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.
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 CURRES

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.CSRELTV
    endif

<96> store child.cid.CSPAVAIL in child.cid.CSRESP
    goto chk.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.
### 2017 NHIS Questionnaire - Sample Child

**Child Identification**

*Document Version Date: 04-Jun-18*

<table>
<thead>
<tr>
<th>Question ID</th>
<th>CID.030_00.000</th>
<th>Instrument Variable Name:</th>
<th>CSRELTV</th>
<th>QuestionnaireFileName:</th>
<th>Sample Child</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>(book) C1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>[fill1: The next questions are about [fill2: ALIAS of Sample Child].]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>What is your relationship to [fill2: ALIAS of Sample Child]?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>01</td>
<td>Parent (Biological, adoptive, or step)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>02</td>
<td>Grandparent</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>03</td>
<td>Aunt/Uncle</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>04</td>
<td>Brother/Sister</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>05</td>
<td>Other relative</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>06</td>
<td>Legal guardian</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>07</td>
<td>Foster parent</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08</td>
<td>Other non-relative</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Someone identified as knowledgeable about child's health

**SkipInstructions:**

```c
<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
```

<table>
<thead>
<tr>
<th>Question ID</th>
<th>CID.040_00.000</th>
<th>Instrument Variable Name:</th>
<th>CSPVERF_S</th>
<th>QuestionnaireFileName:</th>
<th>Sample Child</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>* Please verify the following information about the sample child before proceeding:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>I have recorded [fill1: ALIAS of Sample Child]'s sex as [fill2: Sex of Sample Child]. Is this correct?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Respondent is not the person entered in HHRESP or RELRESP_A.

**SkipInstructions:**

```c
<1> goto CSPVERF_A
<2> goto NEWSEX
```
## 2017 NHIS Questionnaire - Sample Child

### Child Identification

Document Version Date: 04-Jun-18

<table>
<thead>
<tr>
<th>Question ID: CID.041_00.000</th>
<th>Instrument Variable Name: NEWSEX</th>
<th>QuestionnaireFileName: Sample Child</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> Is [fill: ALIAS of Sample Child] Male or Female?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* If don’t know or refused enter your best guess of the child's sex.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Male</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Female</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SkipInstructions:** `<1,2>` store NEWSEX in SEX
reset CSPVERF_S
goto CSPVERF_S

**Hard Edit:**
* The gender will now be changed to [fill: NEWSEX].
goto CSPVERF_S (as the default goto)

<table>
<thead>
<tr>
<th>Question ID: CID.042_00.000</th>
<th>Instrument Variable Name: CSPVERF_A</th>
<th>QuestionnaireFileName: Sample Child</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong> * Please verify the following information about the sample child before proceeding:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have recorded [fill1: ALIAS of Sample Child]'s age as [fill2: Age of Sample Child] old. Is this correct?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* If respondent &quot;refuses&quot; or says &quot;don't know&quot;, enter &quot;1&quot; for &quot;yes&quot;.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SkipInstructions:** `<1>` goto CSPVERF_D
`<2>` goto NEWAGE
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
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.
* Enter year of birth.

1880-2020 Year of birth
UniverseText: Respondent said child's date of birth is not correct or child's age is not correct

SkipInstructions: <1880-2020, Refused, Don't know> if CSPVERF_A = '2' (No) then reset CSPVERF_A to empty
go to CSPVERF_A
elseif CSPVERF_D = '2' (No) then reset CSPVERF_D to empty
go to CSPVERF_D
endif

(if year GT current year) or (if year = current year and month GT current month) or (if year = current year and
month = current month and day GT current day)
go to ERR1_NEWDOB_Y
endif

(if birth month = '02' and birth day = '29' and this is not a leap year)
go to ERR2_NEWDOB_Y
endif

(if NEWDOB_M = 'Ref' or 'DK') or (if NEWDOB_D = 'Ref' or 'DK') or (if NEWDOB_Y = 'Ref' or 'DK')
go to ERR3_NEWDOB_Y
else
store NEWDOB_M in DOBM
store NEWDOB_D in DOBD
store NEWDOB_Y in DOBY
if CSPVERF_A = '2' (No) then reset CSPVERF_A to empty
go to CSPVERF_A
elseif CSPVERF_D = '2' (No) then reset CSPVERF_D to empty
go to CSPVERF_D
endif
endif

Calculate age from NEWDOB_M, NEWDOB_D, and NEWDOB_Y.

if age from NEWDOB items is ne AGE and age from NEWDOB items is valid
reset CSPVERF_A or CSPVERF_D
go to ERR4_NEWDOB_Y
endif

Hard Edit: ERR1_NEWDOB_Y

*Future date invalid: [fill2: <NEWDOB_M> <NEWDOB_D>, <NEWDOB_Y>]
*Please correct.

go to NEWDOB_M (whether suppressed or not)

ERR2_NEWDOB_Y

*Not a valid day: [fill2: <NEWDOB_M> <NEWDOB_D>, <NEWDOB_Y>]
*Please correct.

go to NEWDOB_M (whether suppressed or not)

ERR3_NEWDOB_Y

*DOB of [fill1: ALIAS of Sample Child] remains [fill3: <DOBM> <DOBD>, <DOBY>]

go to CSPVERF_A

ERR4_NEWDOB_Y

*Data mismatched. Please fix Age or Birthday.
goto CSPVERF_A (whether suppressed or not)
Question ID: CHS.010_01.000  Instrument Variable Name: BWGT_LB  Questionnaire FileName: Sample Child

QuestionText:  

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

* Enter ‘M’ to record metric measurements.

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-15</td>
<td>1-15 pounds</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don’t know</td>
</tr>
<tr>
<td>M</td>
<td>Metric</td>
</tr>
</tbody>
</table>

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  Questionnaire FileName: Sample Child

QuestionText:  * Enter ounces.

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00-15</td>
<td>0-15 ounces</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don’t know</td>
</tr>
<tr>
<td>Blank</td>
<td>Blank</td>
</tr>
</tbody>
</table>

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]
**Question ID:** CHS.011_00.000  
**Instrument Variable Name:** BWGT_GR  
**QuestionnaireFileName:** Sample Child

**Question Text:**

* Enter weight in grams.

- **0500**  
  500 grams or less
- **0501-6899**  
  501-6899 grams
- **6900**  
  6900+ grams
- **9997**  
  Refused
- **9999**  
  Don’t know

**Universe Text:**

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

**Skip Instructions:**

<500-5485, R,D> [goto CHGT_FT]  
<5486-6900> [goto ERR_BWGT_GR]

**Soft Edit:**

* [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

**Question Text:**

?[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.

- **00-07**  
  0-7 feet
- **97**  
  Refused
- **99**  
  Don’t know
- **M**  
  Metric

**Universe Text:**

Sample children 12+

**Skip Instructions:**

<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.
Question Text:  * Enter inches.

00-36  0-36 inches
97    Refused
99    Don't know

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

Skip Instructions: <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.
**Question Text:**

* 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).

<table>
<thead>
<tr>
<th>Code</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-2</td>
<td>0-2 meters</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
<tr>
<td>Blank</td>
<td>Blank</td>
</tr>
</tbody>
</table>

**Universe Text:**

Sample children 12+ whose current height will be entered in metric.
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.
**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

Document Version Date: 04-Jun-18

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>CHS.022_00.000</th>
<th>Instrument Variable Name:</th>
<th>CWGT_LB</th>
<th>QuestionnaireFileName:</th>
<th>Sample Child</th>
</tr>
</thead>
</table>

**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.

<table>
<thead>
<tr>
<th>001-500</th>
<th>1-500 pounds</th>
</tr>
</thead>
<tbody>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don't know</td>
</tr>
<tr>
<td>M</td>
<td>Metric</td>
</tr>
</tbody>
</table>

**UniverseText:** Sample children 12+

**SkipInstructions:**

```cpp
<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
<1-500> 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.
**Question ID:** CHS.023_00.000  **Instrument Variable Name:** CWGT_KG  **QuestionnaireFileName:** Sample Child

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

<table>
<thead>
<tr>
<th>UniverseText</th>
<th>SkipInstructions</th>
</tr>
</thead>
</table>
| Sample children 12+ whose weight will be entered in metric. | <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.
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]
Does [fill: S.C. name] currently have an intellectual disability, also known as mental retardation?

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

Sample children <2 who have been told by a doctor or other health professional that they have an intellectual disability, also known as mental retardation.

<1,2,R,D> if ADD1_3=1 [goto ADD1_3N]; else [goto CONDL]

Does [fill: S.C. name] currently have any other developmental delay?

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

Sample children <2 who have been told by a doctor or other health professional that they have any other developmental delay.

<1,2,R,D> [goto CONDL]
**Question ID:** CHS.032_01.000  **Instrument Variable Name:** ADD_1  **QuestionnaireFileName:** Sample Child

**Question Text:**

> ![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

**Universe Text:** Sample children 2-17

**Skip Instructions:** <1,2,R,D> [go to ADD_2]

---

**Question ID:** CHS.032_02.000  **Instrument Variable Name:** ADD_2  **QuestionnaireFileName:** Sample Child

**Question Text:**

* 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

**Universe Text:** Sample children 2-17

**Skip Instructions:** <1,2,R,D> [go to AUTISM]
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<th>CHS.032_02.010</th>
<th>Instrument Variable Name:</th>
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<tbody>
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<td>QuestionText:</td>
<td><img src="https://example.com/question_text.png" alt="Question Text" /></td>
<td>* Read if necessary.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>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?</td>
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<tr>
<td>1</td>
<td>Yes</td>
<td></td>
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<td></td>
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<tr>
<td>2</td>
<td>No</td>
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<td></td>
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<tr>
<td>7</td>
<td>Refused</td>
<td></td>
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<tr>
<td>9</td>
<td>Don't know</td>
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<td>UniverseText:</td>
<td>Sample children 2-17</td>
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<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [go to ADD_3]</td>
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<th>ADD_3</th>
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<tr>
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<td>* Read if necessary.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has a doctor or health professional ever told you that [fill: S.C. name] had... Any other developmental delay?</td>
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<tr>
<td>1</td>
<td>Yes</td>
<td></td>
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<tr>
<td>2</td>
<td>No</td>
<td></td>
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<tr>
<td>7</td>
<td>Refused</td>
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<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
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<tr>
<td>UniverseText:</td>
<td>Sample children 2-17</td>
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</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [go to CONDL]</td>
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</tbody>
</table>
### Questionnaire: Child Health Status & Limitations

#### Question ID: CHS.032_04.010
**Instrument Variable Name:** ADD_1N  
**QuestionnaireFileName:** Sample Child

**QuestionText:**

> ![Question Text](image)

**UniverseText:** Sample children 2-17 who have ever been told by a doctor or other health professional that they had Attention Deficit Hyperactivity Disorder (ADHD) or Attention Deficit Disorder (ADD)

**SkipInstructions:** <1,2,R,D> if ADD_2=1 [go to ADD_2N]; else if AUTISM=1 [goto AUTISMN] else if ADD_3=1 [goto ADD_3N]; else [goto CONDL]

---

#### Question ID: CHS.032_05.010
**Instrument Variable Name:** ADD_2N  
**QuestionnaireFileName:** Sample Child

**QuestionText:**

> ![Question Text](image)

**UniverseText:** Sample children 2-17 who have ever been told by a doctor or other health professional that they had an intellectual disability, aka mental retardation

**SkipInstructions:** <1,2,R,D> if AUTISM=1 [goto AUTISMN] else if ADD_3=1 [goto ADD_3N]; else [goto CONDL]
Question ID: CHS.032_06.010  Instrument Variable Name: AUTISMN  QuestionnaireFileName: Sample Child

QuestionText: [F1]

Does [fill: S.C. name] currently have 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 who have ever been told by a doctor or other health professional that they had Autism, Asperger's Disorder, pervasive developmental disorder, or autism spectrum disorder

SkipInstructions: <1,2,R,D> if ADD_3=1 [goto ADD_3N]; else [goto CONDL]

Question ID: CHS.032_07.010  Instrument Variable Name: ADD_3N  QuestionnaireFileName: Sample Child

QuestionText: [F1]

Does [fill: S.C. name] currently have any other developmental delay?

1  Yes
2  No
7  Refused
9  Don’t know

UniverseText: Sample children 2-17 who have ever been told by a doctor or other health professional that they had any other developmental delay

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

Which ones?

* Enter all that apply, separate with commas.

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

**SkipInstructions:** <1-9, R,D> [go to CPOX]
Has [fill: SC Name] EVER had chickenpox?

1 Yes
2 No
7 Refused
9 Don’t know

Sample children <18

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

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

1 Yes
2 No
7 Refused
9 Don’t know

Sample children <18 who have had chickenpox

<1,2,R,D> [goto CASHMEV]

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

Sample children <18

<1> [go to CASSTILL]
<2,R,D> if AGE LE 2 [go to CCONDT1_1];
else [go to CCONDT_1]
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<tr>
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<th>CHS.085_00.000</th>
<th>Instrument Variable Name:</th>
<th>CASSTILL</th>
<th>QuestionnaireFileName:</th>
<th>Sample Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>Does [fill: SC name] still have asthma?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>2</td>
<td>No</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>7</td>
<td>Refused</td>
<td></td>
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<tr>
<td>9</td>
<td>Don’t know</td>
<td></td>
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<tr>
<td>UniverseText:</td>
<td>Sample children &lt;18 and doctor has informed that child had asthma</td>
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<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [go to CASHYR]</td>
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<th>CASHYR</th>
<th>QuestionnaireFileName:</th>
<th>Sample Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>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?</td>
<td></td>
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<tr>
<td>1</td>
<td>Yes</td>
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<td>2</td>
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<tr>
<td>7</td>
<td>Refused</td>
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<td>9</td>
<td>Don’t know</td>
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<tr>
<td>UniverseText:</td>
<td>Sample children &lt;18 and doctor has informed that child had asthma</td>
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<td>&lt;1,2,R,D&gt; [goto CASMERYR]</td>
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<th>CHS.100_00.000</th>
<th>Instrument Variable Name:</th>
<th>CASMERYR</th>
<th>QuestionnaireFileName:</th>
<th>Sample Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>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?</td>
<td></td>
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<tr>
<td>1</td>
<td>Yes</td>
<td></td>
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<tr>
<td>2</td>
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<td>Refused</td>
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<tr>
<td>9</td>
<td>Don’t know</td>
<td></td>
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</tr>
<tr>
<td>UniverseText:</td>
<td>Sample children &lt;18 and doctor has informed that child had asthma</td>
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</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; if AGE LE 2 [go to CCONDT1_1]; else [go to CCONDT_1]</td>
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<td></td>
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</tbody>
</table>
Question ID: CHS.111_01.000  Instrument Variable Name: CCOND1_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 CCOND1_2]

Question ID: CHS.111_02.000  Instrument Variable Name: CCOND1_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 CCOND1_3]
**Question Text:**

*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 Text:**

*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]
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]

---

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]
### Question Text:

*D Read if necessary.

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

Three or more ear infections?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
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</table>

**UniverseText:** Sample children LE 2

**SkipInstructions:** <1,2,R,D> [go to CCONDT1_9]

---

### Question Text:

*D Read if necessary.

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

Seizures?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>2</td>
<td>No</td>
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<tr>
<td>7</td>
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**UniverseText:** Sample children LE 2

**SkipInstructions:** <1,2,R,D> [go to CHSTATYR]
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<tbody>
<tr>
<td>QuestionText:</td>
<td>DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Hay fever?</td>
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<tr>
<td>1</td>
<td>Yes</td>
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<td>2</td>
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<tr>
<td>7</td>
<td>Refused</td>
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<tr>
<td>9</td>
<td>Don’t know</td>
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<tr>
<td>UniverseText:</td>
<td>Sample children = 3-17</td>
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<tr>
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<td>&lt;1,2,R,D&gt; [go to CCONDT_2]</td>
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<th>CCONDT_2</th>
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<tbody>
<tr>
<td>QuestionText:</td>
<td>* Read if necessary.</td>
<td></td>
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<tr>
<td></td>
<td>DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions...</td>
<td></td>
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<tr>
<td></td>
<td>Any kind of respiratory allergy?</td>
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<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>2</td>
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<td>Refused</td>
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<td>9</td>
<td>Don’t know</td>
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</tbody>
</table>
* 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 CCOND_T_4]

* 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 CCOND_T_5]
**Question ID:** CHS.115_05.000  **Instrument Variable Name:** CCOND_T_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 CCOND_T_6]

---

**Question ID:** CHS.115_06.000  **Instrument Variable Name:** CCOND_T_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 CCOND_T_7]
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]
2017 NHIS Questionnaire - Sample Child
Child Health Status & Limitations
Document Version Date: 04-Jun-18

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]
2017 NHIS Questionnaire - Sample Child
Child Health Status & Limitations

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.
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

Sample children <18

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

Sample children <18
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> [if AGE <6 goto CVISTST;
    if AGE =6-17 goto CVISGLAS]
2017 NHIS Questionnaire - Sample Child
Child Health Status & Limitations
Document Version Date: 04-Jun-18

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> [if AGE <6 go to IHSPEQ;
  else if AGE = 6-17 go to CVISACT]
<2,R,D> [if AGE <6 goto CVISTST;
  else if AGE = 6-17 goto CVISGLAS]

Question ID: CHS.270_00.010  Instrument Variable Name: CVISTST  QuestionnaireFileName: Sample Child

QuestionText: ?[F1]

Has [fill: SC name] EVER had [fill: his/her] vision tested by a doctor or other health professional?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: Sample children <6 who is not blind

SkipInstructions: <1> [goto CVISLT]
<2,R,D> [go to IHSPEQ]
<table>
<thead>
<tr>
<th>Question ID: CHS.270_00.020</th>
<th>Instrument Variable Name: CVISLT</th>
<th>QuestionnaireFileName: Sample Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: When was [fill: his/her] vision last tested?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>In the last 12 months</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>In the last 13-24 months</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Over 24 months</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample children &lt;6 ever had vision tested</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1-3,R,D&gt; [go to IHSPEQ]</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID: CHS.270_00.025</th>
<th>Instrument Variable Name: CVISGLAS</th>
<th>QuestionnaireFileName: Sample Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Does [fill: SC name] wear eyeglasses or contact lenses?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample children &lt;18 who is not blind</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1&gt; [goto CVISDIST] &lt;2,R,D&gt; [go to CVISACT]</td>
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<table>
<thead>
<tr>
<th>Question ID: CHS.270_00.030</th>
<th>Instrument Variable Name: CVISDIST</th>
<th>QuestionnaireFileName: Sample Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: Does [fill: SC name] wear eyeglasses or contact lenses to read road and street signs, see the blackboard, play sports, watch TV, or see things in the distance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample children &lt;18 wear glasses or contact lenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1,2,R,D&gt; [go to VISREAD]</td>
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</tr>
</tbody>
</table>
Question ID: CHS.270_00.035  Instrument Variable Name: CVISREAD  QuestionnaireFileName: Sample Child

QuestionText: Does [fill: SC name] wear eyeglasses or contact lenses to read books, write, play hand-held games, or do other things that require [fill: him/her] to see well up close?

1  Yes
2  No
7  Refused
9  Don’t know

UniverseText: Sample children <18 wear glasses or contact lenses

SkipInstructions: <1,2,R,D> [AGE GE 6 go to CVISACT; else go to IHSPEQ]

Question ID: CHS.270_00.040  Instrument Variable Name: CVISACT  QuestionnaireFileName: Sample Child

QuestionText: Does [fill: SC name] participate in sports, hobbies, or other activities that can cause eye injury? This includes activities such as baseball, basketball, soccer and mowing the lawn.

1  Yes
2  No
7  Refused
9  Don’t know

UniverseText: Sample children 6-17

SkipInstructions: <1> [go to CVISPROT] <2,R,D> [go to IHSPEQ]

Question ID: CHS.270_00.050  Instrument Variable Name: CVISPROT  QuestionnaireFileName: Sample Child

QuestionText: When doing these activities, on average, does [fill: he/she] wear eye protection always, most of the time, some of the time, or none of the time?

1  Always
2  Most of the time
3  Some of the time
4  None of the time
7  Refused
9  Don’t know

UniverseText: Sample children 6-17 participate in sports that cause eye injuries

SkipInstructions: <1-4,R,D> [go to IHSPEQ]
Question ID: CHS.290_00.000  Instrument Variable Name: IHSPEQ  Questionnaire FileName: 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  Questionnaire FileName: 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]

---

Question ID: CHS.310_00.000  Instrument Variable Name: IHMOBYR  Questionnaire FileName: 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: 

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 LEARND; else if AGE = 2 and SEX = 1 go to CMHAGM11_1; if AGE = 2 and SEX = 2 go to CMHAGF11_1]

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

QuestionText: 

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?

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<tbody>
<tr>
<td>0</td>
<td>Not true</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Sometimes true</td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>Often true</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
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</tbody>
</table>

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

#### SkipInstructions:
<0-2,R,D> [go to CMHAGM11_2]

---

### 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?

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<tr>
<td>0</td>
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<tr>
<td>9</td>
<td>Don't know</td>
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</tbody>
</table>

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

#### SkipInstructions:
<0-2,R,D> [go to CMHAGM11_3]
### 2017 NHIS Questionnaire - Sample Child

#### Child Health Status & Limitations

**Document Version Date:** 04-Jun-18

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
</tr>
</thead>
</table>
| CHS.321_03.000 | CMHAGM11_3 | Sample Child | *(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?

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<tbody>
<tr>
<td>0</td>
<td>Not true</td>
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<tr>
<td>1</td>
<td>Sometimes true</td>
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</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

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

**SkipInstructions:** <0-2,R,D> [go to CMHAGM11_4]

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<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
</tr>
</thead>
</table>
| CHS.321_04.000 | CMHAGM11_4 | Sample Child | *(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?

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<tbody>
<tr>
<td>0</td>
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<td>2</td>
<td>Often true</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

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

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

**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

*Document Version Date: 04-Jun-18*

**Question ID:** CHS.361_01.000  
**Instrument Variable Name:** CMHAGF11_1  
**QuestionnaireFileName:** Sample Child

**QuestionText:**

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]

---

**Question ID:** CHS.361_02.000  
**Instrument Variable Name:** CMHAGF11_2  
**QuestionnaireFileName:** Sample Child

**QuestionText:**

* 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]

---

**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]
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]
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

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.

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

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.
<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
<th>UniverseText</th>
<th>SkipInstructions</th>
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<tbody>
<tr>
<td>CAU.040_00.000</td>
<td>CHCCHGYR</td>
<td>Sample Child</td>
<td>At any time IN THE PAST 12 MONTHS did you CHANGE the place(s) to which [fill: alias] USUALLY goes for health care?</td>
<td>Sample children &lt;18 with one or more place to go when sick/need advice [or who reported same place as usual source of routine/preventive care]</td>
<td>&lt;1&gt; [go to CHCCHGHI] &lt;2,R,D&gt; [goto CPRVTRYR]</td>
</tr>
<tr>
<td>CAU.050_00.000</td>
<td>CHCCHGHI</td>
<td>Sample Child</td>
<td>Was this change for a reason related to health insurance?</td>
<td>Sample children &lt;18 that have changed their usual place of health care in the past 12 months</td>
<td>&lt;1,2,R,D&gt; [goto CPRVTRYR]</td>
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<tr>
<td>CAU.052_00.010</td>
<td>CPRVTRYR</td>
<td>Sample Child</td>
<td>DURING THE PAST 12 MONTHS, did you have any trouble finding a general doctor or provider who would see [fill: alias]?</td>
<td>Sample children &lt;18</td>
<td>&lt;1&gt; [goto CPRVTRFD]  &lt;2,R,D&gt; [goto CDRNANP]</td>
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<tr>
<td>CAU.053_00.010</td>
<td>CPRVTRFD</td>
<td>Sample Child</td>
<td>Were you able to find a general doctor or provider who could see [fill: alias]?</td>
<td>Sample children &lt;18 who had trouble finding a provider in the last year</td>
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<td></td>
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<td>1 Yes</td>
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<td>9 Don’t know</td>
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<td>CAU.055_00.010</td>
<td>CDRNP</td>
<td>Sample Child</td>
<td>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?</td>
<td>Sample children &lt;18</td>
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<td>1 Yes</td>
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<td>CAU.056_00.010</td>
<td>CDRNAI</td>
<td>Sample Child</td>
<td>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?</td>
<td>Sample children &lt;18</td>
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2017 NHIS Questionnaire - Sample Child
Child Access to Health Care & Utilization

Document Version Date: 04-Jun-18

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]
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

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
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]
2017 NHIS Questionnaire - Sample Child
Child Access to Health Care & Utilization
Document Version Date: 04-Jun-18

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]
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]
**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]
**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]
(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

Sample children GE 1

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

Sample children <2
### Child Access to Health Care & Utilization

**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]
### Question ID: CAU.170_04.000

**Instrument Variable Name:** CHCSYR1_6  
**Questionnaire FileName:** 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?

<p>| | |</p>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
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<td>2</td>
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<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don’t know</td>
</tr>
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</table>

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR8_1]

---

### Question ID: CAU.175_01.000

**Instrument Variable Name:** CHCSYR_1  
**Questionnaire FileName:** 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?

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<td>1</td>
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<tr>
<td>7</td>
<td>Refused</td>
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<tr>
<td>9</td>
<td>Don’t know</td>
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</table>

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR_2]
**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]
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]
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

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

Sample children GE 2

<1,2,R,D> [if SEX eq <2> and AGE GE 15 goto CHCSYR7; else goto CHCSYR8_1]
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]
**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]
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

Sample children <18

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

Sample children <18 who had at least one ER visit in the past year
<table>
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<th>Question ID:</th>
<th>CAU.282_00.010</th>
<th>Instrument Variable Name:</th>
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<tbody>
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<td>QuestionText:</td>
<td>Did this emergency room visit result in a hospital admission?</td>
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<td>1</td>
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<tr>
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<td>Tell me which of these apply to [fill: alias]’s last emergency room visit?</td>
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<td>… [fill: He/She] didn’t have another place to go</td>
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</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>CAU.283_02.020</th>
<th>Instrument Variable Name:</th>
<th>CERREAS2</th>
<th>QuestionnaireFileName:</th>
<th>Sample Child</th>
</tr>
</thead>
</table>
| 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] |
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]
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]
**2017 NHIS Questionnaire - Sample Child**

Child Access to Health Care & Utilization

Document Version Date: 04-Jun-18

---

**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]
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]
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

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

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

Sample children <18
2017 NHIS Questionnaire - Sample Child
Child Access to Health Care & Utilization
Document Version Date: 04-Jun-18

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.
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

Sample children <18

<0-5, D, R> [if AGE=4-17 goto CMHCOPY; else goto CH1N1_1]
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]
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]

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]
**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]
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

Sample children GE 4

<1-4,R,D> [goto next section]
2017 NHIS Questionnaire - Sample Child
Child Influenza Immunization
Document Version Date: 05-Jun-18

Question ID: CFI.005_00.010 Instrument Variable Name: CH1N1_1 QuestionnaireFileName: Sample Child

QuestionText: ![Question Text](Image)

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.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

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?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>1 vaccination or dose</td>
</tr>
<tr>
<td>2</td>
<td>2 or more vaccination doses</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: Sample Child LE 17 years who have had an vaccine dose

SkipInstructions: <1,2> [goto CH1N1_3M] <R,D> [goto next section]
2017 NHIS Questionnaire - Sample Child
Child Influenza Immunization

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
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.
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]
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.

<table>
<thead>
<tr>
<th>Year</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>9997</td>
<td>Refused</td>
</tr>
<tr>
<td>9999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

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).

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 more than one vaccine dose

SkipInstructions: <1-2,R,D> [goto next section]
2017 NHIS Questionnaire - Sample Child
Child Complementary Health

Document Version Date: 05-Jun-18

**Question ID:** CCH.010_00.000  **Instrument Variable Name:** CNAT_USM  **QuestionnaireFileName:** Sample Child

**QuestionText:**

? [F1]

Now I am going to ask you about some health services [fill1: S.C. name] may have used.

DURING THE PAST 12 MONTHS, did [fill1: S.C. name] see a practitioner for naturopathy (nay-chur-AH-puh-thee)?

1. Yes
2. No
7. Refused
9. Don’t know

**UniverseText:** Sample children 4+

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

---

**Question ID:** CCH.020_00.000  **Instrument Variable Name:** CCHE_USM  **QuestionnaireFileName:** Sample Child

**QuestionText:**

? [F1]

* Read if necessary: DURING THE PAST 12 MONTHS

… did [fill1: S.C. name] see a practitioner for chelation (key-LAY-shun) therapy?

1. Yes
2. No
7. Refused
9. Don’t know

**UniverseText:** Sample children 4+

**SkipInstructions:** <1,2,R,D> [goto CTRD_USM]
2017 NHIS Questionnaire - Sample Child
Child Complementary Health

Document Version Date: 05-Jun-18

Question ID: CCH.030_00.000 Instrument Variable Name: CTRD_USM QuestionnaireFileName: Sample Child

QuestionText: ? [F1]

* Read if necessary: DURING THE PAST 12 MONTHS

… did {fill1: S.C. name} see a practitioner for traditional medicine such as a Shaman (SHAH-man), curandero (coo-rahn-DEHR-oh), Yerbero (yehr-BEH-oh), sobador (so-bah-DOHR), or Native American Healer?

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Sample children 4+

SkipInstructions: <1> [goto CTRD_US1]
<2,R,D> [goto CHOM_USM]

Question ID: CCH.040_00.000 Instrument Variable Name: CTRD_US1 QuestionnaireFileName: Sample Child

QuestionText: Which practitioners for traditional medicine did {fill1: S.C. name} see in the past 12 months?

* Enter all that apply, separate with commas.

1 Shaman (SHAH-man)
2 Curandero (coo-rahn-DEHR-oh), Machi (MAH-chee), or Parchero (pahr-CHEH-roh)
3 Yerbero (yehr-BEH-roh) or Hierbista (yehr-BEE-stah)
4 Sobador (so-bah-DOHR)
5 Native American Healer or Medicine Man
6 Other
7 Refused
9 Don’t know

UniverseText: Sample children 4+ who have seen a traditional healer in the past 12 months

SkipInstructions: <1-6,R,D> [goto CHOM_USM]
Practitioners of homeopathy (ho-mee-AH-puh-thee) recommend small pills or drops that are often placed under the tongue to treat health problems.

DURING THE PAST 12 MONTHS, did [fill1: S.C. name] see a practitioner for homeopathic treatment?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample children 4+

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

DURING THE PAST 12 MONTHS, did [fill1: S.C. name] use … Mantra Meditation, including Transcendental Meditation®, Relaxation Response, and Clinically Standardized Meditation?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample children 4+

SkipInstructions: <1,2,R,D> [goto CMBOU_MD]
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<tr>
<th>Question ID: CCH.070_00.000</th>
<th>Instrument Variable Name: CMOBU_MD</th>
<th>QuestionnaireFileName: Sample Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: ? [F1]</td>
<td>* Read if necessary: DURING THE PAST 12 MONTHS, did {fill1: S.C. name} use</td>
<td></td>
</tr>
<tr>
<td></td>
<td>... Mindfulness meditation, including Vipassana (vih-PAS-sah-nah), Zen Buddhist meditation, Mindfulness-based Stress Reduction, and Mindfulness-based Cognitive Therapy?</td>
<td></td>
</tr>
<tr>
<td>1  Yes</td>
<td>2  No</td>
<td></td>
</tr>
<tr>
<td>7  Refused</td>
<td>9  Don't know</td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample children 4+</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1,2,R,D&gt; [goto CMOBU_SP]</td>
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<th>Instrument Variable Name: CMOBU_SP</th>
<th>QuestionnaireFileName: Sample Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText: ? [F1]</td>
<td>* Read if necessary: DURING THE PAST 12 MONTHS, did {fill1: S.C. name} use</td>
<td></td>
</tr>
<tr>
<td></td>
<td>... Spiritual meditation including Centering Prayer and Contemplative Meditation?</td>
<td></td>
</tr>
<tr>
<td>1  Yes</td>
<td>2  No</td>
<td></td>
</tr>
<tr>
<td>7  Refused</td>
<td>9  Don't know</td>
<td></td>
</tr>
<tr>
<td>UniverseText: Sample children 4+</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions: &lt;1,2,R,D&gt; [goto CMOBU_IM]</td>
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**2017 NHIS Questionnaire - Sample Child**

**Child Complementary Health**

**Document Version Date:** 05-Jun-18

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**Question ID:** CCH.090_00.000  
**Instrument Variable Name:** CMBOU.IM  
**QuestionnaireFileName:** Sample Child

---

**Question Text:**  
? [F1]  
* Read if necessary: DURING THE PAST 12 MONTHS, did {fill1: S.C. name} use  
... Guided imagery  
1 Yes  
2 No  
7 Refused  
9 Don't know

**UniverseText:** Sample children 4+

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

---

**Question ID:** CCH.100_00.000  
**Instrument Variable Name:** CMBOU_PR  
**QuestionnaireFileName:** Sample Child

---

**Question Text:**  
? [F1]  
* Read if necessary: DURING THE PAST 12 MONTHS, did {fill1: S.C. name} use  
... Progressive relaxation?  
1 Yes  
2 No  
7 Refused  
9 Don't know

**UniverseText:** Sample children 4+

**SkipInstructions:** <1,2,R,D> [goto CYTQU_YG]
<table>
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<th>CCH.110_00.000</th>
<th>Instrument Variable Name:</th>
<th>CYTQU_YG</th>
<th>QuestionnaireFileName:</th>
<th>Sample Child</th>
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<tbody>
<tr>
<td>QuestionText:</td>
<td>? [F1]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>DURING THE PAST 12 MONTHS, did {fill1: S.C. name} practice Yoga for {fill2: himself/herself}?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Yes</td>
<td>2 No</td>
<td>7 Refused</td>
<td>9 Don’t know</td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Sample children 4+</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1&gt; [goto CYTQ_BTY]</td>
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<tr>
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<td>&lt;2,R,D&gt; [goto CYTQU_TA]</td>
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<th>CCH.120_00.000</th>
<th>Instrument Variable Name:</th>
<th>CYTQ_BTY</th>
<th>QuestionnaireFileName:</th>
<th>Sample Child</th>
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<tr>
<td>QuestionText:</td>
<td>Did {fill1: S.C. name} do breathing exercises as part of Yoga? Breathing exercises may involve actively controlling the way air is drawn in, or the rate or depth of breathing.</td>
<td></td>
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<tr>
<td></td>
<td>1 Yes</td>
<td>2 No</td>
<td>7 Refused</td>
<td>9 Don’t know</td>
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<tr>
<td>UniverseText:</td>
<td>Sample children 4+ who have practiced Yoga in the past 12 months</td>
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<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [goto CYTQ_MDY]</td>
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<tr>
<td>QuestionText:</td>
<td>Did {fill1: S.C. name} do meditation as part of Yoga?</td>
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<tr>
<td></td>
<td>1 Yes</td>
<td>2 No</td>
<td>7 Refused</td>
<td>9 Don’t know</td>
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<tr>
<td>UniverseText:</td>
<td>Sample children 4+ who have practiced Yoga in the past 12 months</td>
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<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [goto CYTQU_TA]</td>
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Question ID: CCH.140_00.000  Instrument Variable Name: CYTQU_TA  QuestionnaireFileName: Sample Child

QuestionText:  ? [F1]

DURING THE PAST 12 MONTHS, did {fill1: S.C. name} practice Tai Chi (tie-CHEE) for {fill2: himself/herself}? 

1 Yes  
2 No  
7 Refused  
9 Don't know

UniverseText: Sample children 4+

SkipInstructions: <1> [goto CYTQ_BTT]  
<2,R,D> [goto CYTQU_QG]

Question ID: CCH.150_00.000  Instrument Variable Name: CYTQ_BTT  QuestionnaireFileName: Sample Child

QuestionText: Did {fill1: S.C. name} do breathing exercises as part of Tai-Chi? Breathing exercises may involve actively controlling the way air is drawn in, or the rate or depth of breathing.

1 Yes  
2 No  
7 Refused  
9 Don't know

UniverseText: Sample children 4+ who have practiced Tai-Chi in the past 12 months

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

Question ID: CCH.160_00.000  Instrument Variable Name: CYTQ_MDT  QuestionnaireFileName: Sample Child

QuestionText: Did {fill1: S.C. name} do meditation as part of Tai-Chi?

1 Yes  
2 No  
7 Refused  
9 Don't know

UniverseText: Sample children 4+ who have practiced Tai-Chi in the past 12 months

SkipInstructions: <1,2,R,D> [goto CYTQU_QG]
Question ID: CCH.170_00.000  Instrument Variable Name: CYTQU_QG  QuestionnaireFileName: Sample Child

QuestionText: ? [F1]

DURING THE PAST 12 MONTHS, did {fill1: S.C. name} practice Qi Gong (chee-GONG) for {fill2: himself/herself}?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample children 4+

SkipInstructions: <1> [goto CYTQ_BTQ]
<2,R,D> [goto next section]

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Question ID: CCH.180_00.000  Instrument Variable Name: CYTQ_BTQ  QuestionnaireFileName: Sample Child

QuestionText: Did {fill1: S.C. name} do breathing exercises as part of Qi Gong? Breathing exercises may involve actively controlling the way air is drawn in, or the rate or depth of breathing.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample children 4+ who have practiced Qi Gong in the past 12 months

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

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Question ID: CCH.190_00.000  Instrument Variable Name: CYTQ_MDQ  QuestionnaireFileName: Sample Child

QuestionText: Did {fill1: S.C. name} do meditation as part of Qi Gong?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Sample children 4+ who have practiced Qi Gong in the past 12 months

SkipInstructions: <1,2,R,D> [goto next section]