

---

**2015 NHIS Questionnaire - Sample Child**

**Child Identification**

**Document Version Date:** 31-May-16

---

**Question ID:** CID.001\_00.000 **Instrument Variable Name:** CURRES **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Enter the line number of the person to whom you are speaking.

**01-25** Person number of the respondent for Sample Child

**UniverseText:** Sample child section not started or not completed

**SkipInstructions:**

```
if CSTAT ne empty and CSTAT ne '2' THEN
  if ASTAT = empty or ASTAT = '2' THEN
    goto adult.aid.SADULT
  elseif recontact.RCIFLAG ne '1' THEN
    goto recontact.RCI_BEGIN procedure
  else
    goto back.OUTCOMEB1 procedure
  endif
  goto back.OUTCOMEB1 procedure
endif

<01-25> if this is NOT an allowable line number
  goto ERR_CURRES
elseif CURRES = a line number entered in KNOWSC2
  store CURRES in CSPAVAIL and CSRESP
  goto CSRELTIV
elseif KNOWSC2 = 'Don't know' or 'Refused' or empty (no line numbers in KNOWSC2)
  goto KNOAVAIL
else
  goto CSPAVAIL
endif
```

**Hard Edit:** ERR\_CURRES

\* You have selected a non-selectable person.

\* Please correct.

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Identification**

**Document Version Date: 31-May-16**

---

**Question ID:** CID.010\_00.000 **Instrument Variable Name:** CSPAVAIL **QuestionnaireFileName:** Sample Child

**QuestionText:** The next questions are about [fill1: ALIAS of Sample Child].

Is [fill2:KNOWSC2 names] available to answer some questions about [fill3: HISHER] health?

\* Enter line number of available respondent from list or enter '96' if no one is available.

\* If refused enter CTRL\_R.

**01-25** Person # of person available to answer questions about Sample Child

**96** No person available

**UniverseText:** Someone identified as knowledgeable about child's health and knowledgeable person(s) not entered in CURRE

**SkipInstructions:** <01-25> if line number not equal one of the line numbers in KNOWSC2

```
    goto child.cid.ERR_CSPAVAIL
    else
    store child.cid.CSPAVAIL in child.cid.CSRESP
    goto child.cid.CSRELTIV
endif
```

```
<96> store child.cid.CSPAVAIL in child.cid.CSRESP
    goto cbk.CCALLBK1
```

```
<R> store '4' in CSTAT(FAMINT)
    if ASTAT = empty or ASTAT = '2' THEN
    goto adult.aid.SADULT
    elseif recontact.RCIFLAG ne '1' THEN
    goto recontact.RCI_BEGIN procedure
    else
    goto back.OUTCOMEB1 procedure
endif
```

**Hard Edit:** ERR\_CSPAVAIL

\* You have selected a non-selectable person.

\* Please correct.

---

---

**2015 NHIS Questionnaire - Sample Child****Child Identification****Document Version Date: 31-May-16**

---

**Question ID:** CID.030\_00.000 **Instrument Variable Name:** CSRELTIV **QuestionnaireFileName:** Sample Child**QuestionText:** (book) C1

[fill1: The next questions are about [fill2: ALIAS of Sample Child].]  
What is your relationship to [fill2: ALIAS of Sample Child]?

- 01 Parent (Biological, adoptive, or step)
- 02 Grandparent
- 03 Aunt/Uncle
- 04 Brother/Sister
- 05 Other relative
- 06 Legal guardian
- 07 Foster parent
- 08 Other non-relative
- 97 Refused
- 99 Don't know

**UniverseText:** Someone identified as knowledgeable about child's health**SkipInstructions:** <1-8,R,D> If CSRESP = demographics.hhc.RELRESP\_A  
goto child.chs.BWGT\_LB  
elseif CSRESP = demographics.hhc.HHRESP  
goto child.chs.BWGT\_LB  
else]  
goto CSPVERF\_S  
endif]

---

**Question ID:** CID.040\_00.000 **Instrument Variable Name:** CSPVERF\_S **QuestionnaireFileName:** Sample Child**QuestionText:** \* Please verify the following information about the sample child before proceeding:

I have recorded [fill1: ALIAS of Sample Child]'s sex as [fill2: Sex of Sample Child]. Is this correct?

\* If respondent "refuses" or says "don't know", enter "1" for "yes".

- 1 Yes
- 2 No

**UniverseText:** Respondent is not the person entered in HHRESP or RELRESP\_A.**SkipInstructions:** <1> goto CSPVERF\_A  
<2> goto NEWSEX

---

**2015 NHIS Questionnaire - Sample Child**

**Child Identification**

**Document Version Date: 31-May-16**

---

**Question ID:** CID.041\_00.000 **Instrument Variable Name:** NEWSEX **QuestionnaireFileName:** Sample Child

**QuestionText:** Is [fill: ALIAS of Sample Child] Male or Female?

\* If don't know or refused enter your best guess of the child's sex.

- 1 Male
- 2 Female

**UniverseText:** Respondent said child's sex is not correct.

**SkipInstructions:** <1,2> store NEWSEX in SEX  
goto ERR\_NEWSEX  
reset CSPVERF\_S  
goto CSPVERF\_S

**Hard Edit:** ERR\_NEWSEX

\* The gender will now be changed to [fill: NEWSEX].

goto CSPVERF\_S (as the default goto)

---

**Question ID:** CID.042\_00.000 **Instrument Variable Name:** CSPVERF\_A **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Please verify the following information about the sample child before proceeding:

I have recorded [fill1: ALIAS of Sample Child]'s age as [fill2: Age of Sample Child] old. Is this correct?

\* If respondent "refuses" or says "don't know", enter "1" for "yes".

- 1 Yes
- 2 No

**UniverseText:** Respondent verified child's sex

**SkipInstructions:** <1> goto CSPVERF\_D  
<2> goto NEWAGE

---

---

**2015 NHIS Questionnaire - Sample Child**
**Child Identification**
**Document Version Date: 31-May-16**


---

**Question ID:** CID.043\_00.000 **Instrument Variable Name:** NEWAGE **QuestionnaireFileName:** Sample Child

**QuestionText:** How old is [fill1: ALIAS of Sample Child]?

\* If age given in months, weeks, or days, convert age to appropriate year. If less than one year old, enter "0".

**000-120** Age in years

**UniverseText:** Respondent said child's age is not correct

**SkipInstructions:** <0-120, Refused, Don't know>  
 if NEWAGE = 'Refused' or NEWAGE = 'Don't know' or NEWAGE = AGE  
 reset CSPVERF\_A  
 goto ERR\_NEWAGE  
 else  
 store NEWAGE in AGE  
 goto NEWDOB\_M

**Hard Edit:** ERR\_NEWAGE

\*Age of [fill1: ALIAS of Sample Child] remains [fill2: Age of Sample Child] years old.

goto CSPVERF\_A (whether suppressed or not)

---

**Question ID:** CID.044\_00.000 **Instrument Variable Name:** CSPVERF\_D **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Please verify the following information about the sample child before proceeding:

I have recorded [fill1: ALIAS of Sample Child]'s birthday as [fill2: Birthday of Sample Child]. Is this correct?

\* If respondent "refuses" or says "don't know", enter "1" for "yes".

**1** Yes

**2** No

**UniverseText:** Respondent verified child's sex

**SkipInstructions:** <1> if AGE of Sample Child ge '18'  
 goto CNO\_MORE  
 else  
 goto child.chs.BWGT\_LB  
 endif  
 <2> goto NEWDOB\_M

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Identification**

**Document Version Date: 31-May-16**

---

**Question ID:** CID.046\_01.000 **Instrument Variable Name:** NEWDOB\_M **QuestionnaireFileName:** Sample Child

**QuestionText:** 1 of 3

What is [fill: ALIAS of Sample Child]'s birthday?

\*Enter month of birth.

- 01 January
- 02 February
- 03 March
- 04 April
- 05 May
- 06 June
- 07 July
- 08 August
- 09 September
- 10 October
- 11 November
- 12 December

**UniverseText:** Respondent said child's date of birth is not correct or child's age is not correct

**SkipInstructions:** <01-12, Refused, Don't know> goto NEWDOB\_D

---

**Question ID:** CID.046\_02.000 **Instrument Variable Name:** NEWDOB\_D **QuestionnaireFileName:** Sample Child

**QuestionText:** 2 of 3

\* Enter day of birth.

01-31 Day of the month

**UniverseText:** Respondent said child's date of birth is not correct or child's age is not correct

**SkipInstructions:** <01-31,Refused,Don't know> goto NEWDOB\_Y

If days not valid, goto ERR\_NEWDOB\_D

**Hard Edit:** ERR\_NEWDOB\_D

\* [fill2: NEWDOB\_D] is not a valid day for [fill3: NEWDOB\_M].

\* Please correct.

---

**2015 NHIS Questionnaire - Sample Child**

**Child Identification**

**Document Version Date: 31-May-16**

---

**Question ID:** CID.046\_03.000 **Instrument Variable Name:** NEWDOB\_Y **QuestionnaireFileName:** Sample Child

**QuestionText:** 3 of 3

\* Enter year of birth.

**1880-2020** Year of birth

---

---





**2015 NHIS Questionnaire - Sample Child**

**Child Identification**

**Document Version Date: 31-May-16**

goto CSPVERF\_A (whether suppressed or not)

---

---

---

**2015 NHIS Questionnaire - Sample Child**
**Child Health Status & Limitations**
**Document Version Date: 27-May-16**


---

**Question ID:** CHS.010\_01.000 **Instrument Variable Name:** BWGT\_LB **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

What was [fill: S.C.name]'s birth weight?

\* Enter 'M' to record metric measurements.

<b>01-15</b>	1-15 pounds
<b>97</b>	Refused
<b>99</b>	Don't know
<b>M</b>	Metric

**UniverseText:** Sample children <18

**SkipInstructions:** <1-12> [goto BWGT\_OZ]  
 <13-15> [goto ERR1\_BWGT\_LB]  
 <R,D> [goto CHGT\_FT]  
 <M> [goto BWGT\_GR]  
 [If NE <1-15, M, D, R> goto ERR2\_BWGT\_LB]

**Hard Edit:** ERR2\_BWGT\_LB

\* Only "1-15" or "M" or "Don't know/Refused" allowed in this field.  
 \* Please correct.

**Soft Edit:** ERR1\_BWGT\_LB

\* [fill: BWGT\_LB] is an unusually high number.  
 \* Please verify.

---

**Question ID:** CHS.010\_02.000 **Instrument Variable Name:** BWGT\_OZ **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Enter ounces.

<b>00-15</b>	0-15 ounces
<b>97</b>	Refused
<b>99</b>	Don't know
<b>Blank</b>	Blank

**UniverseText:** Sample children <18 who have a value entered for weight in pounds.

**SkipInstructions:** <0-15,R,D> [goto CHGT\_FT]  
 [if BWGT\_LB = <0-15, D, R> and BWGT\_OZ = <empty> go to CHGT\_FT]

---

---

**2015 NHIS Questionnaire - Sample Child**
**Child Health Status & Limitations**
**Document Version Date: 27-May-16**


---

**Question ID:** CHS.011\_00.000 **Instrument Variable Name:** BWGT\_GR **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Enter weight in grams.

<b>0500</b>	500 grams or less
<b>0501-6899</b>	501-6899 grams
<b>6900</b>	6900+ grams
<b>9997</b>	Refused
<b>9999</b>	Don't know

**UniverseText:** Sample children <18 whose birth weight will be entered in metric.

**SkipInstructions:** <500-5485, R,D> [goto CHGT\_FT]  
<5486-6900> [goto ERR\_BWGT\_GR]

**Soft Edit:** ERR\_BWGT\_GR

\* [fill1: BWGT\_GR] is an unusually high number (equal to [fill2] pounds, [fill3] ounces).  
\* Please verify.

---

**Question ID:** CHS.020\_01.000 **Instrument Variable Name:** CHGT\_FT **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

How tall is [fill: S.C. name] now (without shoes)?

\* If the child's height is given in inches, press 'ENTER' at feet and enter the measure in inches (36 inches maximum).

\* Enter 'M' to record metric measurements.

<b>00-07</b>	0-7 feet
<b>97</b>	Refused
<b>99</b>	Don't know
<b>M</b>	Metric

**UniverseText:** Sample children 12+

**SkipInstructions:** <empty> [goto CHGT\_IN]  
<0-7> [goto CHGT\_IN]  
<R,D> [goto CWGT\_LB]  
<M> [goto CHGT\_M]  
[If NE <0-7, M, D, R> go to ERR\_CHGT\_FT]

**Hard Edit:** ERR\_CHGT\_FT

\* Only "0-7" or "M" or "Don't know/Refused" allowed in this field.  
\* Please correct.

---

---

**2015 NHIS Questionnaire - Sample Child**
**Child Health Status & Limitations**
**Document Version Date: 27-May-16**


---

**Question ID:** CHS.020\_02.000 **Instrument Variable Name:** CHGT\_IN **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Enter inches.

<b>00-36</b>	0-36 inches
<b>97</b>	Refused
<b>99</b>	Don't know

**UniverseText:** Sample children 12+ whose height in feet is 0-7 or is left empty.

**SkipInstructions:** <0-36,R,D> If (CHGT\_FT = '0', 'empty') and (CHGT\_IN = '0', 'empty')  
 goto ERR1\_CHGT\_IN  
 elseif CHGT\_FT = '1-7' and CHGT\_IN ge '12'  
 goto ERR2\_CHGT\_IN  
 elseif (SEX = '1' and  
 AGE = '12' and (CHTINCH lt '53' or CHTINCH gt '68')) or  
 AGE = '13' and (CHTINCH lt '55' or CHTINCH gt '72')) or  
 AGE = '14' and (CHTINCH lt '58' or CHTINCH gt '73')) or  
 AGE = '15' and (CHTINCH lt '60' or CHTINCH gt '74')) or  
 AGE = '16' and (CHTINCH lt '61' or CHTINCH gt '74')) or  
 AGE = '17' and (CHTINCH lt '62' or CHTINCH gt '75')) or  
 (SEX = '2' and  
 AGE = '12' and (CHTINCH lt '54' or CHTINCH gt '68')) or  
 AGE = '13' and (CHTINCH lt '55' or CHTINCH gt '69')) or  
 AGE = '14' and (CHTINCH lt '57' or CHTINCH gt '69')) or  
 AGE = '15' and (CHTINCH lt '57' or CHTINCH gt '69')) or  
 AGE = '16' and (CHTINCH lt '57' or CHTINCH gt '70')) or  
 AGE = '17' and (CHTINCH lt '57' or CHTINCH gt '69'))  
 goto ERR3\_CHGT\_IN  
 else  
 goto CWGT\_LB

**Hard Edit:** ERR1\_CHGT\_IN

\* Must enter an answer in at least the inches item.  
 \* Please correct.

ERR2\_CHGT\_IN

\* Number of inches exceeds maximum allowed.  
 \* Please correct.

**Soft Edit:** ERR3\_CHGT\_IN

\* Please verify that the height was entered correctly. Probe only if necessary.

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date:** 27-May-16

---

**Question ID:** CHS.021\_01.000 **Instrument Variable Name:** CHGT\_M **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Enter height in metric.

\* If the child's height is given in centimeters, press 'ENTER' at meters and enter the measure in centimeters (241 centimeters maximum).

**0-2** 0-2 meters

**7** Refused

**9** Don't know

**Blank** Blank

**UniverseText:** Sample children 12+ whose current height will be entered in metric.

**SkipInstructions:** <0-2,empty> [goto CHGT\_CM]  
<R,D> [goto CWGT\_LB]

---

**2015 NHIS Questionnaire - Sample Child**
**Child Health Status & Limitations**
**Document Version Date: 27-May-16**


---

**Question ID:** CHS.021\_02.000 **Instrument Variable Name:** CHGT\_CM **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Enter centimeters.

**000-241** 0-241 centimeters

**Blank** Blank

**UniverseText:** Sample children 12+ whose weight will be entered in metric, and who entered "0-2" for height in meters or left it empty.

**SkipInstructions:** <0-241,R,D> If (CHGT\_M = '0', 'empty') and (CHGT\_CM = '0', 'empty')  
    goto ERR1\_CHGT\_CM  
    elseif (CHGT\_M eq '2' and CHGT\_CM gt '41') or (CHGT\_M eq '1' and CHGT\_CM gt '141')  
        goto ERR2\_CHGT\_CM  
    elseif (SEX = '1' and  
        AGE = '12' and (CHTCM lt '137' or CHTCM gt '174')) or  
        AGE = '13' and (CHTCM lt '140' or CHTCM gt '184')) or  
        AGE = '14' and (CHTCM lt '148' or CHTCM gt '186')) or  
        AGE = '15' and (CHTCM lt '152' or CHTCM gt '189')) or  
        AGE = '16' and (CHTCM lt '156' or CHTCM gt '189')) or  
        AGE = '17' and (CHTCM lt '157' or CHTCM gt '192')) or  
    (SEX = '2' and  
        AGE = '12' and (CHTCM lt '138' or CHTCM gt '173')) or  
        AGE = '13' and (CHTCM lt '141' or CHTCM gt '176')) or  
        AGE = '14' and (CHTCM lt '145' or CHTCM gt '176')) or  
        AGE = '15' and (CHTCM lt '145' or CHTCM gt '177')) or  
        AGE = '16' and (CHTCM lt '145' or CHTCM gt '177')) or  
        AGE = '17' and (CHTCM lt '145' or CHTCM gt '176'))  
    goto ERR3\_CHGT\_CM  
    else  
        goto CWGT\_LB

**Hard Edit:** ERR1\_CHGT\_CM

\* Must enter an answer at least in the centimeters item.  
\* Please correct.

ERR2\_CHGT\_CM

\* Total height exceeds maximum allowed.  
\* Please correct.

**Soft Edit:** ERR3\_CHGT\_CM

\* Please verify that the height was entered correctly. Probe only if necessary.

---

## 2015 NHIS Questionnaire - Sample Child

### Child Health Status & Limitations

Document Version Date: 27-May-16

**Question ID:** CHS.022\_00.000 **Instrument Variable Name:** CWGT\_LB **QuestionnaireFileName:** Sample Child

**QuestionText:** How much does [fill: S.C. name] weigh now (without shoes)?

\* Enter 'M' to record metric measurements.

\* Enter '500' if 500 pounds or more.

<b>001-500</b>	1-500 pounds
<b>997</b>	Refused
<b>999</b>	Don't know
<b>M</b>	Metric

**UniverseText:** Sample children 12+

**SkipInstructions:** <1-500> if CWGT\_LB lt '1' or CWGT\_LB gt '500'  
 goto ERR1\_CWGT\_LB  
 elseif (SEX = '1' and  
 AGE = '12' and (CWGT\_LB lt '62' or CWGT\_LB gt '209')) or  
 AGE = '13' and (CWGT\_LB lt '70' or CWGT\_LB gt '247')) or  
 AGE = '14' and (CWGT\_LB lt '83' or CWGT\_LB gt '266')) or  
 AGE = '15' and (CWGT\_LB lt '94' or CWGT\_LB gt '267')) or  
 AGE = '16' and (CWGT\_LB lt '98' or CWGT\_LB gt '306')) or  
 AGE = '17' and (CWGT\_LB lt '106' or CWGT\_LB gt '317')) or  
 (SEX = '2' and  
 AGE = '12' and (CWGT\_LB lt '62' or CWGT\_LB gt '212')) or  
 AGE = '13' and (CWGT\_LB lt '73' or CWGT\_LB gt '238')) or  
 AGE = '14' and (CWGT\_LB lt '84' or CWGT\_LB gt '252')) or  
 AGE = '15' and (CWGT\_LB lt '84' or CWGT\_LB gt '238')) or  
 AGE = '16' and (CWGT\_LB lt '87' or CWGT\_LB gt '257')) or  
 AGE = '17' and (CWGT\_LB lt '90' or CWGT\_LB gt '292'))  
 goto ERR2\_CWGT\_LB  
 elseif CHGT\_FLG = '1' and CWGT\_FLG = '1' and AGE ge '2'  
 goto ADD\_1  
 elseif CHGT\_FLG = '1' and CWGT\_FLG = '1' and AGE lt '2'  
 goto ADD1\_2  
 else  
 calculate the BMI (Body Mass Index) – See CBMI spec page  
 <R,D> if AGE ge '2'  
 goto ADD\_1  
 else  
 goto ADD1\_2  
 <M> goto CWGT\_KG

**Hard Edit:** ERR1\_CWGT\_LB

\* Weight is out of range (1-500).

\* Please correct.

**Soft Edit:** ERR2\_CWGT\_LB

\* Please verify that the weight was entered correctly. Probe only if necessary.

---

**2015 NHIS Questionnaire - Sample Child**
**Child Health Status & Limitations**
**Document Version Date: 27-May-16**


---

**Question ID:** CHS.023\_00.000 **Instrument Variable Name:** CWGT\_KG **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Enter weight in kilograms.

**002-226** 2-226 kilograms

**UniverseText:** Sample children 12+ whose weight will be entered in metric.

**SkipInstructions:** <2-226> if CWGT\_KG lt '2' or CWGT\_KG gt '226'  
 goto ERR1\_CWGT\_KG  
 elseif (SEX = '1' and  
 AGE = '12' and (CWGT\_KG = '28' or CWGT\_KG = '95')) or  
 AGE = '13' and (CWGT\_KG = '32' or CWGT\_KG = '112')) or  
 AGE = '14' and (CWGT\_KG = '38' or CWGT\_KG = '121')) or  
 AGE = '15' and (CWGT\_KG = '42' or CWGT\_KG = '121')) or  
 AGE = '16' and (CWGT\_KG = '44' or CWGT\_KG = '139')) or  
 AGE = '17' and (CWGT\_KG = '48' or CWGT\_KG = '144')) or  
 (SEX = '2' and  
 AGE = '12' and (CWGT\_KG = '28' or CWGT\_KG = '96')) or  
 AGE = '13' and (CWGT\_KG = '33' or CWGT\_KG = '108')) or  
 AGE = '14' and (CWGT\_KG = '38' or CWGT\_KG = '114')) or  
 AGE = '15' and (CWGT\_KG = '38' or CWGT\_KG = '108')) or  
 AGE = '16' and (CWGT\_KG = '39' or CWGT\_KG = '117')) or  
 AGE = '17' and (CWGT\_KG = '41' or CWGT\_KG = '133'))  
 goto ERR2\_CWGT\_KG  
 elseif CHGT\_FLG = '1' and CWGT\_FLG = '1' and AGE ge '2'  
 goto ADD\_1  
 elseif CHGT\_FLG = '1' and CWGT\_FLG = '1' and AGE lt '2'  
 goto ADD1\_2  
 else  
 calculate the BMI (Body Mass Index) – See CBMI spec page  
 <R,D> if AGE ge '2'  
 goto ADD\_1  
 else  
 goto ADD1\_2

**Hard Edit:** ERR1\_CWGT\_KG

\* Weight is out of range (2-226).  
 \* Please correct.

**Soft Edit:** ERR2\_CWGT\_KG

\* Please verify that the weight was entered correctly. Probe only if necessary.

---



---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.031\_02.000 **Instrument Variable Name:** ADD1\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** Has a doctor or health professional ever told you that [fill: S.C. name] had...  
an intellectual disability, also known as mental retardation?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [goto ADD1\_3]

---

**Question ID:** CHS.031\_03.000 **Instrument Variable Name:** ADD1\_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]  
\* Read if necessary.  
Has a doctor or health professional ever told you that [fill: S.C. name] had...  
Any other developmental delay?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [goto CONDL]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.032\_01.000 **Instrument Variable Name:** ADD\_1 **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

Has a doctor or health professional ever told you that [fill: S.C. name] had...

Attention Deficit Hyperactivity Disorder (ADHD) or Attention Deficit Disorder (ADD)?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children 2-17

**SkipInstructions:** <1,2,R,D> [go to ADD\_2]

---

**Question ID:** CHS.032\_02.000 **Instrument Variable Name:** ADD\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

Has a doctor or health professional ever told you that [fill: S.C. name] had....

an intellectual disability, also known as mental retardation?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children 2-17

**SkipInstructions:** <1,2,R,D> [go to AUTISM]

---

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.032\_02.010 **Instrument Variable Name:** AUTISM **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

\* Read if necessary.

Has a doctor or health professional ever told you that [fill: S.C. name] had...

Autism, Asperger's disorder, pervasive developmental disorder, or autism spectrum disorder?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children 2-17

**SkipInstructions:** <1,2,R,D> [go to ADD\_3]

---

**Question ID:** CHS.032\_03.000 **Instrument Variable Name:** ADD\_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

\* Read if necessary.

Has a doctor or health professional ever told you that [fill: S.C. name] had...

Any other developmental delay?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children 2-17

**SkipInstructions:** <1,2,R,D> [go to CONDL]

---

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date:** 27-May-16

---

**Question ID:** CHS.060\_00.000 **Instrument Variable Name:** CONDL **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C2 ?[F1]

Looking at this list, has a doctor or health professional ever told you that [fill: SC name] had any of these conditions?

\*Read if necessary.

Down syndrome  
Cerebral palsy  
Muscular dystrophy  
Cystic fibrosis  
Sickle cell anemia  
Diabetes  
Arthritis  
Congenital heart disease  
Other heart condition

**UniverseText:** Sample children <18

**SkipInstructions:** <1> [goto CONDL1] <2,R,D> [goto CPOX]

---

**Question ID:** CHS.061\_00.000 **Instrument Variable Name:** CONDL1 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C2 ? [F1]

Which ones?

\* Enter all that apply, separate with commas.

**UniverseText:** Sample children <18 and CONDL=1

**SkipInstructions:** <1-9, R,D> [go to CPOX]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date:** 27-May-16

---

**Question ID:** CHS.070\_00.000 **Instrument Variable Name:** CPOX **QuestionnaireFileName:** Sample Child

**QuestionText:** Has [fill: SC Name] EVER had chickenpox?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1> [go to CPOX12MO]  
<2, D, R> [go to CASHMEV]

---

**Question ID:** CHS.072\_00.000 **Instrument Variable Name:** CPOX12MO **QuestionnaireFileName:** Sample Child

**QuestionText:** Has [fill: SC name] had chickenpox DURING THE PAST 12 MONTHS?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who have had chickenpox

**SkipInstructions:** <1,2,R,D> [goto CASHMEV]

---

**Question ID:** CHS.080\_00.000 **Instrument Variable Name:** CASHMEV **QuestionnaireFileName:** Sample Child

**QuestionText:** ? [F1]

Has a doctor or other health professional EVER told you that [fill: SC name] had asthma?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1> [go to CASSTILL]  
<2,R,D> if AGE LE 2 [go to CCONDT1\_1];  
else [go to CCONDT\_1]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date:** 27-May-16

---

**Question ID:** CHS.085\_00.000 **Instrument Variable Name:** CASSTILL **QuestionnaireFileName:** Sample Child

**QuestionText:** Does [fill: SC name] still have asthma?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 and doctor has informed that child had asthma

**SkipInstructions:** <1,2,R,D> [go to CASHYR]

---

**Question ID:** CHS.090\_00.000 **Instrument Variable Name:** CASHYR **QuestionnaireFileName:** Sample Child

**QuestionText:** The following questions are about [fill: SC name]'s asthma DURING THE PAST 12 MONTHS.

DURING THE PAST 12 MONTHS, has [fill: SC name] had an episode of asthma or an asthma attack?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 and doctor has informed that child had asthma

**SkipInstructions:** <1,2,R,D> [goto CASMERYR]

---

**Question ID:** CHS.100\_00.000 **Instrument Variable Name:** CASMERYR **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, did [fill1: SC name] have to visit an emergency room or urgent care center because of [fill2: his/her] asthma?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 and doctor has informed that child had asthma

**SkipInstructions:** <1,2,R,D> if AGE LE 2 [go to CCONDT1\_1];  
else [go to CCONDT\_1]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date:** 27-May-16

---

**Question ID:** CHS.111\_01.000 **Instrument Variable Name:** CCONDT1\_1 **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Hay fever?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children LE 2

**SkipInstructions:** <1,2,R,D> [go to CCONDT1\_2]

---

**Question ID:** CHS.111\_02.000 **Instrument Variable Name:** CCONDT1\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Any kind of respiratory allergy?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children LE 2

**SkipInstructions:** <1,2,R,D> [go to CCONDT1\_3]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.111\_03.000 **Instrument Variable Name:** CCONDT1\_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Any kind of food or digestive allergy?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children LE 2

**SkipInstructions:** <1,2,R,D> [go to CCONDT1\_4]

---

**Question ID:** CHS.111\_04.000 **Instrument Variable Name:** CCONDT1\_4 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Eczema or any kind of skin allergy?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children LE 2

**SkipInstructions:** <1,2,R,D> [go to CCONDT1\_5]

---



---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.111\_05.000 **Instrument Variable Name:** CCONDT1\_5 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Frequent or repeated diarrhea or colitis?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children LE 2

**SkipInstructions:** <1,2,R,D> [go to CCONDT1\_6]

---

**Question ID:** CHS.111\_06.000 **Instrument Variable Name:** CCONDT1\_6 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Anemia?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children LE 2

**SkipInstructions:** <1,2,R,D> [go to CCONDT1\_8]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.111\_08.000 **Instrument Variable Name:** CCONDT1\_8 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Three or more ear infections?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children LE 2

**SkipInstructions:** <1,2,R,D> [go to CCONDT1\_9]

---

**Question ID:** CHS.111\_09.000 **Instrument Variable Name:** CCONDT1\_9 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Seizures?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children LE 2

**SkipInstructions:** <1,2,R,D> [go to CHSTATYR]

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date:** 27-May-16

---

**Question ID:** CHS.115\_01.000 **Instrument Variable Name:** CCONDT\_1 **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Hay fever?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children = 3-17

**SkipInstructions:** <1,2,R,D> [go to CCONDT\_2]

---

**Question ID:** CHS.115\_02.000 **Instrument Variable Name:** CCONDT\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Any kind of respiratory allergy?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children = 3-17

**SkipInstructions:** <1,2,R,D> [go to CCONDT\_3]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.115\_03.000 **Instrument Variable Name:** CCONDT\_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Any kind of food or digestive allergy?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children = 3-17

**SkipInstructions:** <1,2,R,D> [go to CCONDT\_4]

---

**Question ID:** CHS.115\_04.000 **Instrument Variable Name:** CCONDT\_4 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Eczema or any kind of skin allergy?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children = 3-17

**SkipInstructions:** <1,2,R,D> [go to CCONDT\_5]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.115\_05.000 **Instrument Variable Name:** CCONDT\_5 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Frequent or repeated diarrhea or colitis?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children = 3-17

**SkipInstructions:** <1,2,R,D> [go to CCONDT\_6]

---

**Question ID:** CHS.115\_06.000 **Instrument Variable Name:** CCONDT\_6 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Anemia?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children = 3-17

**SkipInstructions:** <1,2,R,D> [go to CCONDT\_7]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.115\_07.000 **Instrument Variable Name:** CCONDT\_7 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Frequent or severe headaches, including migraines?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children = 3-17

**SkipInstructions:** <1,2,R,D> [go to CCONDT\_8]

---

**Question ID:** CHS.115\_08.000 **Instrument Variable Name:** CCONDT\_8 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Three or more ear infections?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children = 3-17

**SkipInstructions:** <1,2,R,D> [go to CCONDT\_9]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.115\_09.000 **Instrument Variable Name:** CCONDT\_9 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Seizures?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children = 3-17

**SkipInstructions:** <1,2,R,D> [go to CCONDT\_10]

---

**Question ID:** CHS.115\_10.000 **Instrument Variable Name:** CCONDT\_10 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...

Stuttering or stammering?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children = 3-17

**SkipInstructions:** <1,2,R,D> [goto CHSTATYR]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.210\_00.000 **Instrument Variable Name:** CHSTATYR **QuestionnaireFileName:** Sample Child

**QuestionText:** Compared with 12 months ago, would you say [fill: SC name]'s health is now better, worse, or about the same?

- 1 Better
- 2 Worse
- 3 About the same
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children < 18

**SkipInstructions:** <1-3,R,D> [if AGE le <4> goto CCOLD2W; else goto SCHDAYR]

---

**Question ID:** CHS.220\_00.000 **Instrument Variable Name:** SCHDAYR **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS about how many days did [fill2: SC name] miss school because of illness or injury?

\* Enter '996' if child did not go to school in the past 12 months.

- 000 None
- 001-240 1-240 days
- 996 Did not go to school
- 997 Refused
- 999 Don't know

**UniverseText:** Sample children 5-17

**SkipInstructions:** <0-99,996,R,D> [goto CCOLD2W]  
<100-240> [go to ERR1\_SCHDAYR]  
<241-995> [goto ERR2\_SCHDAYR]

**Hard Edit:** ERR2\_SCHDAYR

\* "241-995" days not allowed in this field.  
\* Please correct.

**Soft Edit:** ERR1\_SCHDAYR

[fill4: SCHDAYR] is an unusually large number. Did [fill2: SC name] miss [fill: SCHDAYR] days of school because of illness or injury?  
\* Please verify.

---



**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date:** 27-May-16

---

**Question ID:** CHS.230\_00.000 **Instrument Variable Name:** CCOLD2W **QuestionnaireFileName:** Sample Child

**QuestionText:** These next questions are about [fill: SC name]'s recent health DURING THE LAST 2 WEEKS.

Did [fill: SC name] have a head cold or chest cold that started DURING THE LAST 2 WEEKS?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CINTIL2W]

---

**Question ID:** CHS.240\_00.000 **Instrument Variable Name:** CINTIL2W **QuestionnaireFileName:** Sample Child

**QuestionText:** Did [fill: SC name] have a stomach or intestinal illness with vomiting or diarrhea that started DURING THE LAST 2 WEEKS?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CHEARST1]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.250\_00.000 **Instrument Variable Name:** CHEARST1 **QuestionnaireFileName:** Sample Child

**QuestionText:** Which statement best describes [fill: S.C. name]'s hearing without a hearing aid: Excellent, good, a little trouble hearing, moderate trouble, a lot of trouble, or is [fill: SC's name] deaf?

- 1 Excellent
- 2 Good
- 3 A little trouble hearing
- 4 Moderate trouble
- 5 A lot of trouble
- 6 Deaf
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1-6,R,D> [go to CVISION]

---

**Question ID:** CHS.260\_00.000 **Instrument Variable Name:** CVISION **QuestionnaireFileName:** Sample Child

**QuestionText:** Does [fill1: SC name] have any trouble seeing [fill2: , even when wearing glasses or contact lenses]?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1> [goto CBLIND]  
<2,R,D> [goto IHSPEQ]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date:** 27-May-16

---

**Question ID:** CHS.270\_00.000 **Instrument Variable Name:** CBLIND **QuestionnaireFileName:** Sample Child

**QuestionText:** Is [fill: SC name] blind or unable to see at all?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 having trouble seeing

**SkipInstructions:** <1,2,R,D> [goto IHSPEQ]

---

**Question ID:** CHS.290\_00.000 **Instrument Variable Name:** IHSPEQ **QuestionnaireFileName:** Sample Child

**QuestionText:** Does [fill1: SC name] have any impairment or health problem that requires [fill2: him/her] to use special equipment, such as a brace, a wheelchair, or a hearing aid (excluding ordinary eyeglasses or corrective shoes)?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto IHMOB]

---

**Question ID:** CHS.300\_00.000 **Instrument Variable Name:** IHMOB **QuestionnaireFileName:** Sample Child

**QuestionText:** Does [fill1: SC name] have an impairment or health problem that limits [fill2: his/her] ability to (crawl), walk, run, or play?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1> [goto IHMOBYR]  
<2,R,D> [goto PROBRX]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date:** 27-May-16

---

**Question ID:** CHS.310\_00.000 **Instrument Variable Name:** IHMOBYR **QuestionnaireFileName:** Sample Child

**QuestionText:** Is this an impairment or health problem that has lasted, or is expected to last, 12 months or longer?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 that have limited ability to crawl, walk, run, or play

**SkipInstructions:** <1,2,R,D> [goto PROBRX]

---

**Question ID:** CHS.311\_00.000 **Instrument Variable Name:** PROBRX **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

Does [fill1: SC name] NOW have a problem for which [fill2: he/she] has regularly taken prescription medication for at least three months?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [if AGE LE <1> go to CAU.CUSUALPL;  
else if AGE GE 3 go to LEARNL;  
else if AGE = 2 and SEX = 1 go to CMHAGM11\_1;  
if AGE = 2 and SEX = 2 go to CMHAGF11\_1]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.312\_00.000 **Instrument Variable Name:** LEARND **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

Has a representative from a school or a health professional ever told you that [fill: SC name] had a learning disability?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children 3-17

**SkipInstructions:** <1,2,R,D> [if AGE > 3 go to CUSUALPL;  
if AGE = 3 and SEX = 1 go to CMHAGM11\_1;  
if AGE = 3 and SEX = 2 go to CMHAGF11\_1]

---

**Question ID:** CHS.321\_01.000 **Instrument Variable Name:** CMHAGM11\_1 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C3 ?[F1]

I am going to read a list of items that describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: SC name] DURING THE PAST TWO MONTHS.

He:

Has been uncooperative?

- 0 Not true
- 1 Sometimes true
- 2 Often true
- 7 Refused
- 9 Don't know

**UniverseText:** Male sample children 2-3

**SkipInstructions:** <0-2,R,D> [go to CMHAGM11\_2]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date: 27-May-16**

---

**Question ID:** CHS.321\_02.000 **Instrument Variable Name:** CMHAGM11\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C3 ?[F1]

\* Read if necessary.

I am going to read a list of items that describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: SC name] DURING THE PAST TWO MONTHS.

He:

Has trouble getting to sleep?

- 0 Not true
- 1 Sometimes true
- 2 Often true
- 7 Refused
- 9 Don't know

**UniverseText:** Male sample children 2-3

**SkipInstructions:** <0-2,R,D> [go to CMHAGM11\_3]

---

**Question ID:** CHS.321\_03.000 **Instrument Variable Name:** CMHAGM11\_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C3 ?[F1]

\* Read if necessary.

I am going to read a list of items that describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: SC name] DURING THE PAST TWO MONTHS.

He:

Has speech problems?

- 0 Not true
- 1 Sometimes true
- 2 Often true
- 7 Refused
- 9 Don't know

**UniverseText:** Male sample children 2-3

**SkipInstructions:** <0-2,R,D> [go to CMHAGM11\_4]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date:** 27-May-16

---

**Question ID:** CHS.321\_04.000 **Instrument Variable Name:** CMHAGM11\_4 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C3 ?[F1]

\* Read if necessary.

I am going to read a list of items that describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: SC name] DURING THE PAST TWO MONTHS.

He:

Has been unhappy, sad, or depressed?

- 0 Not true
- 1 Sometimes true
- 2 Often true
- 7 Refused
- 9 Don't know

**UniverseText:** Male sample children 2-3

**SkipInstructions:** <0-2,R,D> [go to CAU.CUSUALPL]

---

**Question ID:** CHS.361\_01.000 **Instrument Variable Name:** CMHAGF11\_1 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C3 ?[F1]

I am going to read a list of items that describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: S.C. name] DURING THE PAST TWO MONTHS.

She:

Has temper tantrums or a hot temper?

- 0 Not true
- 1 Sometimes true
- 2 Often true
- 7 Refused
- 9 Don't know

**UniverseText:** Female sample children 2-3

**SkipInstructions:** <0-2,R,D> [go to CMHAGF11\_2]

---

---

**2015 NHIS Questionnaire - Sample Child****Child Health Status & Limitations**Document Version Date: 27-May-16

---

**Question ID:** CHS.361\_02.000 **Instrument Variable Name:** CMHAGF11\_2 **QuestionnaireFileName:** Sample Child**QuestionText:** (book) C3 ?[F1]

\* Read if necessary.

I am going to read a list of items that describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: S.C. name] DURING THE PAST TWO MONTHS.

She:

Has speech problems?

- 0 Not true
- 1 Sometimes true
- 2 Often true
- 7 Refused
- 9 Don't know

**UniverseText:** Female sample children 2-3**SkipInstructions:** <0-2,R,D> [go to CMHAGF11\_3]

---

**Question ID:** CHS.361\_03.000 **Instrument Variable Name:** CMHAGF11\_3 **QuestionnaireFileName:** Sample Child**QuestionText:** (book) C3 ?[F1]

\* Read if necessary.

I am going to read a list of items that describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: S.C. name] DURING THE PAST TWO MONTHS.

She:

Has been nervous or high-strung?

- 0 Not true
- 1 Sometimes true
- 2 Often true
- 7 Refused
- 9 Don't know

**UniverseText:** Female sample children 2-3**SkipInstructions:** <0-2,R,D> [go to CMHAGF11\_4]



**2015 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

**Document Version Date:** 27-May-16

---

**Question ID:** CHS.361\_04.000 **Instrument Variable Name:** CMHAGF11\_4 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C3 ?[F1]

\* Read if necessary.

I am going to read a list of items that describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: S.C. name] DURING THE PAST TWO MONTHS.

She:

Has been unhappy, sad, or depressed?

- 0 Not true
- 1 Sometimes true
- 2 Often true
- 7 Refused
- 9 Don't know

**UniverseText:** Female sample children 2-3

**SkipInstructions:** <0-2,R,D> [go to CAU.CUSUALPL]

---

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date: 27-May-16**

---

**Question ID:** CAU.020\_00.000 **Instrument Variable Name:** CUSUALPL **QuestionnaireFileName:** Sample Child

**QuestionText:** The next questions are about health care.

Is there a place that [fill1: alias] USUALLY goes when [fill2: he/she] is sick or you need advice about [fill3: his/her] health?

- 1 Yes
- 2 There is NO place
- 3 There is MORE THAN ONE place
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,3> [go to CPLKIND]  
<2,R,D> [go to CHCPLKND]

---

**Question ID:** CAU.030\_00.000 **Instrument Variable Name:** CPLKIND **QuestionnaireFileName:** Sample Child

**QuestionText:** [fill1: What kind of place is it / What kind of place does [fill2: alias] go to most often] - a clinic, doctor's office, emergency room, or some other place?

- 1 Clinic or health center
- 2 Doctor's office or HMO
- 3 Hospital emergency room
- 4 Hospital outpatient department
- 5 Some other place
- 6 Doesn't go to one place most often
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 with one or more usual places to go when sick or need health advice

**SkipInstructions:** <1-5> [go to CHCPLROU]  
<6,R,D> [go to CHCPLKND]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date:** 27-May-16

---

**Question ID:** CAU.035\_00.000 **Instrument Variable Name:** CHCPLROU **QuestionnaireFileName:** Sample Child

**QuestionText:** Is that [fill1: CPLKIND/CAU.030] the same place [fill2: alias] USUALLY goes when [fill3: he/she] needs routine or preventive care, such as a physical examination or (well baby/child) check-up?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 with one or more usual places to go when sick or need health advice who reported that place as a clinic or health center, doctor's office or HMO, hospital emergency room, hospital outpatient department, or some other place

**SkipInstructions:** <1> [go to CHCCHGYR]  
<2,R,D> [go to CHCPLKND]

---

**Question ID:** CAU.037\_00.000 **Instrument Variable Name:** CHCPLKND **QuestionnaireFileName:** Sample Child

**QuestionText:** What kind of place does [fill1: alias] USUALLY go to when [fill2: he/she] needs routine or preventive care, such as a physical examination or (well baby/child) check-up?

- 0 Doesn't get preventive care anywhere
- 1 Clinic or health center
- 2 Doctor's office or HMO
- 3 Hospital emergency room
- 4 Hospital outpatient department
- 5 Some other place
- 6 Doesn't go to one place most often
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who do not have a usual source of sick care; who Ref/NA/DK if have a usual source of sick care; who have a usual source of sick care but does not go to one place most often; who have a usual source of sick care but Ref/NA/DK what kind of place; who have a usual source of sick care, but it is not same place as usual source of routine/preventive care; who have a usual source of sick care but Ref/NA/DK if it is same place as usual source of routine/preventive care.

**SkipInstructions:** <0-6,R,D> if CUSUALPL=2,R,D [goto CPRVTRYR]; ELSE [goto CHCCHGYR]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date:** 27-May-16

---

**Question ID:** CAU.040\_00.000 **Instrument Variable Name:** CHCCHGYR **QuestionnaireFileName:** Sample Child

**QuestionText:** At any time IN THE PAST 12 MONTHS did you CHANGE the place(s) to which [fill: alias] USUALLY goes for health care?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 with one or more place to go when sick/need advice [or who reported same place as usual source of routine/preventive care]

**SkipInstructions:** <1> [go to CHCCHGHI]  
<2,R,D> [goto to CPRVTRYR]

---

**Question ID:** CAU.050\_00.000 **Instrument Variable Name:** CHCCHGHI **QuestionnaireFileName:** Sample Child

**QuestionText:** Was this change for a reason related to health insurance?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 that have changed their usual place of health care in the past 12 months

**SkipInstructions:** <1,2,R,D> [goto CPRVTRYR]

---

**Question ID:** CAU.052\_00.010 **Instrument Variable Name:** CPRVTRYR **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, did you have any trouble finding a general doctor or provider who would see [fill: alias]?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1> [goto CPRVTRFD ] <2,R,D> [goto CDRNANP]

---

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
**Document Version Date: 27-May-16**

---

**Question ID:** CAU.053\_00.010 **Instrument Variable Name:** CPRVTRFD **QuestionnaireFileName:** Sample Child

**QuestionText:** Were you able to find a general doctor or provider who could see [fill: alias]?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who had trouble finding a provider in the last year

**SkipInstructions:** <1,2,R,D> [goto CDRNANP]

---

**Question ID:** CAU.055\_00.010 **Instrument Variable Name:** CDRNANP **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, were you told by a doctor's office or clinic that they would not accept [fill: alias] as a new patient?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D>[goto CDRNAI]

---

**Question ID:** CAU.056\_00.010 **Instrument Variable Name:** CDRNAI **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, were you told by a doctor's office or clinic that they did not accept [fill: alias]'s health care coverage?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D>[goto CHCDLYR\_1]

---

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
**Document Version Date: 27-May-16**

---

**Question ID:** CAU.080\_01.000 **Instrument Variable Name:** CHCDLYR1\_1 **QuestionnaireFileName:** Sample Child

**QuestionText:**

There are many reasons people delay getting medical care. Have you delayed getting care for [fill: alias] for any of the following reasons IN THE PAST 12 MONTHS...

You couldn't get through on the telephone.

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CHCDLYR1\_2]

---

**Question ID:** CAU.080\_02.000 **Instrument Variable Name:** CHCDLYR1\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

There are many reasons people delay getting medical care. Have you delayed getting care for [fill: alias] for any of the following reasons IN THE PAST 12 MONTHS...

You couldn't get an appointment for [fill: alias] soon enough.

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CHCDLYR1\_3]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date: 27-May-16**

---

**Question ID:** CAU.080\_03.000 **Instrument Variable Name:** CHCDLYR1\_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

There are many reasons people delay getting medical care. Have you delayed getting care for [fill: alias] for any of the following reasons IN THE PAST 12 MONTHS...

Once you get there, [fill: alias] has to wait too long to see the doctor.

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CHCDLYR1\_4]

---

**Question ID:** CAU.080\_04.000 **Instrument Variable Name:** CHCDLYR1\_4 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

There are many reasons people delay getting medical care. Have you delayed getting care for [fill: alias] for any of the following reasons IN THE PAST 12 MONTHS...

The (clinic/doctor's office) wasn't open when you could get there.

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CHCDLYR1\_5]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date:** 27-May-16

---

**Question ID:** CAU.080\_05.000 **Instrument Variable Name:** CHCDLYR1\_5 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

There are many reasons people delay getting medical care. Have you delayed getting care for [fill: alias] for any of the following reasons IN THE PAST 12 MONTHS...

You didn't have transportation.

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [if AGE GE <2> goto CHCAFYR1\_1; else goto CHCAFYR]

---

**Question ID:** CAU.130\_00.000 **Instrument Variable Name:** CHCAFYR **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, was there any time when [fill: alias] NEEDED any of the following, but didn't get it because you couldn't afford it...

Prescription medicines?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [goto CHCAFYRN]

---



---

**2015 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
**Document Version Date: 27-May-16**

---

**Question ID:** CAU.133\_00.010 **Instrument Variable Name:** CHCAFYRN **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, was there any time when [fill: alias] NEEDED any of the following, but didn't get it because you couldn't afford it...

To see a specialist?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [goto CHCAFYRF]

---

**Question ID:** CAU.133\_00.020 **Instrument Variable Name:** CHCAFYRF **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, was there any time when [fill: alias] NEEDED any of the following, but didn't get it because you couldn't afford it...

Follow-up care?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [if AGE <1 goto CHCSYR1\_2; else goto CDENLONG]

---

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
**Document Version Date: 27-May-16**

---

**Question ID:** CAU.135\_01.000 **Instrument Variable Name:** CHCAFYR1\_1 **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, was there any time when [fill: alias] NEEDED any of the following, but didn't get it because you couldn't afford it...

Prescription medicines?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCAFYR1\_2]

---

**Question ID:** CAU.135\_02.000 **Instrument Variable Name:** CHCAFYR1\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, was there any time when [fill: alias] NEEDED any of the following, but didn't get it because you couldn't afford it...

Mental health care or counseling?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCAFYR1\_3]

---

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
**Document Version Date: 27-May-16**

---

**Question ID:** CAU.135\_03.000 **Instrument Variable Name:** CHCAFYR1\_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, was there any time when [fill: alias] NEEDED any of the following, but didn't get it because you couldn't afford it...

Dental care (including check-ups)?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCAFYR1\_4]

---

**Question ID:** CAU.135\_04.000 **Instrument Variable Name:** CHCAFYR1\_4 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, was there any time when [fill: alias] NEEDED any of the following, but didn't get it because you couldn't afford it...

Eyeglasses?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCAFYR1\_5]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date: 27-May-16**

---

**Question ID:** CAU.135\_05.010 **Instrument Variable Name:** CHCAFYR1\_5 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, was there any time when [fill: alias] NEEDED any of the following, but didn't get it because you couldn't afford it...

To see a specialist?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCAFYR1\_6]

---

**Question ID:** CAU.135\_06.010 **Instrument Variable Name:** CHCAFYR1\_6 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, was there any time when [fill: alias] NEEDED any of the following, but didn't get it because you couldn't afford it...

Follow-up care?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CDENLONG]

---

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
**Document Version Date: 27-May-16**

---

**Question ID:** CAU.160\_00.000 **Instrument Variable Name:** CDENLONG **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C4

About how long has it been since [fill: alias] last saw a dentist? Include all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.

- 0 Never
- 1 6 months or less
- 2 More than 6 months, but not more than 1 year ago
- 3 More than 1 year, but not more than 2 years ago
- 4 More than 2 years, but not more than 5 years ago
- 5 More than 5 years ago
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 1

**SkipInstructions:** <0-5,R,D> [if AGE GE <2> goto CHCSYR\_1; else go to CHCSYR1\_2]

---

**Question ID:** CAU.170\_01.000 **Instrument Variable Name:** CHCSYR1\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, has anyone in the family seen or talked to any of the following health care providers about [fill2: alias]'s health?

An optometrist, ophthalmologist, or eye doctor (someone who prescribes eyeglasses)?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR1\_3]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date: 27-May-16**

---

**Question ID:** CAU.170\_02.000 **Instrument Variable Name:** CHCSYR1\_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

\* Read if necessary.

DURING THE PAST 12 MONTHS, has anyone in the family seen or talked to any of the following health care providers about [fill2: alias]'s health?

A foot doctor?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR1\_5]

---

**Question ID:** CAU.170\_03.000 **Instrument Variable Name:** CHCSYR1\_5 **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

\* Read if necessary.

DURING THE PAST 12 MONTHS, has anyone in the family seen or talked to any of the following health care providers about [fill2: alias]'s health?

A physical therapist, speech therapist, respiratory therapist, audiologist, or occupational therapist?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR1\_6]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date: 27-May-16**

---

**Question ID:** CAU.170\_04.000 **Instrument Variable Name:** CHCSYR1\_6 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, has anyone in the family seen or talked to any of the following health care providers about [fill2: alias]'s health?

A nurse practitioner, physician assistant or midwife?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR8\_1]

---

**Question ID:** CAU.175\_01.000 **Instrument Variable Name:** CHCSYR\_1 **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about [fill2: alias]'s health?

A mental health professional such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR\_2]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date: 27-May-16**

---

**Question ID:** CAU.175\_02.000 **Instrument Variable Name:** CHCSYR\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about [fill2: alias]'s health?

An optometrist, ophthalmologist, or eye doctor (someone who prescribes eyeglasses)?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR\_3]

---

**Question ID:** CAU.175\_03.000 **Instrument Variable Name:** CHCSYR\_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

\* Read if necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about [fill2: alias]'s health?

A foot doctor?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR\_4]

---



---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date: 27-May-16**

---

**Question ID:** CAU.175\_04.000 **Instrument Variable Name:** CHCSYR\_4 **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

Read if necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about [fill2: alias]'s health?

A chiropractor?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR\_5]

---

**Question ID:** CAU.175\_05.000 **Instrument Variable Name:** CHCSYR\_5 **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

\* Read if necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about [fill2: alias]'s health?

A physical therapist, speech therapist, respiratory therapist, audiologist, or occupational therapist?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR\_6]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date: 27-May-16**

---

**Question ID:** CAU.175\_06.000 **Instrument Variable Name:** CHCSYR\_6 **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

\* Read if necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about [fill2: alias]'s health?

A nurse practitioner, physician assistant or midwife?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [if SEX eq <2> and AGE GE 15 goto CHCSYR7; else goto CHCSYR8\_1]

---

**Question ID:** CAU.230\_00.000 **Instrument Variable Name:** CHCSYR7 **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

DURING THE PAST 12 MONTHS, have you seen or talked to a doctor who specializes in women's health (an obstetrician/gynecologist) about [fill2: alias]'s health?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 15 who are female

**SkipInstructions:** <1,2,R,D> [goto CHCSYR8\_1]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date: 27-May-16**

---

**Question ID:** CAU.240\_01.000 **Instrument Variable Name:** CHCSYR8\_1 **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, have you seen or talked to the following about [fill2: alias]'s health?  
A medical doctor who specializes in a particular medical disease or problem (fill3:other than obstetrician/ gynecologist, psychiatrist or ophthalmologist? /fill4: other than psychiatrist or ophthalmologist)?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CHCSYR8\_2]

---

**Question ID:** CAU.240\_02.000 **Instrument Variable Name:** CHCSYR8\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Read if necessary.

DURING THE PAST 12 MONTHS, have you seen or talked to the following about [fill2: alias]'s health?

A general doctor who treats a variety of illnesses (a doctor in general practice, pediatrics, family medicine, or internal medicine)?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1> [goto CHCSYR10]  
<2,R,D> [goto CHPEXYR]

---

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
**Document Version Date: 27-May-16**

---

**Question ID:** CAU.260\_00.000 **Instrument Variable Name:** CHCSYR10 **QuestionnaireFileName:** Sample Child

**QuestionText:** Does that doctor treat children and adults (a doctor in general practice or family medicine)?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who have seen or talked to a general doctor during the past 12 months

**SkipInstructions:** <1,2,R,D> [goto CHCSYREM]

---

**Question ID:** CAU.265\_00.000 **Instrument Variable Name:** CHCSYREM **QuestionnaireFileName:** Sample Child

**QuestionText:** Did you see or talk to this general doctor because of an emotional or behavioral problem that [fill1: alias] may have?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who have seen a general doctor in the past 12 months

**SkipInstructions:** <1,2,R,D> [goto CHPEXYR]

---

**Question ID:** CAU.270\_00.000 **Instrument Variable Name:** CHPEXYR **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, did [fill1: alias] receive a well-child check-up, that is a general check-up, when [fill2: he/she] was not sick or injured?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CHERNOYR]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date: 27-May-16**

---

**Question ID:** CAU.280\_00.000 **Instrument Variable Name:** CHERNOYR **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C5

DURING THE PAST 12 MONTHS, HOW MANY TIMES has [fill1: alias] gone to a HOSPITAL EMERGENCY ROOM about [fill2: his/her] health? (This includes emergency room visits that resulted in a hospital admission.)

- 00 None
- 01 1
- 02 2-3
- 03 4-5
- 04 6-7
- 05 8-9
- 06 10-12
- 07 13-15
- 08 16 or more
- 97 Refused
- 99 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <0,R,D> [goto CHCHYR] <1-8> [goto CERVISND]

---

**Question ID:** CAU.281\_00.010 **Instrument Variable Name:** CERVISND **QuestionnaireFileName:** Sample Child

**QuestionText:** Thinking about [fill: S.C. name]'s most recent emergency room visit, did [fill: he/she ] go to the emergency room either at night or on the weekend?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [go to CERHOS]

---

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
**Document Version Date: 27-May-16**

---

**Question ID:** CAU.282\_00.010 **Instrument Variable Name:** CERHOS **QuestionnaireFileName:** Sample Child

**QuestionText:** Did this emergency room visit result in a hospital admission?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [go to CERREAS1]

---

**Question ID:** CAU.283\_01.010 **Instrument Variable Name:** CERREAS1 **QuestionnaireFileName:** Sample Child

**QuestionText:** Tell me which of these apply to [fill: alias]'s last emergency room visit?

... [fill: He/She] didn't have another place to go

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS2]

---

**Question ID:** CAU.283\_02.020 **Instrument Variable Name:** CERREAS2 **QuestionnaireFileName:** Sample Child

**QuestionText:** \*Read if necessary.

Tell me which of these apply to [fill: alias]'s last emergency room visit?

... [fill: alias]'s doctor's office or clinic was not open

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS3]

---

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
**Document Version Date: 27-May-16**

---

**Question ID:** CAU.283\_03.030 **Instrument Variable Name:** CERREAS3 **QuestionnaireFileName:** Sample Child

**QuestionText:** \*Read if necessary.

Tell me which of these apply to [fill: alias]'s last emergency room visit?

... [fill: alias]'s health provider advised that [fill: he/she] go

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS4]

---

**Question ID:** CAU.283\_04.040 **Instrument Variable Name:** CERREAS4 **QuestionnaireFileName:** Sample Child

**QuestionText:** \*Read if necessary.

Tell me which of these apply to [fill: alias]'s last emergency room visit?

... The problem was too serious for the doctor's office or clinic

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS5]

---

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
**Document Version Date: 27-May-16**

---

**Question ID:** CAU.283\_05.050 **Instrument Variable Name:** CERREAS5 **QuestionnaireFileName:** Sample Child

**QuestionText:** \*Read if necessary.

Tell me which of these apply to [fill: alias]'s last emergency room visit?

... Only a hospital could help [fill: alias]

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS6]

---

**Question ID:** CAU.283\_06.060 **Instrument Variable Name:** CERREAS6 **QuestionnaireFileName:** Sample Child

**QuestionText:** \*Read if necessary.

Tell me which of these apply to [fill: alias]'s last emergency room visit?

... The emergency room is [fill: alias]'s closest provider

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS7]

---



---

**2015 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
**Document Version Date: 27-May-16**

---

**Question ID:** CAU.283\_07.070 **Instrument Variable Name:** CERREAS7 **QuestionnaireFileName:** Sample Child

**QuestionText:** \*Read if necessary.

Tell me which of these apply to [fill: alias]'s last emergency room visit?

...[fill: alias] gets most of [fill: his/her] care at the emergency room

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS8]

---

**Question ID:** CAU.283\_08.080 **Instrument Variable Name:** CERREAS8 **QuestionnaireFileName:** Sample Child

**QuestionText:** \*Read if necessary.

Tell me which of these apply to [fill: alias]'s last emergency room visit?

...[fill: alias] arrived by ambulance or other emergency vehicle

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CHCHYR]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date: 27-May-16**

---

**Question ID:** CAU.290\_00.000 **Instrument Variable Name:** CHCHYR **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, did [fill1: alias] receive care AT HOME from a nurse or other health care professional?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1> [goto CHCHMOYR]  
<2,R,D> [goto CHCNOYR]

---

**Question ID:** CAU.300\_00.000 **Instrument Variable Name:** CHCHMOYR **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, how many months did [fill: alias] receive care AT HOME from a health care professional?

- 01-12 1-12 months
- 97 Refused
- 99 Don't know

**UniverseText:** Sample children <18 that have received home care from health professional during the past 12 months

**SkipInstructions:** <01-12,R,D> [goto CHCHNOYR]

---

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
**Document Version Date: 27-May-16**

---

**Question ID:** CAU.310\_00.000 **Instrument Variable Name:** CHCHNOYR **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C6 ?[F1]

What was the total number of home visits received for [fill1: alias] during [fill2: that month/those months]?

01	1
02	2-3
03	4-5
04	6-7
05	8-9
06	10-12
07	13-15
08	16 or more
97	Refused
99	Don't know

**UniverseText:** Sample children <18 that have received home care from health professional during the past 12 months

**SkipInstructions:** <1-8,R,D> [goto CHCNOYR]

---

**Question ID:** CAU.320\_00.000 **Instrument Variable Name:** CHCNOYR **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C5 ?[F1]

DURING THE PAST 12 MONTHS, HOW MANY TIMES has [fill1: alias] seen a doctor or other health care professional about [fill2: his/her] health at A DOCTOR'S OFFICE, A CLINIC, OR SOME OTHER PLACE? Do not include times [fill1: alias] was hospitalized overnight, visits to hospital emergency rooms, home visits, dental visits or telephone calls.

00	None
01	1
02	2-3
03	4-5
04	6-7
05	8-9
06	10-12
07	13-15
08	16 or more
97	Refused
99	Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <0-8,R,D> [goto CSRGYR]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date:** 27-May-16

---

**Question ID:** CAU.330\_00.000 **Instrument Variable Name:** CSRGYR **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS has [fill1: alias] had SURGERY or other surgical procedures either as an inpatient or outpatient?

\* Read if necessary.

This includes both major surgery and minor procedures such as setting bones or removing growths.

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1> [goto CSRGNOYR]  
<2,R,D> [goto CMDLONG]

---

**Question ID:** CAU.340\_00.000 **Instrument Variable Name:** CSRGNOYR **QuestionnaireFileName:** Sample Child

**QuestionText:** Including any times you may have already told me about, HOW MANY DIFFERENT TIMES has [fill1: alias] had surgery DURING THE PAST 12 MONTHS?

\* Enter '95' for 95 or more times.

- 01-94 1-94 times
- 95 95+ times
- 97 Refused
- 99 Don't know

**UniverseText:** Sample children <18 that have undergone surgery during the past 12 months

**SkipInstructions:** <1-10,R,D> [goto CMDLONG]  
<11-95> [goto ERR\_CMDLONG]

**Soft Edit:** ERR\_CMDLONG

[fill2: CSRGNOYR] is an unusually large number. Did [fill1: alias] have [fill2: CSRGNOYR] surgical procedures?

\*Please verify.

---

**2015 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

**Document Version Date:** 27-May-16

---

**Question ID:** CAU.345\_00.000 **Instrument Variable Name:** CMDLONG **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C4

About how long has it been since anyone in the family last saw or talked to a doctor or other health care professional about [fill1: alias]'s health? Include doctors seen while [fill2: he/she] was a patient in a hospital.

- 0 Never
- 1 6 months or less
- 2 More than 6 months, but not more than 1 year ago
- 3 More than 1 year, but not more than 2 years ago
- 4 More than 2 years, but not more than 5 years ago
- 5 More than 5 years ago
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <0-5, D, R> [if AGE=4-17 goto CMHCOPY; else goto CH1N1\_1]

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Mental Health Brief Questionnaire**

**Document Version Date: 27-May-16**

---

**Question ID:** CMB.010\_00.000 **Instrument Variable Name:** CMHCOPY **QuestionnaireFileName:** Sample Child

**QuestionText:** \* The following statements are not to be read to the respondent. They are displayed and included here for legal reasons.

\* The next 6 items contained in CMHMF\_1 through CMHDIFF are included in this survey with permission as indicated below.

\* The SDQ questions are copyrighted by Robert Goodman, Ph.D., FRCPSYCH, MRCP. State and local agencies may use these questions without charge and without seeking separate permission provided the wording is not modified, all the questions are retained, and Dr. Goodman's copyright is acknowledged.

\* Enter 1 to Continue.

**1** Enter 1 to continue

**UniverseText:** Sample children GE 4

**SkipInstructions:** <1> [goto CMHMF\_1]

---

**Question ID:** CMB.020\_01.000 **Instrument Variable Name:** CMHMF\_1 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C7

I am going to read a list of items that describe children. For each item, please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MONTHS...

[fill2: He/She]

...is generally well behaved, usually does what adults request.

- 0** Not true
- 1** Somewhat true
- 2** Certainly true
- 7** Refused
- 9** Don't know

**UniverseText:** Sample children GE 4

**SkipInstructions:** <1-3,D,R> [goto CMHMF\_2]

---

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Mental Health Brief Questionnaire**

Document Version Date: 27-May-16

---

**Question ID:** CMB.020\_02.000 **Instrument Variable Name:** CMHMF\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C7

\* Read if necessary.

I am going to read a list of items that describe children. For each item, please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MONTHS...

[fill2: He/She]

...has many worries, or often seems worried.

- 0 Not true
- 1 Somewhat true
- 2 Certainly true
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 4

**SkipInstructions:** <1-3,D,R> [goto CMHMF\_3]

---

**Question ID:** CMB.020\_03.000 **Instrument Variable Name:** CMHMF\_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C7

\* Read if necessary.

I am going to read a list of items that describe children. For each item, please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MONTHS...

[fill2: He/She]

...is often unhappy, depressed or tearful.

- 0 Not true
- 1 Somewhat true
- 2 Certainly true
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 4

**SkipInstructions:** <1-3,D,R> [goto CMHMF\_4]

---

---

**2015 NHIS Questionnaire - Sample Child**  
**Child Mental Health Brief Questionnaire**

Document Version Date: 27-May-16

---

**Question ID:** CMB.020\_04.000 **Instrument Variable Name:** CMHMF\_4 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C7

\* Read if necessary.

I am going to read a list of items that describe children. For each item, please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MONTHS...

[fill2: He/She]

...gets along better with adults than with other [fill3: children/youth].

- 0 Not true
- 1 Somewhat true
- 2 Certainly true
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 4

**SkipInstructions:** <1-3,D,R> [goto CMHMF\_5]

---

**Question ID:** CMB.020\_05.000 **Instrument Variable Name:** CMHMF\_5 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C7

\* Read if necessary.

I am going to read a list of items that describe children. For each item, please tell me if it has been NOT TRUE, SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MONTHS...

[fill2: He/She]

...has good attention span, sees chores or homework through to the end.

- 0 Not true
- 1 Somewhat true
- 2 Certainly true
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 4

**SkipInstructions:** <1-3,D,R> [goto CMHDIFF]

---



**2015 NHIS Questionnaire - Sample Child**

**Child Mental Health Brief Questionnaire**

**Document Version Date:** 27-May-16

---

**Question ID:** CMB.030\_00.000 **Instrument Variable Name:** CMHDIFF **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C8

Overall, do you think that [fill1: SC name] has difficulties in any of the following areas: emotions, concentration, behavior, or being able to get along with other people?

- 1 No
- 2 Yes, minor difficulties
- 3 Yes, definite difficulties
- 4 Yes, severe difficulties
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 4

**SkipInstructions:** <1-4,R,D> [goto next section]

---

---

**2015 NHIS Questionnaire - Sample Child**

**Child Influenza Immunization**

**Document Version Date:** 27-May-16

---

**Question ID:** CFI.005\_00.010 **Instrument Variable Name:** CH1N1\_1 **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

DURING THE PAST 12 MONTHS, has {SC name} had a flu vaccination? A flu vaccination is usually given in the fall and protects against influenza for the flu season.

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** Sample Child LE 17 years

**SkipInstructions:** <1> [goto CH1N1\_2]  
<2,R,D> [goto next section]

---

**Question ID:** CFI.005\_00.020 **Instrument Variable Name:** CH1N1\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** How many vaccinations has {S.C. name} received?

- 1 1 vaccination or dose
- 2 2 or more vaccination doses
- 7 Refused
- 9 Don't know

**UniverseText:** Sample Child LE 17 years who have had an vaccine dose

**SkipInstructions:** <1,2> [goto CH1N1\_3M]  
<R,D> [goto next section]

---

**2015 NHIS Questionnaire - Sample Child****Child Influenza Immunization**

Document Version Date: 27-May-16

**Question ID:** CFI.005\_00.030 **Instrument Variable Name:** CH1N1\_3M **QuestionnaireFileName:** Sample Child

**QuestionText:** 1 of 2

During what month and year did {S.C. name} receive {fill: his/her} most recent flu vaccine?

- 01 January
- 02 February
- 03 March
- 04 April
- 05 May
- 06 June
- 07 July
- 08 August
- 09 September
- 10 October
- 11 November
- 12 December
- 97 Refused
- 99 Don't know

**UniverseText:** Sample Child LE 17 who have had one or more vaccine doses

**SkipInstructions:** <1-12,D> [ goto CH1N1\_4Y] <R> [goto CH1N1\_5]

**Question ID:** CFI.005\_00.040 **Instrument Variable Name:** CH1N1\_4Y **QuestionnaireFileName:** Sample Child

**QuestionText:** 2 of 2

\*Enter year of most recent flu vaccine.

- Year Year
- 9997 Refused
- 9999 Don't know

**UniverseText:** Sample Child LE 17 years who have had one or more vaccine doses and gave month/don't know month of vaccine dose

**SkipInstructions:** <valid year,R,D> [goto CH1N1\_5]  
 [If CH1N1\_3M and CH1N1\_4Y = a future date] goto ERR1\_ CH1N1\_4Y]  
 [If CH1N1\_3M and CH1N1\_4Y = a date prior to birth] goto ERR2\_ CH1N1\_4Y]  
 [If CH1N1\_3M and CH1N1\_4Y = a date prior to 12 months ago] goto ERR3\_ CH1N1\_4Y]

**Hard Edit:** ERR1\_ CH1N1\_4Y  
 \*Future date invalid.

ERR2\_ CH1N1\_4Y  
 \*Date before birth.

ERR3\_ CH1N1\_4Y  
 \*Date before 12 months ago.

---

**2015 NHIS Questionnaire - Sample Child**

**Child Influenza Immunization**

**Document Version Date:** 27-May-16

---

**Question ID:** CFI.005\_00.050 **Instrument Variable Name:** CH1N1\_5 **QuestionnaireFileName:** Sample Child

**QuestionText:** Was this a shot, or was it a vaccine sprayed in the nose?

\*Read if necessary: The flu nasal spray is called FluMist(trademark).

- 1 Flu shot
- 2 Flu nasal spray (spray, mist or drop in nose)
- 7 Refused
- 9 Don't know

**UniverseText:** Sample Child LE 17 years who have had one or more vaccine doses

**SkipInstructions:** <1-2,R,D> IF CH1N1\_2=1 [goto next section]; else if CH1N1\_2=2 [goto CH1N1\_6M]

---

**Question ID:** CFI.005\_00.060 **Instrument Variable Name:** CH1N1\_6M **QuestionnaireFileName:** Sample Child

**QuestionText:** 1 of 2

During what month and year did {S.C. name} receive {fill: his/her} next most recent flu vaccine?

- 01 January
- 02 February
- 03 March
- 04 April
- 05 May
- 06 June
- 07 July
- 08 August
- 09 September
- 10 October
- 11 November
- 12 December
- 97 Refused
- 99 Don't know

**UniverseText:** Sample Child LE 17 years who have had more than one vaccine doses

**SkipInstructions:** <1-12,D> [ goto CH1N1\_7Y] <R> [goto CH1N1\_8]

---

---

**2015 NHIS Questionnaire - Sample Child****Child Influenza Immunization****Document Version Date: 27-May-16**

---

**Question ID:** CFI.005\_00.070 **Instrument Variable Name:** CH1N1\_7Y **QuestionnaireFileName:** Sample Child**QuestionText:** 2 of 2

\*Enter year of next most recent flu vaccine.

<b>Year</b>	Year
<b>9997</b>	Refused
<b>9999</b>	Don't know

**UniverseText:** Sample Child LE 17 years who have had more than one vaccine doses and gave month/don't know month of vaccine dose**SkipInstructions:** <valid year,R,D> [goto CH1N1\_8]  
[If CH1N1\_6M and CH1N1\_7Y = a future date] goto ERR1\_ CH1N1\_7Y  
[If CH1N1\_6M and CH1N1\_7Y = a date prior to birth] goto ERR2\_ CH1N1\_7Y  
[If CH1N1\_6M and CH1N1\_7Y = a date prior to 12 months ago] goto ERR3\_ CH1N1\_7Y**Hard Edit:** ERR1\_ CH1N1\_7Y  
\*Future date invalid.ERR2\_ CH1N1\_7Y  
\*Date before birth.ERR3\_ CH1N1\_7Y  
\*Date before 12 months ago.

---

**Question ID:** CFI.005\_00.080 **Instrument Variable Name:** CH1N1\_8 **QuestionnaireFileName:** Sample Child**QuestionText:** Was this a shot, or was it a vaccine sprayed in the nose?

\*Read if necessary: The flu nasal spray is called FluMist(trademark).

<b>1</b>	Flu shot
<b>2</b>	Flu nasal spray (spray, mist or drop in nose)
<b>7</b>	Refused
<b>9</b>	Don't know

**UniverseText:** Sample Child LE 17 years who have more than one vaccine dose**SkipInstructions:** <1-2,R,D> [goto next section]