	HỞI TẤT CẢ CÁC THÀNH VIÊN						BÓME TRẢ LỚI THAY CHO TRỂ EM DƯỚI 15 TUỔI					
	CHỈ HỚI DƯỚI 6 TUỔI. TỪ 6 TUỔI TRỜ	LÊN >> 7					CHÍ HÓI NGƯỚI 6 TUỔI TRỞ LÊN					
	1	2	3	4	5	6	7	8			11	
	[TÊN] có bị tiêu chảy trong	Trong 4	Trong 4	Có lần	Trong 4	TÊN] có bị	[TÊN] có bị	Trong 4	Trong 4 tuấn qua,	Trong những	TÊN] có bệnh	
		tuẩn qua	tuẩn qua,		tuẩn qua,	bệnh hoặc bị	bệnh/ốm hoặc bị	tuẩn qua,	có mấy ngày [TÊN]	ngày này, có	mãn tính nào	
	không? Tiêu chảy chỉ tính	[TEN] bị	[TÊN] có	cúm, khó	[TÉN] bị	chấn thương	chấn thương	[TÊN] bị	không thể hoạt	mấy ngày do	không? Tức là	
T	nếu bị đi ngoài từ 3 lần trở	tiêu chảy	bi ho,	thở nào	ho, cảm	nào khác	trong 4 tuần qua	bệnh hoặc		bệnh tật, chấn	một bệnh kéo	
Н	lên trong 24 tiếng hoặc có	mấy	cảm cúm	có kèm	cúm, khó	trong 4 tuẩn	không? Ví dụ,	bị chấn		thương, [TÊN]	dài không chữa	
À	ít nhất một lần phân lỏng	ngày?	hoặc khó	theo sốt	thở mấy	qua không? ví	[TÊN] có bị ho,	thương mấy	nội trợ do bệnh	phải nằm một	khỏi được như	
N	có máu.		thở	không?	ngày?	du, bị chẩn	cảm cúm, tiêu	ngày?	tật/chấn thương?	chỗ hoặc phải	đái đường, viêm	
Н			không?			thương do tai	chảy, bị thương		·	có người chăm	gan,v.v	
						nạn, bỏng, v.v.	do tai nạn, bỏng,	ŀ		sóc?		
V							hoặc bệnh nào		mider set consider services		1 1	
							khác không?	1	ĐIỂN MÁ 99 NẾU KHÔNG LIÊN QUAN, VÍ DU NGƯỚI	ĐIỂN MÃ 99 NẾU		
Ē	LƯU Ý: ĐƯỚI 6 THÁNG TUỔI, TIỀU								TÂN TÂT	KHÔNG LIÊN QUAN, VÌ		
N	CHẨY CHỈ TÍNH NẾU ĐI NGOÀI RA MÁU.			oó .					IANTAL	DU NGƯỚI TÂN TẬT	001	
	MAU.		CÓ 1 KHÓNG 2			CÓ1 KHÔNG2				DO MODOLIVIA IVI	KHÔNG2	
	có1					E	có1		NÉU 0 >>11		2	
	KHÓNG 2 (>> 3)	SốNGÀY	(>>6)		SốNGÁY	THEO	KHÔNG2 (>> 11)	Số NGÀY	Số NGÀY	Số NGÁY		
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	1	2	3	4		5	6	7	
м	[CHI] hiện nay có mang thai	[CHI] có dự định sinh	Hiện nay [CHị] có sử dụng	Biện pháp nào?		[CHI] đã sinh con	[CHI] đã sinh		
Ā			biện pháp tránh thai nào	VIÉN UỐNG TRÁNH THAI	L 1	lần nào chưa?	mấy con?	con sinh ra	
			không ? (kể cả các biện	VÒNG TRÁNH THAI	2			có mấy con	
т				THUỐC TIỆM				máy con gá	ii còn
н			còn có tác dụng, không tính			Gợi Ý: Dù đứa trẻ		sống?	
l a l			nạo, hút, phá thai).	MÁNG NGÁN/KEM/VIÊN S	SŮI BQT5	chỉ sống được vài	TÍNH CẢ TRỂ SINH	1	
N	GốM CẢ LẦN MANG THAI NHƯNG			BAO CAO SU			RA CHÍ SỐNG	CHÍ TÍNH CON	
н	KHÔNG SINH DO SẨY THAI			ĐÌNH SẢN NỮ			ĐƯỢC VÀI PHÚT HOẶC VÀI GIỚ	CÓN S	
			làm gì để đẻ thưa hay	ĐÌNH SẢN NAM			HUẠC VAI GIO	NÉU KHÔNG	
v	HIỆN MANG THAI 1(>>5)	có 1(>>5)	không để hay không ?	TÍNH VÒNG KINH	-			VÀO Ô P	HU HỘP
		KHÔNG 2		XUẤT TINH NGOÀI	10	_			
Ė		CHƯA QUYẾT		KHÁC (GHI RŐ)		(>> NGƯỚI T.THEO		Số CON	Số CON
N	KHÔNG3	Ð NH3	KHÓNG2 (>>5)	CHÍNH	PHŲ		Số CON ĐỂ	TRAI	GÁI
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3E. Behaviours that have impacts on health

ASK THOSE MEMBERS AGED FROM 15 ONWARDS

IF THE PERSON IS UNDER 10 >> 3F

	IF THE PERSON IS UNDER 10 >> 3F										
М	1	2	3	4	5						
Е	Has [NAME] ever smoked	Is there any time when	Now does [NAME] smoke		Does [NAME] often						
м	cigarette, or pipe tobacco?	[NAME] smoked cigarette or	everyday, sometimes or		smoke at homeu?						
В	, ,	pipe tobacco everyday (for at	already quit smoking?	cigarette, pipe							
		least month)		tobacco everyday?							
E				At what age?							
R											
С			EVERYDAY1								
0			SOMETIMES 2 (>>5)		YES 1						
D	NO2	NO2	NO SMOKING3		NO2						
Е	(>>NEXT PERSON)	(>>NEXT PERSON)	(>>NEXT PERSON)	AGE							
1											
2											
-											
3					 						
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3F. Health insurance

THOSE AGED OVER 15 REPOND BY THEMSELVES

	ASK ALL HOUSEHOLD MEMBERS			PARE	NT RESPONDS ON BEHALF OF	CHILDREN UNDER 15
	1	2	3	4		5
ľм	CHECK IF [NAME] HAS FREE HEALTHCARE INSURANCE	Why did [NAME] have required	Does [NAME] have	Is it voluntary healthca	re insurance or other	How much
E	CARD/CERTIFICATE	healthcare insurance?	voluntary healthcare	types?		does [NAME]
M			insurance?			pay a year for
В						voluntary
E		WORKING IN PUBLIC SECTOR 1		STUDENTPUPIL HEALTH INSUI		health
R	REQUIRED HEALTHCARE INSURANCE	WORKING IN PRIVATE/FOREIGN INVESTED SE 2		OTHER TYPES OF STUDENT/PI		insurance
	(SECTION 3A, QUEST 5 CODE 1, 2, 3, 4, 5)	RETIRED		VOLUNTARY HEALTH INSURAN		premium?
l c		POLICY BENEFICIARIES 4		VOLUNTARY HEALTH INSURAN		1
0	VOLUNTARY HEALTHCARE INSURANCE2(>>4)	POOR PEOPLE/ETHNIC MINORITY/P135 COMMI 5		HEALTH INSURANCE FOR FAM		
D		OTHER SOCIAL PROTECTION GROUPS		COMMERCIAL HEALTH INSURA	-	WRITE "KB" IF NO
E		THOSE OVER 90 7	YES 1	OTHERS (SPECIFY)		IDEA
1	CARDICERTIFICATE3(>>6)	RELATIVES OF MILITARY OFFICERS 8	NO2(>>6)	NO IDEA	8	
	(SECTION 3A, QUEST 4 CODE 2)	OTHERS 9				THOUSAND VND
i	NO HEALTHCARE INSURANCE CARE	NO IDEA 10				1 YEAR
	(SECTION 3A, QUEST 4 CODE 3)			IST	2ND	
1						
2				L		
3				l		
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3F. Health insurance (conti)

THOSE AGED OVER 15 REPOND BY THEMSELVES

	ASK ALL HOUSEHOLD MEMBERS PARENT RESPONDS ON BEHALF OF CHILDREN UNDER 15												
	6	SCHOLD MEN	7		8		9			10	11		12
M	-	[NAME]	Since its re		Was [NAME]		Which healt	h facility did	[NAME]	For the last 12	Did the hous		Why was the card not
E	start havi		how long v		instruction or	n how to	originally reg	gister his/he	r free	months, has [NAME]	have to pay		used?
M	healthcar		health insu		use this free				rd/certificate	used free healthcare			NOT USING 1
В	insurance		card/certifi		insurance		VILLAGE HEALTH	CENTER	1	insurance	healthcare in	nsurance	
E	card/certif	ficateb?	valid?		card/certifica	te?	REGIONAL GENE	SONI CLINICS	2	card/certificate for	for		HEALTH INSURANCE NOT
										diagnosis/treatment	diagnosis/tre	eatment?	REIMBURSE AT HEALTH FACILITY
R							DISTRICT HOSPI			?			AT HEALTH FAGILIT
							PROVINCIAL HOS						CONTRACTOR CONTRACTOR
С							CENTRAL HOSPI			YES 1			LOWER QUALITY WHEN USING HEALTH INSURANCE CAF 3
0							OTHER STATE-0						USING HEALTH INSURANCE CALS
D	IF THER						PRIVATE HOSPIT			NO2(>>12)			CUMBERSOME PROCEDURES 4
E	INTERVALS, F							LS		1	YES		COMPLISOME PROGEDURES 4
	LATES	TUSE.						S		NO DIAGNOSIS/T 3 (>>NEXT PERSON)		2	HEALTH INSURANCE CARD/
							OTHERS (SPECI			(>>NEXT PERSON)	NO IDEA	3	CERTIFICATE NOT AVAILABLE T 5
l					YES	2	NO REGISTRATION	ON		4	>> NEXT PER	NOSC	OTHERS
			MON	ITHS	NO	7		HEALTH FACIL	FREE HEALTHCARE	4	NEXT FEE	13014	
						1101111771701	DEGUIDED	VOLUNTARY	FREE HEALTHGAKE		REQUIRED	VOLUNTARY	>> NEXT PERSON
<u> </u>	REQUIRED	VOLUNTARY	REQUIRED	VOLUNTARY	REQUIRED	VOLUNTARY	REQUIRED	VOLUNTARY			REGUINED	rocommun	
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3F. Health insurance (end)

THOSE AGED OVER 15 REPOND BY YHEMSELVES PARENT RESPONDS ON BEHALF OF CHILDREN UNDER 15

	ASK ALL HOUSEHOLD MEMBERS		PARENT RESPONDS	ON BEHALF OF CHIL	DREN UNDER 15
	13		14		
м		have health insurance?	Ask those aged between 6 and 89		Quest from 14 to 18, ask member that know most about household healthcare:
E					
М			If annual health insurance of	15.	Has the household requested for exemption due to too costly user-fees
В			80,000VND is offered, are you		for the last 12 months?
E		-	willing to buy for [NAME]?		Yes 1
R	1	5			No 2(>>17)
	· ·	6			
		available in commune		16.	
	1	8			Get exemption1
_	1	9			Obtain reduction in fees 2
E	Waiting for commune to issue	insurance card			Refusal
		(>>next person)			Wait for response 4
)11			the contract of the second sec
			yes1	17.	Has any household member enjoyed charity, fee-exemption/reduction health service
	First	Second	no2		for example, eye surgery, etc?
1					
2					Yes 1
3					No 2(>>3G
4				18.	How much did the household have to pay for access to charity services
5					for example, spending on transportation, tools, drugs, etc?
6					1000 VND
7					
8					
9				1	
10					
11		-		1	
12					
13					
14]	
15]	

3G. Out-patient diagnosis/treatment

ASK ALL MEMBERS

THOSE AGED OVER 15 REPOND BY THEMSELVES

Now	I will ask you abo	out the time whe	n you or your family member rece	eived out-patient treatm	nent at the health fa	cility	PARENT RESPO	ONDS ON BEHALF OF (CHILDREN UNDER 15
	1				2	3	4		or meeting of the Entitle
0	Where did [NAI	ME] go for outpa	itient diagnosis, treatment or chec	k-up for the last 4	How many times	How many times	What are the re	easons for using	out-patient
R	weeks?				did [NAME] use	during that period			
D	- Exclude vaccinat	tion			out-patient	has [NAME]			
E	- For each househ	old member, list the	code and all the healthcare facilities use	d for out-patient	services at this	been transferred	Writ	e in order of importa	ince
R		t for the last 4 week			facility, or medical	to or from other			
	- In case none of h	nousehold members to the next section.	used healthcare facilities, write 99 on the	column of healthcare	staff from this	healthcare		s	
		senter			facility visit for the last 4 weeks?	raciities?		n	_
	_	d health center			last 4 weeks?			r diseases	-
	ı	S		D - 1 - 11 - 11 - 11 - 1	1		1		
		l		Begin with the first healthcare center, ask all					
	1			questions before moving			· ·	ients	
		hospital		on to the next healthcare			,		
		II		facility					
		spitals						nning	
	1	l							
l									
	I						Others (specify:		12
	1				-				
	Member code	Name	Name of healthcare facilities	Healthcare facilities code			1st	2nd	3rd
_		Hame	Traine or regulations inclines	rieditricale racilities code	Times	Times	Reason	Reason	Reason
1		<u> </u>							
2									
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4									
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6				-					
7									
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9									
10									
11									
12									
13									
14									

3G. Out-patient diagnosis/treatment (conti)

THOSE AGED OVER 15 REPOND BY THEMSELVES

No with provided you with diagnosis/treatment? Second Third Second Secon	ASK ALL HOUSEHOLD MEMBERS PARENT RESPONDS ON BEHALF OF CHILDREN UNDER 15											
R diagnosis/reatment?		5			6	7	8	9	1.4			
diagnosis/treatment? diagnosis/treatment? diagnosis/treatments diagnosis/treatment services on demand (i.e. to pay additional money to demand (i.e. to pay additional money to enjoy special services on demand (i.e. to pay additional money to enjoy special serves, quicker and higher-quality care, etc.) Physician 2 services on demand (i.e. to pay additional money to enjoy special serves, quicker and higher-quality care, etc.) Physician 2 including service charges, etc.) Physician 3 services, quicker and secondation exposers, expectation, sps and rewards for medication and services outside this facility. Physician 2 including service charges, medication, sps and rewards for medication and services outside this facility of the last form medication and services and medicine man. 7 to consert, specify 1 serviced staff at this facility. Physician 2 including to the last form medication and services outside this facility of the last form medication and services outside this facility of the last form medication in the last form medication and services outside this facility of the last form medication in the last form medication and services outside this facility of the last form medication in the last form medication in the last form medication and services outside this facility of the last form medication in the last form medication in the last form medication in the last form medication in the last form medication and services outside this facility ou	0	Who provided	l you with		During out-patient	How much did the household	Of the spending, how much		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
Services on demand (i.e. to pay demand (i.e. t	R				diagnosis/treatment	spend (both in cash and in	are the tips and rewards					
R	ь	*			did [NAME] use	kind) at this facility, or pay	given to medical staff?					
Doctor	Ε	Į.			services on	medical staff at this facility						
Decelor	R								here?	Į		
Nurse 3 Serces, quicker and higher-quality care, etc.) Norse 5 Serces, quicker and higher-quality care, etc.) Home-based midwife 6 Traditional medicine man. 7 Others(specify) 8 Serces, quicker and expirese, medication, tips and rewards for medical staff at this facility: First Second Third no. 2 If 0 > 10 1000 VND 1000 VND No. 2(>>12) 1												
Notice 3 series, quicker and Midwife 4 higher-quality care, etc.) Home-based midwife 5 Home-based midwife 6 Traditional medicine man 7 Others(specify 8 No idea 9 Yes		Physician 2			enjoy special	four weeks?		here?				
Midwife		Nurse		3								
Pharmacist.												
Home-based midwife					etc.)				health of patients			
Traditional medicine man						medical staff at this facility;						
Others(specify												
No idea		Others(specify_)	8			1			l		
Not clear, write KB Yes		No idea		9					Todaying Countries of the Countries of t			
First Second Third no. 2 1/1000 VND 1000 VND 1000 VND 1000 VND 2(>>12) 1		l .				outside this facility						
First Second Initial Inc								Not clear, write KB	1	1		
1		First	Second	Third	no2	If 0 >> 10	1					
2 3 4 5 6 6 6 7 8 9						1000 VND	1000 VND	1000 VND	No2(>>12)			
3	1											
4 6	2											
5 6 6 6 7 7 8 9 10 11 11 12 13 13	3											
6	4											
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8 9 10 9 11 11 12 12 13 14	6	:										
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11 12 13	<u> </u>											
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3G. Out-patient diagnosis/treatment (end)

THOSE AGED OVER 15 REPOND BY THEMSELVES

	ASK ALL HOUSEHOLD MEMBERS PARENT RESPONDS ON BEHALF OF CHILDREN UNDER 15													
$\overline{}$														
I I.		12			Of all the times using services		Did this facility transfer or							
		How much did the			at this facility over the last four		introduce [NAME] to							
		household spend on			weeks, did [NAME] use X-ray,	X-ray, ultrsound,	another one for							
				this facility over the last four weeks,	ultrasound, blood test and other		treatment?							
		meals for [NAME] and	last four weeks,		laboratory tests?	laboratory tests for	ueaunent:							
		relatives accompanying		given user-fee	laboratory tests?	[NAME] at this facility								
		during out-patient diagnosis/treatment over		exemption because		over the last four								
		the last four weeks?	result of health	he is categorised as		weeks?								
	weeksi	tile last loui weeks:	insurance?	poor, or aged under			Excluding introduction to other facilities to buy medication, or							
1 1			modranoo.	6 or for other			use image-based diagnosis and							
1 1				resease?	Excluding testing or X-ray services at		testing mentioned in Quest 11							
					other facilities where (NAME) was given treatment	1	và 15.							
					readment									
	Including travel and					Including travel and								
1 1	parking exoenses,					parking expenses, etc.v.v.	yes1							
	etc	'	YES1	YES1	yes1		no2							
	1000 VND	1000 VND		NO2	NO2(>>17)	1000 VND	(>>CO SỞ TIẾP THEO)							
1														
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THOSE AGED OVER 15 REPOND BY THEMSELVES

Now I will ask you about the time when you or your family member received in-patient treatment at the health facility

					2	3	4	5			6		- 1
	1				La the lest	In the last			ne reasons	for in-pati	Who provide	ed you with	- 1
0			ere did [NAME] receive in-patient tre	atment?	In the last		12 months.	Wilat are t	10 10030113	101 III pati	diagnosis/tre	eatment?	
r	- Excluding				12 months,						diag.iodia.tr		1
d	- For each r	nember of the hous	sehold, list the code and health facilities used o	vernight in the			how many						
e	last 12 mont	hs.					,	Write in order	of importance	e			
r	- Unless no	household membe	r used health facility, write 99 in the column of	health facility	L	t	[NAME]	1					
		the next section.			received in-		received in-						
	Village h	ealth center	1		patient	patient	patient	Other disease					
	Commun	ne health center	2		treatment at		treatment at						
	Regiona	l clinics	3	Begin with the	this facility?	at this	this facility?	Work acciden	ts	4	Physician		2
		nospital		first health		facility to		Other injuries	/accidents	5	Nurse		3
	Provinci	al/City hospital	5	center. Do not move to the	l	which	1	Patient monit	oring	6	Midwife		4
l		hospital		next facility until		[NAME]	l	Delivery			Pharmacist		
		ate-owned hospital		all the questions		was	1	Others (speci	fy:	8	Home-based m		
		hospital		are asked.		transferred,					Traditional med		
1		ospitals			l	or					Others(specify		8
		clinics		1	l	introduced?	'l				No idea		9
		nal herb doctor			1		1						
1		iai neib doctor	**		1		1	Reason	Reason	Reason	Healthworker	Healthworker	Healthworker
1	Kember cod	Name	Name of health facility	Facility code	Times	Times	Days	1 1	2	3	1 1 _	2	3
-	vember cod	Name	Name of health facility	1 acmity code	Timbes	781122							
1	\perp						-				1		
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3H. In-patient diagnosis/treatment (conti)

ASK ALL HOUSEHOLD MEMBERS

THOSE AGED OVER 15 REPOND BY THEMSELVES PARENT RESPONDS ON BEHALF OF CHILDREN UNDER 15

1	7	8	9	10	11	12	13	14
	During in-patient		How much did the	Of the total	Of the total	How many times did the	How much did	How much did
0	diagnosis/treatment	diagnosis/treatmen	household spend (both in	expense, how	expense at this	household buy medication	the household	the household
R	did [NAME] use	t did [NAME] share	cash and in kind) at this	much are the	facility, how	outside this facility while	spend on	spend on travel,
D		bed with another	facility, or pay medical staff	tips and	much was	receiving services here, for	medication for	accomodation
E	demand	patient?	at this facility during in-	rewards for	spent on	example, because the		and meals for
R			patient diagnosis/treatment?		medication?	required medicine is not		[NAME] and
				this facility?		available?	the last 12	relatives
1			- Including service charges,	1			months?	accompanying
	(i.e. to pay		medication, tips and rewards for medical staff at this facility;			- Excluding food to strengthen the		during in-patient
	additional money to		medical stall at this racinty;			health of patients.		diagnosis/treat
	enjoy special							ment?
	serces, quicker and					- Excluding the purchase of	Including travel and	
	higher-quality care,		- excluding travel and			medication in other facilities as a	parking excenses,	
	etc.)		accomodation expenses, medication and services outside			result of receiving treatment elswhere	etc	
1			this facility					1
		YES 1	If 0 >> 13			yes 1		1 1
	NO2	NO 2				no2(>>1		1 1
_			1000 VND	1000 VND	1000 VND		1000 VND	1000 VND
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3H. In-patient diagnosis/treatment (end)

ASK ALL HOUSEHOLD MEMBERS

THOSE AGED OVER 15 REPOND BY THEMSELVES PARENT RESPONDS ON BEHALF OF CHILDREN UNDER 15

	15	16	147	140	10	las.
	Of all the times using in-patient	1	17	18	19	20
	services over the last 12 months,	How much did the	Did this facility transfer or		Why was [NAME] not	During those in-patient
0			introduce [NAME] to	transferred to another	transferred?	diagnoses/treatments in
R		ray, ultrsound, blood and	1	facility as requested		the last 12 months, has
D	blood test and other laboratory	,	treatment?	by the doctor?		[NAME] been
E	tests outside this facility?	[NAME] outside this				discharged from
R		facility over the last 12	Excluding introduction to other			hospital before full
		months?	facilities to buy medication, or use image-based diagnosis			treatment due to
	Excluding testing or X-ray services at other		and testing mentioned in Quest			extremely costly fees?
1	facilities where [NAME] was given treatment	Including travel and parking	15.		Long-distance1	
	ucaunent.	expenses, etc.v.v			Economic difficulty2	
	yes 1		yes 1	yes 1 (>>20)	Incurable disease3	yes 1
	no2	1000 VND	no2	no2	Other reasons 4	no2
<u></u>						(>>Next)
1						
2						
3						
4						
5					1	
6						
7						
8						
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10						
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12						
13						
14						

0 R D E R	M E M B E R	medication for [NAME] according to the previous prescription without redicationsis? household spend on medication for [NAME] according to the previous prescription?		weeks, did the household buy medication for [NAME] without diagnosis/treatment and previous	4 Where did the household buy medication for [NAME] without Village health center			5 During the last four weeks, how much did the household spend on medication without prescription?		During the last four weeks, did the household receive free-of-charge oriental or western medicine without prescription?	
	0	The same is a second model of the				Other state-owned hospitals					
	D					Private hospital8 Other hospitals9					
	E					Private clinics 10					
						Traditional herb doctor				Both 1	
						Others12				Only western medicine 2	
						Drugstore				Only oriental medicine3	
		YES	THOUSAND VND		120	Home-made Vietnamese traditional medicine 14 Others (specify				No4	
		NU 2 (>>3)	Oriental	Western	NO	1 2 3		THOUSA Oriental	Western		
1			Chentan	rrestoni	(>>next person)		2	3	Otterital	vvestem	
2											
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\vdash											
11											
12											

OCCUPATION CODE

LEADERS IN ALL FIELDS AND LEVELS

- 11 Communist Party offices of all levels (professional)
- 12 National Assembly and President's Office
- 13 Central Government
- 14 People's Courts and People's Procuracies
- 15 People's councils and People's committees at local level (including professional offices at local level, except legislative organs, mass organizations, hamlet chiefs)
- 16 Mass organizations
- 17 Charity organizations and specific orgnizations for other purposes
- 18 Corporations, companies and equivalent which produce material goods and services
- 19 Firms, factories, manufacturers which create materials goods and services, and small schools

HIGH-LEVEL PROFESSIONALS AT ALL FIELDS

- 21 Natural sciences and Technical sciences
- 22 Life and Health sciences
- 23 Education and Training
- 24 Other professionals

MID-LEVEL PROFESSIONALS AT ALL FIELDS

- 31 Natural sciences and Technical sciences
- 32 Life and Health sciences
- 33 Education and Training
- 34 Other professionals

STAFF (ELEMENTARY PROFESSIONALS, WHITE-COLLAR TECHNICAL PERSONNEL IN ALL FIELDS

- 41 White-collar personnel
- 42 Customer service staff (directly contact with customers in terms of monetary management; transportation arrangement; information support, appointment and phone receptionists)

SKILLED WORKERS IN PERSONAL SERVICES, SOCIAL SAFETY PROTECTION AND SALES BÁN HÀNG CÓ KỸ THUẬT

- 51 Personal services and protection services
- 52 Modelers, salesmen, product introducers/marketors

SKILLED WORKERS IN AGRICULTURE, SYLVICULTURE, AND AQUACULTURE

61 Skilled workers in agriculture, forestry, and aquaculture

SKILLED HANDICRAFTSMEN AND OTHER RELATING SKILLED MANUAL WORKERS

- 71 Skilled miners and builders
- 72 Metal workers, mechanical workers and other workers related
- 73 Workers who make sotiphicated goods, handicraftsmen, printing workers, and other related workers
- 74 Food processing, woodworking, textile and garment, leather and shoemaking workers
- 79 Other handicraftsmen and workers related not elsewhere specified

ASSEMBLERS AND MACHINE OPERATORS

- 81 Production machine operators
- 82 Assemblers and machine operators
- 83 Drivers and operators of motorized equipment

UNSKILLED WORKERS

- 91 Sale and service unskilled workers
- 92 Unskilled workers in agriculture, forestry, and aquaculture
- 93 Unskilled workers in mining, construction, manufacturing, and transportation industry and other unskilled workers

ARMED FORCES

00 Armed forces

INDUSTRY CODE

AGRICULTURE AND FORESTRY

- 01 Agriculture and services related (including livestock raising)
- 02 Forestry and services related

AQUACULTURE

- 05 Catching and raising seaproducts, and relating services MINING INDUSTRY
- 10 Coal mining
- 11 Oil and gas drilling and services related (except: exploring/searching activities)
- 12 Uranium and Thorium mining
- 13 Metal mining
- 14 Mining for rocks, stone, sand, salt, fertilizer... PROCESSING INDUSTRY
- 15 Food and beverage production
- 16 Tobacco production
- 17 Textile
- 18 Fur processing and fur products
- 19 Leather tanning and leather products including wallets, seats, suitcases and footware
- 20 Wood processing and production of wood, bamboo and rattan products (excluding bed, wardrobe, table, chair); production of straw products
- 21 Paper and paper products
- 22 Printing and publishing (books, magazines, newspapers, and copies)
- 23 Coke, crude oil and nuclear processing
- 24 Chemicals and chemical products
- 25 Plastic and Rubber production and products
- 26 Other non-metal mineral products production
- 27 Metal production and processing
- 28 Metal products (except machines and equipment)
- 29 Other equipments and machinery not specified elsewhere
- 30 Office and computer equipment production
- 31 Other electronic, electric equipments not specified elsewhere
- 32 Radio, TV, broadcasting and other communication equipment
- 33 Medical and laboratory equipment, precision instruments, and meters (clocks)
- 34 Motor vehicles and spare parts
- 35 Other means of transportation (boats, railroad, airplane)
- 36 Furniture production and other productions not specified elsewhere
- 37 Recycling, reprocessing

ELECTRICITY, GAS, AND WATER PRODUCTION AND DISTRIBUTION

- 40 Electricity, gas, water steam, hot water production and distribution
- 41 Water exploitation, purification, and distribution

CONSTRUCTION

45 Construction

TRADING; REPAIR OF MOTOR VEHICLES AND MOTORBIKES

FAMILY AND PERSONAL EFFECTS

- 50 Vehicle sales, maintenance and repair; retail sales of fuel
- 51 Wholesale and agent sales (excluding motor vehicles and motorbikes)
- 52 Retail sales (excluding motor vehicles and motorbikes);repairs of family appliances HOTEL AND RESTAURANT

55 Hotel and restaurant (including big and small restaurants, cafe, beverage and drink stands,...)

TRANSPORTATION, WAREHOUSE/ STORAGE SITE, COMMUNICATION

- 60 Road, railroad and pipeline transport
- 61 Waterway transport
- 62 Airline transport
- 63 Services in transport; tourist services
- 64 Post and telecommunications

FINANCE AND CREDIT

- 65 Financial intermediary (excluding insurance and pensioner's social welfare)
- 66 Insurance and pensions (excluding compulsory social insurance)
- 67 Assistance in finance (including social insurance)

SCIENTIFIC AND TECHNOLOGICAL ACTIVITIES

70 Science and technology activities

ACTIVITIES RELATING ASSET BUSINESSES AND CONSULTING SERVICES

- 71 Activities relating real-estate
- 72 Rental of machines and equipment (excluding operators); rental of furnitures and household goods
- 73 Computer-related activities
- 74 Other business activities (accounting, tax, technical and legal consulting, architecture, advertising, protection, housecleaning, photography, packaging, etc.

GOVERNMENT ADMINISTRATION AND NATIONAL DEFENSE; COMPULSORY SOCIAL INSURANCE

75 Government administration and national defense; compulsory social insurance

EDUCATION AND TRAINING

80 Education and training

HEALTH AND SOCIAL RELIEF

- 85 Health and social relief (hospitals, health centers, veterinary care, social relief,...)
 CULTURAL AND SPORT ACTIVITIES
- 90 Cultural and sport activities (broadcasting, television, cinema, recreation and entertainment, press, library, museum, sport,...)

ACTIVITIES OF THE COMMUNIST PARTY, MASS ORGANIZATIONS, PROFESSIONAL ASSOCIATIONS

91 Activities of the Communist party, mass organizations, professional associations

ACTIVITIES OF PUBLIC AND PERSONAL SERVICES

- 92 Disposal collection, public sanitation improvement, and similar activities
- 93 Other service activities (laundry, hairdressing, funerals,...)

ACTIVITIES OF HOUSEWORK SERVICES PROVIDED AT CLIENT'S HOME

95 Housework services provided at client's home

ACTIVITIES OF INTERNATIONAL ORGANIZATIONS AND INTERNATIONAL MASS ONES

99 Activities of international organizations and international mass ones