33a. During the past 12 months, have you had any difficulty moving your fingers or grasping things?

Yes 1

No *(Skip to Q.33c)* 2

Don't know/Can't recall (Skip to Q.33c) . . *8*

b. In what month and year did this most recently begin?

_____ / 19_____
(month) (year)

c. Have you ever been affected by such a condition in the past?

Yes 1

No *(Skip to Q.34a)* 2

Don't know/Can't recall (Skip to Q.34a) . . *8*

d. How many times have you had this condition in the past?

_____

Don't know/Can't recall . . *98*

e. In what year did (this/each of these episodes) begin? *(Record first two episodes.)*

1st: 19_____

Don't know/Can't recall . . *98*

2nd: 19_____

Don't know/Can't recall . . *98*