

Sample Adult Sections

FRT COV MLG BCK

Roster

HHC REL FAM Front Coverage Mailing Address

Household Composition Relationship of Children to Parents Family Composition

Back

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VFY	Sample Adult Verification
HIS	Health Status
LSF	Life Satisfaction
HYP	Hypertension
CHL	Cholesterol
CVC	Cardiovascular Conditions
AST	Asthma
CAN	Cancer
DIB	Diabetes
CON	Other Chronic Conditions
RCN	Rotating Conditions
SCE CFS	Sponsored Conditions-Ever Chronic Fatigue Section
TSH	Taste and Smell Health Conditions
ISN	Immunosuppression
ALG	Allergies
BMI	Current pregnancy, height, weight
VIS	Vision
HEA	Hearing
MOB	Mobility
COM	Communication
COG	Cognition
UPP	Self-care and Upper Body
SOC	Social Functioning
ADO	Age of Disability Onset
INS	Health Insurance
PAY	Difficulty Paying for Health Care
CVL	Long-COVID
TSC	Taste and Smell - COVID
UTZ TLH	Utilization Telehealth
HIT	Internet Access & Health Information Technology
PMD	Prescription Medication
IMS	Immunization
ANX	Anxiety
DEP	Depression
MHC	Mental Health Care
SPD	Serious Psychological Distress
REP	Repetitive Strain Injury
INJ	Injury
TBI	Concussions, past 12 months
FGE	Fatigue
CIG	Cigarettes and E-cigarettes
ОТВ	Other Tobacco
LCS	Lung Cancer Screening
ALC	Alcohol Use
PHY WLK	Physical Activity
ENV	Walking Perceptions of the Walking Environment
CPA	Content of Care – Physical Activity
SUN	Sun Care and Protection
SLP	Sleep
SSL	Social Support and Loneliness
TSM	Taste and Smell
ORN	Sexual Orientation
GNI	Gender Identity
MAR	Marital Status
VET	Veterans Status
NAT	Nativity
LNG	Language Spoken at Home
SCH	Schooling
EMP	Employment
EMD	Detailed Employment
VOL	Volunteer Activities
FEM INC	Employment of family members
FOO	Family Income Food Related Programs
FDS	Food Security
HOU	Housing
SDH	Housing Insecurity
TBH	Transportation Barrier to Care
CIV	Civic Engagement
REC	Person's name
TEL	Telephone Use
LNK	Linkage
THX	Thanks

THX

Thanks

Sample Child Sections

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VFY	Verification and demographic details
HIS	Health Status
AST	Asthma
DIB	Diabetes
DLD	Developmental and Learning Disabilities
ALG	Allergies
TSH	Taste and Smell Health Conditions
BMI	Height and Weight
VIS	Vision
HEA	Hearing
MOB	Mobility
UPP	Upper Body, Motor skills and self care
COM	Communication
COG	Cognition
ANX	Anxiety
DEP	Depression
BEH	Behavior
BSC	Baby Pediatric Symptom Checklist
SCH	Schooling
INS	Health Insurance
PAY	Difficulty Paying for Health Care
CVL	Long-COVID
UTZ	Utilization
TLH	Telehealth
PMD	Prescription medications
IMM	Immunization
CVV	COVID-19 vaccination
MHC	Mental health care
INJ	Injury
TBI	Concussions – past 12 months
PHY	Physical Activity
NHC	Neighborhood Characteristics
SLP SCR	Sleep Screen Time
TSM	Taste and Smell
PAR	Parent Demographics
NAT	Nativity
FEM	Employment of family members
INC	Family Income
FOO	Food Related Programs
FDS	Food Security
HOU	Housing
REC	Child's full name
TEL	Telephone ownership
LNK	Linkage
TUV	Thanks

THX

Thanks