Yes/No

QUESTION TEXT

HOW DID YOU OBTAIN STATEMENT INFORMATION FOR THIS INTERVIEW? SELECT ALL THAT APPLY

FIELD 1: STATEMENTTYPE**FIELD 1 ROUTING**

Value	Label	Route
1	FROM PAPER STATEMENT(S)	BOX IR3A1
2	FROM ELECTRONIC STATEMENT(S) PRINTED BY RESPONDENT	BOX IR3A1
3	FROM ELECTRONIC STATEMENT(S) VIEWED ON A COMPUTER OR OTHER ELECTRONIC DEVICE	BOX IR3A1
4	FROM SOME OTHER WAY	BOX IR3A1
5	NO STATEMENTS COLLECTED DURING THIS INTERVIEW	BOX IR3A1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
IRQS.USEBATRY	1

OTHER PROGRAMMING INSTRUCTIONS

IF (05) NO STATEMENTS COLLECTED IS SELECTED, NO OTHER VALUES SHOULD BE ABLE TO BE SELECTED. DISPLAY MESSAGE "YOU'VE INDICATED THAT NO STATEMENTS WERE COLLECTED DURING THIS INTERVIEW AS WELL AS A WAY THAT STATEMENTS WERE COLLECTED. PLEASE CORRECT BEFORE CONTINUING."

BOX IR3A1

BOX INSTRUCTIONS

IF IR5B-STATEMENTTYPE INCLUDES (04) SOME OTHER WAY GOTO IR5B1-STATEMENTTYPEOTH, ELSE GOTO IR5C-INTVTIME.

IR5B1

Verbatim

QUESTION TEXT

PLEASE DESCRIBE THE WAY(S) YOU OBTAINED STATEMENT INFORMATION FOR THIS INTERVIEW.

FIELD 1: STATEMENTTYPEOTH**FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUOUS ANSWER	IR5C-INTVTIME

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
	1

IR5C

Code 1

QUESTION TEXT**HOW LONG WAS THIS INTERVIEW?**

INCLUDE ALL THE TIME YOU SPENT INTERVIEWING IN THE RESPONDENT/PROXY'S HOME (AND/OR ON THE PHONE WITH THE RESPONDENT/PROXY).

FIELD 1: INTVTIME**FIELD 1 ROUTING**

Value	Label	Route
1	LESS THAN 1 HOUR	BOX IR3B
2	FROM 1-2 HOURS	BOX IR3B
3	FROM 2-4 HOURS	IR5D - LT_REASON
4	MORE THAN 4 HOURS	IR5D - LT_REASON

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
IRQS.INTVTIME	1

IR5D

Code All

QUESTION TEXT

WHY DO YOU THINK THIS INTERVIEW TOOK AS LONG AS IT DID?

CHECK ALL THAT APPLY.

FIELD 1: LT REASON

FIELD 1 ROUTING

Value	Label	Route
1	HEAVY UTILIZATION	BOX IR3B
2	MANY STATEMENTS	BOX IR3B
3	STATEMENTS WERE DISORGANIZED	BOX IR3B
4	STATEMENTS WERE ELECTRONIC AND HARD TO ACCESS	BOX IR3B
5	R HAD QUESTIONS, COMPREHENSION PROBLEMS	BOX IR3B
6	R WAS CONFUSED/RAMBLING	BOX IR3B
7	MANY INTERRUPTIONS	BOX IR3B
8	ALWAYS TAKES THIS LONG	BOX IR3B
91	OTHER	IR5I - LT_OTHERWHY

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
NONE REPLACES THE FOLLOWING CHESHIRE VARIABLES: 1=IRQS.LT_UTILZ 2=IRQS.LT_STMTS 3=IRQS.LT_CNFUS 4=IRQS.LT_INTER 5=IRQS.LT_ALWAY 91=IRQS.LT_OTHER	6

IR5I

No Entry

QUESTION TEXT**PLEASE PROVIDE MORE INFORMATION BELOW ABOUT THE LENGTH OF THE INTERVIEW.****FIELD 1: LT_OTHERWHY****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUE	BOX IR3B
	Empty	BOX IR3B

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

BOX IR3B

ROUTE TO IR6C - IRDRIVEVB

NOTES:

Because of constraints of CM-Field we did not use this routing in R70. All cases were routed to IR6C – IRDRIVEVB in this box.

IR6B

Yes/No

QUESTION TEXT

IF THERE ARE ANY INSTRUCTIONS THAT WOULD ASSIST AN INTERVIEWER NEXT ROUND IN REACHING THE RESPONDENT'S RESIDENCE (I.E. BUZZER DOES NOT WORK SO CALL, KNOCK ON BACK DOOR, ETC.) PLEASE WRITE THEM IN THE BOX BELOW.

IF THERE ARE NONE, PLEASE SIMPLY HIT 'ENTER.'

FIELD 1: IRDRIVE

FIELD 1 ROUTING

Value	Label	Route
1	YES	IR7-INTCOMM
2	NO	IR7 - INTCOMM

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
IRQS.IRDRIVE	1

IR7

Yes/No

QUESTION TEXT

ARE THERE ANY (OTHER) COMMENTS YOU WOULD LIKE TO MAKE ABOUT THE RESPONDENT OR INTERVIEWING SITUATION (THAT COULD HELP THE NEXT INTERVIEWER COMPLETE THIS CASE)?

FIELD 1: INTCOMM**FIELD 1 ROUTING**

Value	Label	Route
1	YES	IR7OV - INTCVB
2	NO	IR6 - ANYFIX

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
IRQS.INTCOMM	1

IR70V

Verbatim Text

QUESTION TEXT

ENTER THE COMMENTS YOU WOULD LIKE TO MAKE ABOUT THE RESPONDENT OR INTERVIEWING SITUATION. DO NOT INCLUDE COMMENTS HERE THAT YOU WANT THE DATA EDITING STAFF TO FIX.

FIELD 1: INTCVB

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	IR6 - ANYFIX

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
NONE REPLACES CHESHIRE VARIABLES: IRQS.INTCVB1 IRQS.INTCVB2 IRQS.INTCVB3 IRQS.INTCVB4 IRQS.INTCVB5 IRQS.INTCVB6 DATA EDITING ONLY VARIABLES: IRQS.INTCVB7 IRQS.INTCVB8	1

IR6

Yes/No

QUESTION TEXT

IS THERE ANYTHING YOU HAVE RECORDED IN THE CAPI PROGRAM THAT YOU WOULD LIKE HOME OFFICE STAFF TO FIX?

[THIS INCLUDES DATA ITEMS THAT YOU WOULD LIKE THE DATA EDITING STAFF TO FIX.]

FIELD 1: ANYFIX

FIELD 1 ROUTING

Value	Label	Route
1	YES	IR6A - ANYFIXWHAT
2	NO	BOX IR3B

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
IRQS.ANYFIX	1

IR6A

No Entry

QUESTION TEXT

PLEASE ENTER A COMMENT TO DESCRIBE IN AS MUCH DETAIL AS POSSIBLE WHAT YOU WOULD LIKE TO HAVE FIXED.

USE THE COMMENT "LINK" AT THE TOP OF THE SCREEN TO ACTIVATE THE COMMENT BOX.

FIELD 1: ANYFIXWHAT**FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUE	IR10 -SAVEIRQ
	Empty	IR10 -SAVEIRQ

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

IR10

No Entry

QUESTION TEXT

IRQ SESSION IS COMPLETE.

FIELD 1: SAVEIRQ**FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUE	BOX IREND
	Empty	BOX IREND

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

BOX IREND

BOX INSTRUCTIONS

RETURN TO CM-FIELD