#### **Child Identification**

Question ID: CID.0	001_00.000	Instrument Variable Name:	CURRES	QuestionnaireFileName:	Sample Child
QuestionText: * ]	Enter the line	number of the person to who	om you are speal	cing.	
<b>01-25</b> Pe	erson numbe	r of the respondent for Samp	le Child		
UniverseText:	Sample	child section not started or no	ot completed		
SkipInstructions:	if AST goto elseif i goto else goto endif goto b endif	T ne empty and CSTAT ne '2' AT = empty or ASTAT = '2' adult.aid.SADULT recontact.RCIFLAG ne '1' TF recontact.RCI_BEGIN proced back.OUTCOMEB1 procedur ack.OUTCOMEB1 procedur • if this is NOT an allowable goto ERR_CURRES elseif CURRES = a line nun store CURRES in CSPAV goto CSRELTIV elseif KNOWSC2 = 'Don't k goto KNOAVAIL else goto CSPAVAIL endif	THEN HEN edure ure e line number nber entered in K AIL and CSRES		WSC2)
Hard Edit:	ERR_C	URRES			
	* You h	ave selected a non-selectable	e person.		
	* Please	e correct.			

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#### **Child Identification** Document Version Date: 12-Jun-19 **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.CSRELTIV endif <96> store child.cid.CSPAVAIL in child.cid.CSRESP goto cbk.CCALLBK1 <R> store '4' in CSTAT(FAMINT) if ASTAT = empty or ASTAT = '2' THEN goto adult.aid.SADULT elseif recontact.RCIFLAG ne '1' THEN goto recontact.RCI\_BEGIN procedure else goto back.OUTCOMEB1 procedure endif ERR\_CSPAVAIL Hard Edit: \* You have selected a non-selectable person. \* Please correct.

#### **Child Identification**

uestion ID:	CID.030_00.000 Instrument Variable Nar	ne: CSRELTIV	QuestionnaireFileName:	Sample Child
uestionText:	(book) C1			
	[fill1: The next questions are about [fill What is your relationship to [fill2: ALL		]	
01	Parent (Biological, adoptive, or step)			
02	Grandparent			
03	Aunt/Uncle			
04	Brother/Sister			
05	Other relative			
06	Legal guardian			
07	Foster parent			
08	Other non-relative			
97	Refused			
99	Don't know			
UniverseTex	t: Someone identified as knowledg	eable about child's health		
SkipInstruct	goto child.chs.BWG	T_LB ographics.hhc.HHRESP		

Question ID:	CID.040	_00.000	Instrument Variable Name:	CSPVERF_S	QuestionnaireFileName:	Sample Child
QuestionText:	* Plea	ase verify	the following information abo	ut the sample child before	proceeding:	
	I have	e recordeo	l [fill1: ALIAS of Sample Chil	d]'s sex as [fill2: Sex of S	ample Child]. Is this correct	:?
	* If re	espondent	"refuses" or says "don't know"	', enter "1" for "yes".		
1	Yes					
2	No					
UniverseTex	t:	Respond	lent is not the person entered in	n HHRESP or RELRESP	_A.	
SkipInstruct	ions:	U	D CSPVERF_A D NEWSEX			

#### **Child Identification**

Question ID:	CID.041	_00.000	Instrument Variable Name:	NEWSEX	QuestionnaireFileName:	Sample Child
QuestionText:	Is [fill	: ALIAS	of Sample Child] Male or Fe	male?		
	* If do	on't knov	v or refused enter your best gu	uess of the child's s	ex.	
1	Male					
2	Fema	ıle				
UniverseTex	xt:	Respond	lent said child's sex is not cor	rect.		
SkipInstruct	tions:	go re	ore NEWSEX in SEX oto ERR_NEWSEX set CSPVERF_S oto CSPVERF_S			
Hard Edit:		ERR_N	EWSEX			
		* The g	ender will now be changed to	[fill: NEWSEX].		
		goto CS	SPVERF_S (as the default got	:0)		
Question ID:	CID.042	_00.000	Instrument Variable Name:	CSPVERF_A	QuestionnaireFileName:	Sample Child
QuestionText:	* Plea	se verify	the following information ab	out the sample chil	d before proceeding:	
	I have	recorde	d [fill1: ALIAS of Sample Ch	ild]'s age as [fill2: .	Age of Sample Child] old. Is this c	correct?
	* If re	sponden	"refuses" or says "don't know	v", enter "1" for "ye	es".	
1	Yes					
2	No					
UniverseTex	xt:	Respond	lent verified child's sex			
SkipInstruct	tions:		o CSPVERF_D o NEWAGE			

		1010 XIIIO	Quartianation	omple Child	
			Questionnaire - S Child Identification	-	
			nt Version Date: 12-Ju		
Question ID:	CID.043_00.0	000 Instrument Variable Name	: NEWAGE	QuestionnaireFileName:	Sample Child
QuestionText:	How old is	s [fill1: ALIAS of Sample Child	1]?		
	* If age giv	ven in months, weeks, or days,	convert age to appropri	ate year. If less than one year old	, enter "0".
000-120	Age in year	ars			
UniverseTex	at: Resp	pondent said child's age is not o	correct		
SkipInstruct	tions: <0-1	120, Refused, Don't know> if NEWAGE = 'Refused' or N reset CSPVERF_A goto ERR_NEWAGE else store NEWAGE in AGE goto NEWDOB_M	NEWAGE = 'Don't kno	w' or NEWAGE = AGE	
Hard Edit:	ERI	R_NEWAGE			
	*Ag	ge of [fill1: ALIAS of Sample C	Child] remains [fill2: A	ge of Sample Child] years old.	
	gote	o CSPVERF_A (whether suppr	ressed or not)		
Question ID:	CID.044_00.0	000 Instrument Variable Name	CSPVERF_D	QuestionnaireFileName:	Sample Child
QuestionText:	* Please ve	erify the following information	about the sample child	before proceeding:	
	I have reco	orded [fill1: ALIAS of Sample (	Child]'s birthday as [fil	2: Birthday of Sample Child]. Is	this correct?
	* If respon	dent "refuses" or says "don't kn	now", enter "1" for "yes	".	
1	Yes				
2	No				
UniverseTex	xt: Resp	pondent 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

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#### **Child Identification**

CID.046_01.000	Instrument Variable Name:	NEWDOB_M	QuestionnaireFileName:	Sample Child
1 of 3				
What is [fill: A	ALIAS of Sample Child]'s birt	hday?		
*Enter month	of birth.			
January				
February				
April				
May				
June				
July				
August				
September				
December				
	dent said child's date of birth i Refused, Don't know> goto N		age is not correct	
ons: <01-12,	Refused, Don't know> goto N	NEWDOB_D		
ons: <01-12,			age is not correct QuestionnaireFileName:	Sample Child
ons: <01-12,	Refused, Don't know> goto N	NEWDOB_D		Sample Child
ons: <01-12,	Refused, Don't know> goto N Instrument Variable Name:	NEWDOB_D		Sample Child
ons: <01-12, CID.046_02.000 2 of 3	Refused, Don't know> goto N Instrument Variable Name: birth.	NEWDOB_D		Sample Child
CID.046_02.000 2 of 3 * Enter day of Day of the mo	Refused, Don't know> goto N Instrument Variable Name: birth.	NEWDOB_D	QuestionnaireFileName:	Sample Child
CID.046_02.000 2 of 3 * Enter day of Day of the mo : Respond	Refused, Don't know> goto N Instrument Variable Name: birth.	NEWDOB_D NEWDOB_D s not correct or child's	QuestionnaireFileName:	Sample Child
CID.046_02.000 2 of 3 * Enter day of Day of the mo : Responder ons: <01-31,	Refused, Don't know> goto N Instrument Variable Name: birth. onth dent said child's date of birth i Refused,Don't know> goto N	NEWDOB_D s not correct or child's EWDOB_Y	QuestionnaireFileName:	Sample Child
ons:       <01-12,	Refused, Don't know> goto N Instrument Variable Name: birth. onth dent said child's date of birth i Refused,Don't know> goto Ni not valid, goto ERR_NEWDC	NEWDOB_D s not correct or child's EWDOB_Y	QuestionnaireFileName:	Sample Child
CID.046_02.000 2 of 3 * Enter day of Day of the mo : Respond ons: <01-31, If days f ERR_N	Refused, Don't know> goto N Instrument Variable Name: birth. onth dent said child's date of birth i Refused,Don't know> goto Ni not valid, goto ERR_NEWDC IEWDOB_D	NEWDOB_D NEWDOB_D s not correct or child's EWDOB_Y 0B_D	QuestionnaireFileName: age is not correct	Sample Child
CID.046_02.000 2 of 3 * Enter day of Day of the mo : Respond ons: <01-31, If days f ERR_N	Refused, Don't know> goto N Instrument Variable Name: birth. onth dent said child's date of birth i Refused,Don't know> goto Ni not valid, goto ERR_NEWDC	NEWDOB_D NEWDOB_D s not correct or child's EWDOB_Y 0B_D	QuestionnaireFileName: age is not correct	Sample Child
	What is [fill: A *Enter month January February March April May June July August	What is [fill: ALIAS of Sample Child]'s birt *Enter month of birth. January February March April May June July August September October November	What is [fill: ALIAS of Sample Child]'s birthday? *Enter month of birth. January February March April May June July August September October November	What is [fill: ALIAS of Sample Child]'s birthday? *Enter month of birth. January February March April May June July August September October November

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### 2018 NHIS Questionnaire - Sample Child

#### **Child Identification**

Document Version Date: 12-Jun-19

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

QuestionText: 3 of 3

\* Enter year of birth.

**1880-2020** Year of birth

#### **Child Identification**

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 goto CSPVERF_A elseif CSPVERF_D = '2' (No) then reset CSPVERF_D to empty goto 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) goto ERR1_NEWDOB_Y endif
	(if birth month = '02' and birth day = '29' and this is not a leap year) goto ERR2_NEWDOB_Y endif
	<pre>(if NEWDOB_M = 'Ref' or 'DK') or (if NEWDOB_D = 'Ref' or 'DK') or (if NEWDOB_Y = 'Ref' or 'DK') goto ERR3_NEWDOB_Y else store NEWDOB_M in DOBM</pre>
	store NEWDOB_D in DOBD store NEWDOB_Y in DOBY if CSPVERF_A = '2' (No) then reset CSPVERF_A to empty goto CSPVERF_A elseif CSPVERF_D = '2' (No) then reset CSPVERF_D to empty goto 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 goto ERR4_NEWDOB_Y endif
Hard Edit:	ERR1_NEWDOB_Y
	*Future date invalid: [fill2: <newdob_m> <newdob_d>, <newdob_y>] *Please correct.</newdob_y></newdob_d></newdob_m>
	goto NEWDOB_M (whether suppressed or not)
	ERR2_NEWDOB_Y
	*Not a valid day: [fill2: <newdob_m> <newdob_d>, <newdob_y>] *Please correct.</newdob_y></newdob_d></newdob_m>
	goto NEWDOB_M (whether suppressed or not)
	ERR3_NEWDOB_Y
	*DOB of [fill1: ALIAS of Sample Child] remains [fill3: <dobm> <dobd>, <doby>]</doby></dobd></dobm>
	goto CSPVERF_A
	ERR4_NEWDOB_Y
	*Data mismatched. Please fix Age or Birthday.

#### **Child Identification**

Document Version Date: 12-Jun-19

goto CSPVERF\_A (whether suppressed or not)

#### **Child Health Status & Limitations**

Question ID:	CHS.010	_01.000	Instrument Variable Name	BWGT_LB	QuestionnaireFileName:	Sample Child
QuestionText:	?[F1]					
	What	was [fill:	S.C.name]'s birth weight?			
	* Ente	r 'M' to r	ecord metric measurements	S.		
01-15	1-15	pounds				
97	Refus	sed				
99		know				
Μ	Metri					
UniverseTex	at:	Sample	children <18			
SkipInstruct		<13-15> <r,d> [ <m> [go</m></r,d>	[goto BWGT_OZ] [goto ERR1_BWGT_LB] goto CHGT_FT] oto BWGT_GR] 1-15, M, D, R> goto ERR2			
Hard Edit:		ERR2_1	BWGT_LB			
			'1-15" or "M" or "Don't kn correct.	ow/Refused" allowed	in this field.	
Soft Edit:		ERR1_I	3WGT_LB			
		* [fill: 1 * Please	BWGT_LB] is an unusually verify.	y high number.		
Question ID:	CHS.010	_02.000	Instrument Variable Name	BWGT_OZ	QuestionnaireFileName:	Sample Child
QuestionText:	* Ente	r ounces				
00-15	0-15	ounces				
97	Refus	sed				
99		know				
Blank	Blank					
UniverseTex	at:	Sample	children <18 who have a va	alue entered for weigh	t in pounds.	
SkipInstruct			,D> [goto CHGT_FT] T_LB = <0-15, D, R> and	BWGT_OZ = <empt< td=""><td>y&gt; go to CHGT_FT]</td><td></td></empt<>	y> go to CHGT_FT]	

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# 2018 NHIS Questionnaire - Sample Child

### **Child Health Status & Limitations**

Question ID: (	CHS.011_00.0	000 Instrument Variable Name:	BWGT_GR	QuestionnaireFileName:	Sample Child
QuestionText:	* Enter we	ight in grams.			
0500	500 grams	s or less			
0501-6899	501-6899	grams			
6900	6900+ gra	ms			
9997	Refused				
9999	Don't know	W			
UniverseText	Sam	ple children <18 whose birth we	eight will be entered in	metric.	
SkipInstructio		0-5485, R,D> [goto CHGT_FT] 86-6900> [goto ERR_BWGT_G			
Soft Edit:	ERF	R_BWGT_GR			
		II1: BWGT_GR] is an unusuall ease verify.	y high number (equal t	o [fill2] pounds, [fill3] ounces).	
	11				
Juestion ID: (		))() Instrument Variable Name:	CHGT_FT	QuestionnaireFileName:	Sample Child
			CHGT_FT	QuestionnaireFileName:	Sample Child
Question ID: (	CHS.020_01.0 ?[F1]			QuestionnaireFileName:	Sample Child
	CHS.020_01.( ?[F1] How tall is	)))) Instrument Variable Name: [fill: S.C. name] now (without	shoes)?	QuestionnaireFileName: enter the measure in inches (36	-
	CHS.020_01.0 ?[F1] How tall is * If the chi	)))) Instrument Variable Name: [fill: S.C. name] now (without	shoes)? ess 'ENTER' at feet and		-
	CHS.020_01.0 ?[F1] How tall is * If the chi	000 <b>Instrument Variable Name:</b> [fill: S.C. name] now (without ld's height is given in inches, pre	shoes)? ess 'ENTER' at feet and		-
QuestionText:	CHS.020_01.0 ?[F1] How tall is * If the chi * Enter 'M'	000 <b>Instrument Variable Name:</b> [fill: S.C. name] now (without ld's height is given in inches, pre	shoes)? ess 'ENTER' at feet and		-
QuestionText: 00-07	CHS.020_01.0 ?[F1] How tall is * If the chi * Enter 'M' 0-7 feet	000 <b>Instrument Variable Name:</b> [fill: S.C. name] now (without ld's height is given in inches, pre- to record metric measurements.	shoes)? ess 'ENTER' at feet and		-
QuestionText: 00-07 97	CHS.020_01.0 ?[F1] How tall is * If the chi * Enter 'M' 0-7 feet Refused	000 <b>Instrument Variable Name:</b> [fill: S.C. name] now (without ld's height is given in inches, pre- to record metric measurements.	shoes)? ess 'ENTER' at feet and		-
QuestionText: 00-07 97 99	CHS.020_01.0 ?[F1] How tall is * If the chi * Enter 'M' 0-7 feet Refused Don't know Metric	000 <b>Instrument Variable Name:</b> [fill: S.C. name] now (without ld's height is given in inches, pre- to record metric measurements.	shoes)? ess 'ENTER' at feet and		-
QuestionText: 00-07 97 99 M	CHS.020_01.0 ?[F1] How tall is * If the chi * Enter 'M' 0-7 feet Refused Don't knov Metric * Sam <0-7 <r,1 <m></m></r,1 	000 <b>Instrument Variable Name:</b> [fill: S.C. name] now (without ld's height is given in inches, pre- to record metric measurements.	shoes)? ess 'ENTER' at feet and		-
QuestionText: 00-07 97 99 M UniverseText:	CHS.020_01.0 ?[F1] How tall is * If the chi * Enter 'M' 0-7 feet Refused Don't knov Metric : Sam ons: <em &lt;0-7 <r,1 <m2; [If N</m2; </r,1 </em 	000 <b>Instrument Variable Name:</b> [fill: S.C. name] now (without ld's height is given in inches, pro- to record metric measurements. w uple children 12+ pty> [goto CHGT_IN] /> [goto CHGT_IN] D> [goto CHGT_LB] > [goto CHGT_M]	shoes)? ess 'ENTER' at feet and		-

#### **Child Health Status & Limitations**

Question ID:	CHS.020_02.000	Instrument Variable Name:	CHGT_IN	QuestionnaireFileName:	Sample Child
QuestionText:	* Enter inches				
00-36 97 99	0-36 inches Refused Don't know				
UniverseTex	t: Sample	children 12+ whose height in	feet is 0-7 or is left em	pty.	
SkipInstruct	ions: <0-36,1	R,D> If (CHGT_FT = '0', 'emp goto ERR1_CHGT_IN elseif CHGT_FT = '1-7' a goto ERR2_CHGT_IN elseif (SEX = '1' and AGE = '12' and (CHT AGE = '13' and (CHT AGE = '14' and (CHT AGE = '16' and (CHT AGE = '17' and (CHT AGE = '12' and (CHT AGE = '12' and (CHT AGE = '13' and (CHT AGE = '14' and (CHT AGE = '15' and (CHT AGE = '16' and (CHT AGE = '16' and (CHT AGE = '17' and (CHT Boto ERR3_CHGT_IN else goto CWGT_LB	and CHGT_IN ge '12' TINCH lt '53' or CHTI TINCH lt '55' or CHTI TINCH lt '58' or CHTI TINCH lt '60' or CHTI TINCH lt '61' or CHTI TINCH lt '62' or CHTI TINCH lt '54' or CHTI TINCH lt '55' or CHTI TINCH lt '57' or CHTI TINCH lt '57' or CHTI TINCH lt '57' or CHTI	NCH gt '68')) or NCH gt '72')) or NCH gt '73')) or NCH gt '74')) or NCH gt '74')) or NCH gt '74')) or NCH gt '68')) or NCH gt '68')) or NCH gt '69')) or	
Hard Edit:	* Must	CHGT_IN enter an answer in at least the e correct.	inches item.		
		CHGT_IN			
		ber of inches exceeds maximur e correct.	n allowed.		
Soft Edit:	ERR3_	CHGT_IN			
	* Pleas	e verify that the height was ent	ered correctly. Probe	only if necessary.	

### **Child Health Status & Limitations**

Question ID:	CHS.021_01.000 Instrument Variable National CHS.021_01.000	ame: CHGT_M	QuestionnaireFileName:	Sample Child
QuestionText:	* Enter height in metric.			
	* If the child's height is given in centin centimeters maximum).	meters, press 'ENTER' at m	eters and enter the measure in cen	timeters (241
0-2	0-2 meters			
7	Refused			
9	Don't know			
Blank	Blank			
UniverseTex	t: Sample children 12+ whose cur	rent height will be entered	in metric.	
SkipInstruct	ions: <0-2,empty> [goto CHGT_CM <r,d> [goto CWGT_LB]</r,d>	]		

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# 2018 NHIS Questionnaire - Sample Child

### **Child Health Status & Limitations**

Question ID:	CHS.021	_02.000	Instrument Variable Name:	CHGT_CM	QuestionnaireFileName:	Sample Child
QuestionText:	* Ente	er centime	eters.			
000-241 Blank	0-241 Blank	l centime	ters			
UniverseTex	t:	Sample of empty.	children 12+ whose weight w	vill be entered in met	ric, and who entered "0-2" for he	ight in meters or left it
SkipInstruct	ions:	<0-241,1	R,D> If (CHGT_M = '0', 'em goto ERR1_CHGT_CI elseif (CHGT_M eq '2' : goto ERR2_CHGT_CI elseif (SEX = '1' and AGE = '12' and (CH AGE = '13' and (CH AGE = '14' and (CH AGE = '16' and (CH AGE = '16' and (CH AGE = '12' and (CH AGE = '12' and (CH AGE = '14' and (CH AGE = '16' and (CH AGE = '16' and (CH AGE = '17' and (CH) aGE = '17' and (CH)	M and CHGT_CM gt '4 M TCM lt '137' or CH TCM lt '140' or CH TCM lt '148' or CH TCM lt '152' or CH TCM lt '152' or CH TCM lt '157' or CH TCM lt '141' or CH TCM lt '145' or CH TCM lt '145' or CH TCM lt '145' or CH TCM lt '145' or CH	41') or (CHGT_M eq '1' and CH TCM gt '174')) or TCM gt '184')) or TCM gt '186')) or TCM gt '189')) or TCM gt '189')) or TCM gt '192')) or TCM gt '173')) or TCM gt '176')) or TCM gt '176')) or TCM gt '177')) or TCM gt '177')) or	GT_CM gt '141')
Hard Edit:		_	CHGT_CM enter an answer at least in the correct.	centimeters item.		
			CHGT_CM			
			neight exceeds maximum allo correct.	wed.		
Soft Edit:		ERR3_C	CHGT_CM			
		* Please	verify that the height was ent	ered correctly. Prob	e only if necessary.	

#### **Child Health Status & Limitations**

Question ID:	CHS.022_	00.000 Instrument Variable Name:	CWGT_LB	QuestionnaireFileName:	Sample Child
QuestionText:	How m	uch does [fill: S.C. name] weigh nov	w (without shoes)?		
	* Enter	'M' to record metric measurements.			
	* Enter	'500' if 500 pounds or more.			
001-500	1-500	pounds			
997	Refuse	•			
999	Don't l	cnow			
Μ	Metric				
UniverseTe	xt: S	Sample children 12+			
SkipInstruc	~	$AGE = `13' and (CV)$ $AGE = `14' and (CV)$ $AGE = `15' and (CV)$ $AGE = `15' and (CV)$ $AGE = `16' and (CV)$ $AGE = `17' and (CV)$ $AGE = `12' and (CV)$ $AGE = `12' and (CV)$ $AGE = `13' and (CV)$ $AGE = `14' and (CV)$ $AGE = `16' and (CV)$ $AGE = `16' and (CV)$ $AGE = `17' and (CV)$ $Goto ERR2_CWGT_LB$ $elseif CHGT_FLG = `1' and$ $goto ADD_1$ $elseif CHGT_FLG = `1' and$ $goto ADD_1_2$ $else$ $calculate the BMI (Body N)$ $CR,D> if AGE ge `2'$ $goto ADD_1$ $else$ $goto ADD_1$ $else$ $goto ADD_1$	WGT_LB It '62' or C WGT_LB It '70' or C WGT_LB It '83' or C WGT_LB It '94' or C WGT_LB It '98' or C WGT_LB It '98' or C WGT_LB It '106' or C WGT_LB It '62' or C WGT_LB It '62' or C WGT_LB It '84' or C WGT_LB It '84' or C WGT_LB It '84' or C WGT_LB It '87' or C WGT_LB It '87' or C WGT_LB It '90' or C d CWGT_FLG = '1' a	and AGE ge '2' and AGE lt '2'	
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 en	ntered correctly. Pro	be only if necessary.	

#### **Child Health Status & Limitations**

Question ID:	CHS.023_00.000	Instrument Variable Name:	CWGT_KG	QuestionnaireFileName:	Sample Child
QuestionText:	* Enter weight	in kilograms.			
002-226	2-226 kilogra	ms			
UniverseTex	0	children 12+ whose weight wi	ll be entered in metric.		
SkipInstructi	<r,d></r,d>	AGE = `13' and (CW) AGE = `14' and (CW) AGE = `15' and (CW) AGE = `16' and (CW) AGE = `17' and (CW) (SEX = `2' and) AGE = `12' and (CW) AGE = `13' and (CW) AGE = `14' and (CW) AGE = `15' and (CW) AGE = `16' and (CW) AGE = `16' and (CW) AGE = `16' and (CW)	GT_KG = '28' or CWG' GT_KG = '32' or CWG' GT_KG = '32' or CWG' GT_KG = '42' or CWG' GT_KG = '44' or CWG' GT_KG = '48' or CWG' GT_KG = '28' or CWG' GT_KG = '33' or CWG' GT_KG = '38' or CWG' GT_KG = '39' or CWG' GT_KG = '39' or CWG' GT_KG = '41' or CWG' CWGT_FLG = '1' and A CWGT_FLG = '1' and A	$\Gamma_{KG} = (112'))$ or $\Gamma_{KG} = (121'))$ or $\Gamma_{KG} = (121'))$ or $\Gamma_{KG} = (139'))$ or $\Gamma_{KG} = (144'))$ or $\Gamma_{KG} = (144'))$ or $\Gamma_{KG} = (108'))$ or $\Gamma_{KG} = (114'))$ or $\Gamma_{KG} = (108'))$ or $\Gamma_{KG} = (117'))$ or $\Gamma_{KG} = (133'))$ AGE ge (2' AGE lt (2')	
Hard Edit:	ERR1_	CWGT_KG			
		ht is out of range (2-226). e correct.			
Soft Edit:	ERR2_	CWGT_KG			
	* Please	e verify that the weight was ent	tered correctly. Probe or	ly if necessary.	

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#### Child Health Status & Limitations

Question ID:	CHS.031_02.000	Instrument Variable Name:	ADD1_2	QuestionnaireFileName:	Sample Child
QuestionText:	Has a doctor o	r health professional ever told	you that [fill: S.C. r	name] had	
	an intellectual	disability, also known as men	tal retardation?		
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText	t: Sample	children <2			
SkipInstructi	ions: <1,2,R,1	D> [goto ADD1_3]			
Question ID:	CHS.031_03.000	Instrument Variable Name:	ADD1_3	QuestionnaireFileName:	Sample Child
Question ID: QuestionText:	CHS.031_03.000 ?[F1]	Instrument Variable Name:	ADD1_3	QuestionnaireFileName:	Sample Child
			ADD1_3	QuestionnaireFileName:	Sample Child
	?[F1] * Read if neces				Sample Child
	?[F1] * Read if nece Has a doctor o	ssary.			Sample Child
	?[F1] * Read if nece Has a doctor o	ssary. r health professional ever told			Sample Child
QuestionText:	?[F1] * Read if nece Has a doctor o Any other deve	ssary. r health professional ever told			Sample Child
QuestionText: 1	?[F1] * Read if neces Has a doctor o Any other deve Yes	ssary. r health professional ever told			Sample Child
QuestionText: 1 2	?[F1] * Read if neces Has a doctor o Any other deve Yes No	ssary. r health professional ever told			Sample Child
QuestionText: 1 2 7	<ul> <li>?[F1]</li> <li>* Read if neces</li> <li>Has a doctor of</li> <li>Any other devo</li> <li>Yes</li> <li>No</li> <li>Refused</li> <li>Don't know</li> </ul>	ssary. r health professional ever told			Sample Child

### **Child Health Status & Limitations**

	CHS.031_04.0	10 Instrument Variable Na	me: ADD1_2N	QuestionnaireFileName:	Sample Child
QuestionText:	?[F1]				
	Does [fill: S	S.C. name] currently have a	n intellectual disability, al	so known as mental retardation?	
1	Yes				
2	No				
7	Refused				
9	Don't know	V			
UniverseTex	-	ole children <2 who have b ility, also known as mental	-	er health professional that they ha	ave an intellectual
SkipInstruct	ions: <1,2,	R,D> if ADD1_3=1 [goto	ADD1 3N]; else [goto C0	ONDLI	
Question ID:	CHS.031_05.0	10 Instrument Variable Na	me: ADD1_3N	QuestionnaireFileName:	Sample Child
	CHS.031_05.0 ?[F1]	10 Instrument Variable Na	me: ADD1_3N	QuestionnaireFileName:	Sample Child
	?[F1]	10 <b>Instrument Variable Na</b> S.C. name] currently have a			Sample Child
	?[F1]				Sample Child
QuestionText:	?[F1] Does [fill: S				Sample Child
QuestionText: 1	?[F1] Does [fill: S Yes No				Sample Child
QuestionText: 1 2	?[F1] Does [fill: S Yes	S.C. name] currently have a			Sample Child
2 7	?[F1] Does [fill: S Yes No Refused Don't know	S.C. name] currently have a	ny other developmental de		-

#### **Child Health Status & Limitations**

Question ID: (	CHS.032_01.000	Instrument Variable Name:	ADD_1	QuestionnaireFileName:	Sample Child
QuestionText:	?[F1]				
	Has a doctor o	r health professional ever told	you that [fill: S.C	. name] had	
	Attention Defi	cit Hyperactivity Disorder (AI	OHD) or Attentior	Deficit Disorder (ADD)?	
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText:	: Sample	children 2-17			
SkipInstructio	<b>JIIS:</b> <1,2, <b>K</b> ,	D> [go to ADD_2]			
		Instrument Variable Name:	ADD_2	QuestionnaireFileName:	Sample Child
		Instrument Variable Name:	ADD_2	QuestionnaireFileName:	Sample Child
Question ID: (	CHS.032_02.000 * Read if nece	Instrument Variable Name:			Sample Child
Question ID: (	CHS.032_02.000 * Read if nece Has a doctor o	Instrument Variable Name: ssary.	you that [fill: S.C		Sample Child
Question ID: (	CHS.032_02.000 * Read if nece Has a doctor o	Instrument Variable Name: ssary. r health professional ever told	you that [fill: S.C		Sample Child
Question ID: (	CHS.032_02.000 * Read if nece Has a doctor o an intellectual	Instrument Variable Name: ssary. r health professional ever told	you that [fill: S.C		Sample Child
Question ID: ( QuestionText:	CHS.032_02.000 * Read if nece Has a doctor o an intellectual Yes	Instrument Variable Name: ssary. r health professional ever told	you that [fill: S.C		Sample Chilo
Question ID: ( QuestionText: 1 2	CHS.032_02.000 * Read if nece Has a doctor o an intellectual Yes No	Instrument Variable Name: ssary. r health professional ever told	you that [fill: S.C		Sample Child
Question ID: ( QuestionText: 1 2 7	CHS.032_02.000 * Read if nece Has a doctor o an intellectual Yes No Refused Don't know	Instrument Variable Name: ssary. r health professional ever told	you that [fill: S.C		Sample Chilo

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#### **Child Health Status & Limitations**

Question ID:	CHS.032_02.010 Instrument Variable Name:	AUTISM	QuestionnaireFileName:	Sample Child
QuestionText:	?[F1]			
	* Read if necessary.			
	Has a doctor or health professional ever to	old you that [fill: S.C	. name] had	
	Autism, Asperger's disorder, pervasive de	velopmental disorde	r, or autism spectrum disorder?	
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	<b>xt:</b> Sample children 2-17			
SkipInstruc	tions: <1,2,R,D> [go to ADD_3]			

Question ID:	CHS.032	2_03.000	Instrument Variable Name:	ADD_3	QuestionnaireFileName:	Sample Child
QuestionText:	?[F1]					
	* Rea	d if neces	sary.			
	Has a	doctor or	health professional ever told	you that [fill: S.C. name]	had	
	Anyo	other deve	lopmental delay?			
1	Yes					
2	No					
7	Refu	ised				
9	Don	't know				
UniverseTex	xt:	Sample	children 2-17			
SkipInstruct	tions:		D> if ADD_1=1 [goto ADD_1 IN] else if ADD_3=1 [goto A			SM=1 [goto

#### **Child Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID:	CHS.032_0	)4.010 Instrument Variable Na	ame: ADD_1N	QuestionnaireFileName:	Sample Child
QuestionText:	?[F1]				
	Does {S	C. name] currently have Atte	ntion Deficit Hypera	ctivity Disorder (ADHD) or Attention I	Deficit Disorder (ADD)?
1	Yes				
2	No				
7	Refuse	d			
9	Don't k	now			
UniverseTex		ample children 2-17 who have Deficit Hyperactivity Disorder		doctor or other health professional that n Deficit Disorder (ADD)	they had Attention
SkipInstruct		1,2,R,D> if ADD_2=1 [go to . .DD_3N]; else [goto CONDL]	-	UTISM=1 [goto AUTISMN] else if AD	D_3=1 [goto
Question ID:	CHS.032_0	05.010 Instrument Variable Na	ame: ADD_2N	QuestionnaireFileName:	Sample Child
QuestionText:	?[F1] D	oes [fill: S.C. name] currently	have an Intellectual	disability, also known as mental retarda	tion?
1	Yes				
2	No				
7	Refuse	d			
9	Don't k	now			
UniverseTex		ample children 2-17 who have isability, aka mental retardatio	•	doctor or other health professional that	they had an intellectual

SkipInstructions: <1,2,R,D> if AUTISM=1 [goto AUTISMN] else if ADD\_3=1 [goto ADD\_3N]; else [goto CONDL]

#### **Child Health Status & Limitations**

Question ID:	CHS.032_	06.010	Instrument Variable	Name:	AUTISMN	QuestionnaireFileN	ame:	Sample Child
QuestionText:	?[F1]							
	Does [f disorde		name] currently hav	ve Autism	n, Asperger's disor	ler, pervasive developmenta	ıl disor	der, or autism spectrum
1	Yes							
2	No							
7	Refuse	d						
9	Don't l	now						
UniverseTex						or or other health professior or autism spectrum disorder		they had Autism,
SkipInstruct	ions: <	1,2,R,D	> if ADD_3=1 [got	to ADD_3	3N]; else [goto CO	NDL]		
_						-	ame:	Sample Child
Question ID:			> if ADD_3=1 [got		3N]; else [goto CO ADD_3N	NDL] QuestionnaireFileN	ame:	Sample Child
Question ID:	CHS.032_ ?[F1]	07.010		e Name:	ADD_3N	QuestionnaireFileN	ame:	Sample Child
Question ID:	CHS.032_ ?[F1]	07.010	Instrument Variable	e Name:	ADD_3N	QuestionnaireFileN	ame:	Sample Child
Question ID: QuestionText:	CHS.032_ ?[F1] Does [f	07.010	Instrument Variable	e Name:	ADD_3N	QuestionnaireFileN	ame:	Sample Child
Question ID: QuestionText: 1	CHS.032_ ?[F1] Does [f Yes	)7.010 11: S.C.	Instrument Variable	e Name:	ADD_3N	QuestionnaireFileN	ame:	Sample Child
Question ID: QuestionText: 1 2	CHS.032_ ?[F1] Does [f Yes No	)7.010 11: S.C. d	Instrument Variable	e Name:	ADD_3N	QuestionnaireFileN	ame:	Sample Child
Question ID: QuestionText: 1 2 7	CHS.032_ ?[F1] Does [f Yes No Refuse Don't ]	)7.010 ll: S.C. d now ample c	Instrument Variable	e Name: ve any oth	ADD_3N her developmental	QuestionnaireFileN		

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	2018 NHIS Questionnaire - Sample Child							
	Child Health Status & Limitations Document Version Date: 12-Jun-19							
	Document version Date. 12-Jun-17							
Question ID: (	CHS.060_00.000 Instrument Variable Name: CONDL QuestionnaireFileName: Sample Child							
QuestionText:	(book) C2 ?[F1]							
	Looking at this list, has a doctor or health professional ever told you that [fill: SC name] had any of these conditions?							
	*Read if necessary.							
	Down syndrome Cerebral palsy							
	Muscular dystrophy							
	Cystic fibrosis Sickle cell anemia							
	Diabetes Arthritis							
	Congenital heart disease Other heart condition							
UniverseText:	Sample children <18							
SkipInstructio	ons: $\langle 1 \rangle$ [goto CONDL1] $\langle 2, R, D \rangle$ [goto CPOX]							
-								
	CHS.061_00.000 Instrument Variable Name: CONDL1 QuestionnaireFileName: Sample Child							
QuestionText:	(book) C2 ? [F1]							
	Which ones?							

\* Enter all that apply, separate with commas.

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

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

#### **Child Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID:	CHS.070_0	)0.000 Instrumen	t Variable Name:	CPOX	QuestionnaireFileName:	Sample Child
QuestionText:	Has [fil	l: SC Name] EVE	R had chickenpox?			
1	Yes					
2	No					
7	Refuse					
9	Don't k	now				
UniverseTex	xt: S	ample children <	18			
SkipInstruct		1> [go to CPOX1 2, D, R> [go to C				
Question ID:	CHS.072_0	0.000 Instrumen	t Variable Name:	CPOX12MO	QuestionnaireFileName:	Sample Child
QuestionText:	Has [fil	l: SC name] had c	hickenpox DURIN	G THE PAST 12 N	MONTHS?	
1	Yes					
2	No					
7	Refuse					
9	Don't k	now				
UniverseTex	xt: S	ample children <	18 who have had ch	ickenpox		
SkipInstruct	tions: <	:1,2,R,D> [goto C	ASHMEV]			
Question ID:	CHS.080_0	0.000 Instrumen	t Variable Name:	CASHMEV	QuestionnaireFileName:	Sample Child
QuestionText:	? [F1]					
	Has a d	octor or other hea	lth professional EV	ER told you that [	fill: SC name] had asthma?	
1	Yes					
2	No					
7	Refuse	d				
9	Don't k	now				
UniverseTex	xt: S	ample children <	18			

SkipInstructions: <1> [go to CASSTILL] <2,R,D> if AGE LE 2 [go to CCONDT1\_1]; else [go to CCONDT\_1] Page 16 of 43

## 2018 NHIS Questionnaire - Sample Child

#### **Child Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID:	CHS.085_00.000	Instrument Variable Name:	CASSTILL	QuestionnaireFileName:	Sample Child
QuestionText:	Does [fill: SC	name] still have asthma?			
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t. Sample	children <18 and doctor has i	c 1.1 . 1.111	1 4	
	Sumple		nformed that child ha	ad astnma	
SkipInstruct	-	D> [go to CASHYR]	nformed that child h	ia astrima	
SkipInstruct	-		nformed that child h	ia astrima	
	ions: <1,2,R,1	D> [go to CASHYR]		OuestionnaireFileName:	Sample Child
Question ID:	ions: <1,2,R,I CHS.090_00.000	D> [go to CASHYR] Instrument Variable Name:	CASHYR		Sample Child
Question ID:	ions: <1,2,R,I CHS.090_00.000 The following	D> [go to CASHYR] Instrument Variable Name: questions are about [fill: SC r	CASHYR name]'s asthma DUR	QuestionnaireFileName:	
Question ID:	ions: <1,2,R,I CHS.090_00.000 The following	D> [go to CASHYR] Instrument Variable Name: questions are about [fill: SC r	CASHYR name]'s asthma DUR	QuestionnaireFileName: ING THE PAST 12 MONTHS.	
Question ID: QuestionText:	ions: <1,2,R,J CHS.090_00.000 The following DURING THE	D> [go to CASHYR] Instrument Variable Name: questions are about [fill: SC r	CASHYR name]'s asthma DUR	QuestionnaireFileName: ING THE PAST 12 MONTHS.	
Question ID: QuestionText: 1	ions: <1,2,R,I CHS.090_00.000 The following DURING THE Yes	D> [go to CASHYR] Instrument Variable Name: questions are about [fill: SC r	CASHYR name]'s asthma DUR	QuestionnaireFileName: ING THE PAST 12 MONTHS.	

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

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

Question ID:	CHS.100_	_00.000	Instrument Variable Name:	CASMERYR	QuestionnaireFileName:	Sample Child
QuestionText:			PAST 12 MONTHS, did [fi r] asthma?	ill1: SC name] have to	visit an emergency room or urge	nt care center because
1	Yes					
2	No					
7	Refus	ed				
9	Don't	know				
UniverseText	t:	Sample	children <18 and doctor has	informed that child had	d asthma	
SkipInstructi		else if A	D> if CASSTILL =1 or CAS GE LE 2 [go to CCONDT1_ to CCONDT_1]	20	ISP];	

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#### **Child Health Status & Limitations**

Question ID:	CHS.100_00.010 Instrument Variable Name: CASMHSP QuestionnaireFileName: Sample Child
QuestionText:	DURING THE PAST 12 MONTHS, has [fill: S.C. name] stayed overnight in a hospital because of asthma?
	*If in hospital for asthma AND other reasons, enter '1'.
1	Yes
2	No
7 9	Refused Don't know
UniverseText	Sample child <18 who still have asthma or who had asthma episode/attack in past 12 months
SkipInstructi	<b>Dons:</b> $\langle 1,2,R,D \rangle$ [go to CWZMSWK]
Question ID:	CHS.100_00.030 Instrument Variable Name: CWZMSWK QuestionnaireFileName: Sample Child
QuestionText:	DURING THE PAST 12 MONTHS, HOW MANY DAYS of [fill1: daycare or preschool/fill2: school/fill3: school or work] did [fill: S.C. name] miss because of [fill: his/her] asthma?
	*Enter '0' for none.
	*Enter 995 if child home schooled.
	*Enter 996 if child did not go to [fill1: daycare or preschool/fill2: school/fill3: school or work].
000	None
001-365	Days missed
995	Home schooled
996	Did not got to daycare, preschool, school or work
997 000	Refused
999	Don't know
UniverseText	Sample child <18 who still have asthma or who had asthma episode/attack in past 12 months
SkipInstructi	ons: <0-100,995,996,R,D> [go to CASMPMED] <101-365> [go to ERR1_CWZMSWK] <366-994> [go to ERR2_CWZMSWK]
Hard Edit:	if CWZMSWK = 366-994 then display ERR2_CWZMSWK: "366-994 days not allowed in this field. * Please correct."
Soft Edit:	if CWZMSWK >100 and ne 996 then display ERR1_CWZMSWK: "CWZMSWK is an unusually large number; Did [fill: S.C. name] miss CWZMSWK days of [fill1/fill2/fill3] due to asthma?"

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	2018 NHIS Questionnaire - Sample Child						
Child Health Status & Limitations							
	Document Version Date: 12-Jun-19						
Question ID:	CHS.100_00.060 Instrument Variable Name: CASMPMED QuestionnaireFileName: Sample Child						
QuestionText:	<b>Text:</b> Now I'm going to ask you about two different kinds of ASTHMA medicine. One prevents symptoms over the long term. The other is for quick relief of symptoms during an attack or episode. This quick relief medicine is breathed in through your mouth using a canister inhaler or a disk inhaler.						
	DURING THE PAST 3 MONTHS, has [fill: S.C. name] used the kind of PRESCRIPTION asthma inhaler that gives QUICK relief from asthma symptoms during an attack? Include only medications prescribed by a health care professional.						
1	Yes						
2	No						
7	Refused						
9	Don't know						
UniverseTex	<b>t:</b> Sample child <18 who still have asthma or who had asthma episode/attack in past 12 months						
SkipInstruct	ions: <1> [goto CASMTYP] <2,R,D> [go to CASMDTP2]						

Question ID:	CHS.100_00.065 Instrument Variable Name:	CASMTYP	QuestionnaireFileName:	Sample Child
QuestionText:	When [fill: S.C. name] takes [fill: his/her] r often uses an inhaler and/or disk, or does [h	1 1		nat [fill: he/she] most
	*Read if necessary: Both an inhaler or a dis or two breaths. A nebulizer is a machine th minutes.			
1	Inhaler or disk			
2	Nebulizer			
7	Refused			
9	Don't know			
UniverseTex	<b>st:</b> Sample child <18 who have used a q	uick relief prescripti	on asthma inhaler in the past three	months
SkipInstruct	tions: <1> [go to CASMCAN]			

<2,R,D> [go to CASMDTP2]

#### **Child Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID:	CHS.100_00.070 Instrument Variable Name: CASMCAN QuestionnaireFileName: Sample Child
QuestionText:	DURING THE PAST 3 MONTHS, did [fill: S.C. name] use more than three canisters or disks of this type of quick relief inhaler?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	xt: Sample child <18 who have used a prescription asthma inhaler/disk most often in the past three months
SkipInstruc	tions: <1,2,R,D> [go to CASMDTP2]
Question ID:	CHS.100_00.090 Instrument Variable Name: CASMDTP2 QuestionnaireFileName: Sample Child
QuestionText:	The second kind of asthma medication is different from inhalers used for quick relief. It is the preventive kind that is used to protect your lungs and keep you from having attacks. It can be either a pill or an inhaler.
	Is [fill: S.C. name] NOW taking a preventive asthma medication every day or almost every day, less often, or never?
1	Every day or almost every day
2	Less often
3	Never
7	Refused
9	Don't know

UniverseText: Sample child <18 who still have asthma or who had asthma episode/attack in past 12 months

**SkipInstructions:** <1-3,R,D> [go to CASWMP]

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#### **Child Health Status & Limitations**

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Question ID:	CHS.100_00.100	Instrument Variable Name:	CASWMP	QuestionnaireFileName:	Sample Child
QuestionText:	change the am	ount or type of medicine, whe	n to call the doctor f	s based on [fill: S.C. name]'s asthu for advice, and when to go to the e name] an asthma action plan?	
	*Read if neces	sary: Include nurses and asthr	na educators.		
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sample	child <18 who still have asthr	na or who had asthn	na episode/attack in past 12 month	IS
SkipInstruct	ions: <1,2,R,	D> [go to CASCLASS]			
_					
Question ID:	CHS.100_00.110	Instrument Variable Name:	CASCLASS	QuestionnaireFileName:	Sample Child
QuestionText:	Has [fill: S.C.	name] ever taken a course or o	class on how to man	age [fill: his/her] asthma?	
	*Include adult	(s) who took a course for the c	child's asthma.		
1	Yes				
2	No				

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

UniverseText: Sample child <18 who still have asthma or who had asthma episode/attack in past 12 months

<1,2,R,D> [go to CAS\_REC] **SkipInstructions:** 

#### **Child Health Status & Limitations**

Question ID:	CHS.100_00.116	Instrument Variable Name:	CAS_REC	QuestionnaireFileName:	Sample Child
QuestionText:	Has a doctor of	or other health professional E	VER taught [fill: S.C.	name] or [fill: his/her] parent or	guardian
	how to reco	gnize early signs or symptom	s of an asthma episode	?	
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseText	: Sample	child <18 who still have asth	nma or who had asthm	a episode/attack in past 12 month	IS
SkipInstructi	ons: <1.2.R.	D> [go to CAS_RES]			
Question ID:	CHS.100_00.117	Instrument Variable Name:	CAS_RES	QuestionnaireFileName:	Sample Child
Question ID: QuestionText:	_	Instrument Variable Name:		<b>QuestionnaireFileName:</b> ER taught [fill: S.C. name] or [fil	-
	*Read if neces guardian	Instrument Variable Name:			-
	*Read if neces guardian	Instrument Variable Name: ssary: Has a doctor or other h			-
QuestionText:	*Read if neces guardian how to respo Yes	Instrument Variable Name: ssary: Has a doctor or other h			-
QuestionText: 1	*Read if neces guardian how to respo Yes No	Instrument Variable Name: ssary: Has a doctor or other h			-
QuestionText: 1 2	*Read if neces guardian how to respo Yes	Instrument Variable Name: ssary: Has a doctor or other h			-
QuestionText: 1 2 7	*Read if neces guardian how to respo Yes No Refused Don't know	<b>Instrument Variable Name:</b> ssary: Has a doctor or other h ond to episodes of asthma?	ealth professional EVI		l: his/her] parent or

#### **Child Health Status & Limitations**

Question ID:	CHS.100_00.118 Instrument Variable Name:	CAS_MON	QuestionnaireFileName:	Sample Child
QuestionText:	*Read if necessary: Has a doctor or other he guardian	alth professional E	VER taught [fill: S.C. name] or [fill	: his/her] parent or
	how to monitor peak flow for daily therapy	y?		
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	<b>st:</b> Sample child <18 who still have asthr	na or who had asth	ma episode/attack in past 12 months	3
SkipInstruct	tions: <1,2,R,D> [go to CAPENVLN]			

Question ID:	IS.100_00.130 Instrument Variable Name: CAPENVLN QuestionnaireFileName: Sample Child
QuestionText:	Has a doctor or other health professional EVER advised you to change things in [fill: S.C. name]'s home, school, or work environment to improve [fill: his/her] asthma?
1	Yes
2	No
3	Was told no changes needed
7	Refused
9	Don't know
UniverseTex	Sample child <18 who still have asthma or who had asthma episode/attack in past 12 months
SkipInstructi	<1-3,R,D> [go to CAROUTIN]

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	2018 NHIS Questionnaire - Sample Child				
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Question ID:	CHS.100_00.135 Instrument Variable Name: CAROUTIN QuestionnaireFileName: Sample Child				
QuestionText:	DURING THE PAST 12 MONTHS, how many times did [fill: S.C. name] see a doctor or other health professional for a routine checkup for [fill: his/her] asthma? Please do not include emergency room visits, visits to urgent care centers, or other visits for acute care for an asthma episode or attack.				
	*Enter '0' for none.				
000	None				
001-365	Times				
997	Refused				
999	Don't know				
UniverseTex	<b>xt:</b> Sample child <18 who still have asthma or who had asthma episode/attack in past 12 months				
SkipInstruc	tions: <0-50,R,D> [go to CASYMPT] <51-365> [goto ERR_CAROUTIN]				
Soft Edit:	ERR_CAROUTIN				
	[fill4: CAROUTIN] is an unusually large number. * Please verify.				
Question ID:	CHS.100_00.140 Instrument Variable Name: CASYMPT QuestionnaireFileName: Sample Child				
QuestionText:	The next three questions are about the last time [S.C. name] saw a doctor or other health care professional for routine care or for any reason.				
	At [fill: his/her] last visit, did [fill: S.C. name]'s doctor or other health professional ask HOW OFTEN				
[fill: he/she] had asthma symptoms?					
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	<b>xt:</b> Sample child <18 who still have asthma or who had asthma episode/attack in past 12 months				
SkipInstruc	<b>SkipInstructions:</b> <1,2,R,D> [go to CARESCUE]				

#### **Child Health Status & Limitations**

Question ID:	CHS.100_00.145 Instrument Varia	ble Name: CARESCUE	QuestionnaireFileName:	Sample Child
QuestionText:	*Read if necessary: At [fill: his/her] last visit, did [fi	ll: S.C. name]'s doctor or other	health professional ask HOW OFT	ΓEN
	[fill: he/she] used a quick relie	f inhaler?		
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	t: Sample child <18 who sti	ll have asthma or who had asth	ma episode/attack in past 12 month	S
SkipInstruct	ions: <1,2,R,D> [go to CAACT	TLIM]		

Question ID:	CHS.100_00.1	50 Instrument Variable	Name: CAACTLIM	QuestionnaireFileName:	Sample Child
QuestionText:	Ľ	2	1	er health professional ask HOW OFT	TEN
	astiinia s	impionis inniced [init. ii	since juany activities.		
1	Yes				
2	No				
7	Refused				
9	Don't know	7			
UniverseTex	t: Sam	ble child <18 who still h	ave asthma or who had as	thma episode/attack in past 12 month	IS
SkipInstruct	ions: <1,2	R,D> [if AGE LE 2 go	to CCONDT1_1; else go	to CCONDT_1]	

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	2018 NHIS Qu	estionnaire - Sa	mple Child		
Child Health Status & Limitations					
	Document	Version Date: 12-Jun-	19		
Question ID:	CHS.111_01.000 Instrument Variable Name:	CCONDT1_1	QuestionnaireFileName:	Sample Child	
QuestionText:	DURING THE PAST 12 MONTHS, has [fil	l: SC name] had any o	f the following conditions		
	Hay fever?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	<b>xt:</b> Sample children LE 2				
SkipInstruc	tions: $\langle 1,2,R,D \rangle$ [go to CCONDT1_2]				
Simpriserue					
Question ID:	CHS.111_02.000 Instrument Variable Name:	CCONDT1_2	QuestionnaireFileName:	Sample Child	
QuestionText:	* Read if necessary.				
	DURING THE PAST 12 MONTHS, has [fil	I: SC name] had any o	of the following conditions		
	Any kind of respiratory allergy?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	<b>xt:</b> Sample children LE 2				
SkipInstruc	tions: <1,2,R,D> [go to CCONDT1_3]				

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	2018 NHIS Questionnaire - Sample Child Child Health Status & Limitations Document Version Date: 12-Jun-19					
Question ID:	CHS.111_03.000 Instrument Variable Name:	CCONDT1_3	QuestionnaireFileName:	Sample Child		
QuestionText:	* Read if necessary.					
	DURING THE PAST 12 MONTHS, has [fi	ll: SC name] had any o	of the following conditions			
	Any kind of food or digestive allergy?					
1 2 7 9	Yes No Refused Don't know					
UniverseTex	<b>xt:</b> Sample children LE 2					
SkipInstruc	SkipInstructions: <1,2,R,D> [go to CCONDT1_4]					
Question ID:	CHS.111_04.000 Instrument Variable Name:	CCONDT1_4	QuestionnaireFileName:	Sample Child		
QuestionText:	* Read if necessary.					
	DURING THE PAST 12 MONTHS, has [fi	ll: SC name] had any o	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]

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2018 NHIS Questionnaire - Sample Child					
	Child Heal	th Status & Limita	ations		
	Document	Version Date: 12-Jun-19	9		
Question ID:	CHS.111_05.000 Instrument Variable Name:	CCONDT1_5	QuestionnaireFileName:	Sample Child	
QuestionText:	* Read if necessary.				
	DURING THE PAST 12 MONTHS, has [fil	ll: SC name] had any of	the following conditions		
	Frequent or repeated diarrhea or colitis?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sample children LE 2				
SkipInstruct	ions: <1,2,R,D> [go to CCONDT1_6]				
~ <b>F</b>					
Question ID:	CHS.111_06.000 Instrument Variable Name:	CCONDT1_6	QuestionnaireFileName:	Sample Child	
QuestionText:	* Read if necessary.				
	DURING THE PAST 12 MONTHS, has [fil	ll: SC name] had any of	the following conditions		
	Anemia?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sample children LE 2				
SkipInstruct	ions: <1,2,R,D> [go to CCONDT1_8]				

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	2018 NHIS Questionnaire - Sample Child
	Child Health Status & Limitations
	Document Version Date: 12-Jun-19
Question ID:	CHS.111_08.000 Instrument Variable Name: CCONDT1_8 QuestionnaireFileName: Sample Child
QuestionText:	* Read if necessary.
	DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions
	Three or more ear infections?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText	xt: Sample children LE 2
SkipInstructi	tions: <1,2,R,D> [go to CCONDT1_9]
1	
Question ID:	CHS.111_09.000 Instrument Variable Name: CCONDT1_9 QuestionnaireFileName: Sample Child
QuestionText:	* Read if necessary.
	DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions
	Seizures?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText	xt: Sample children LE 2
SkipInstructi	tions: <1,2,R,D> [go to CHSTATYR]
-	

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2018 NHIS Questionnaire - Sample Child Child Health Status & Limitations Document Version Date: 12-Jun-19						
Question ID:	CHS.115_01.000 Instrument Varia	ble Name:	CCONDT_1	QuestionnaireFileName:	Sample Child	
QuestionText:	DURING THE PAST 12 MONT	THS, has [fill	l: SC name] had any	v of the following conditions		
	Hay fever?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	t: Sample children = 3-17					
SkipInstruct	ions: <1,2,R,D> [go to CCONI	DT_2]				
Question ID:	CHS.115_02.000 Instrument Varia	ble Name:	CCONDT_2	QuestionnaireFileName:	Sample Child	
QuestionText:	* Read if necessary.					
	DURING THE PAST 12 MONT	THS, has [fill	l: SC name] had any	v of the following conditions		
	Any kind of respiratory allergy?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	t: Sample children = 3-17					

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

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2018 NHIS Questionnaire - Sample Child Child Health Status & Limitations Document Version Date: 12-Jun-19							
Question ID:	CHS.115_03.000 Instrument Variable Name:	CCONDT_3	QuestionnaireFileName:	Sample Child			
QuestionText:	* Read if necessary.						
	DURING THE PAST 12 MONTHS, has [fil	l: SC name] had any	of the following conditions				
	Any kind of food or digestive allergy?						
1 2 7 9	Yes No Refused Don't know						
UniverseTex	<b>xt:</b> Sample children = 3-17						
SkipInstructions: <1,2,R,D> [go to CCONDT_4]							
Question ID:	CHS.115_04.000 Instrument Variable Name:	CCONDT_4	QuestionnaireFileName:	Sample Child			
QuestionText:	* Read if necessary.						
	DURING THE PAST 12 MONTHS, has [fil	l: SC name] had any	of the following conditions				
	Eczema or any kind of skin allergy?						
1	Yes						

2 No

7 Refused

9 Don't know

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

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

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2018 NHIS Questionnaire - Sample Child Child Health Status & Limitations Document Version Date: 12-Jun-19						
Question ID:	CHS.115_05.000 Instrument Variable Name:	CCONDT_5	QuestionnaireFileName:	Sample Child		
QuestionText:	* Read if necessary.					
	DURING THE PAST 12 MONTHS, has [fill	: SC name] had any	of the following conditions			
	Frequent or repeated diarrhea or colitis?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	<b>t:</b> Sample children = 3-17					
SkipInstruct	ions: <1,2,R,D> [go to CCONDT_6]					
Question ID:	CHS.115_06.000 Instrument Variable Name:	CCONDT_6	QuestionnaireFileName:	Sample Child		
QuestionText:	* Read if necessary.					
	DURING THE PAST 12 MONTHS, has [fill	: SC name] had any	of the following conditions			
	Anemia?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	<b>t:</b> Sample children = 3-17					
SkipInstruct	ions: $\langle 1,2,R,D\rangle$ [go to CCONDT_7]					

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2018 NHIS Questionnaire - Sample Child Child Health Status & Limitations Document Version Date: 12-Jun-19						
Question ID:	CHS.115_07.000 Instrument Variable Name: CCONDT_7 QuestionnaireFileName: Sample Child					
QuestionText:	* Read if necessary.					
	DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions					
	Frequent or severe headaches, including migraines?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	<b>xt:</b> Sample children = 3-17					
SkipInstruct	etions: $\langle 1,2,R,D \rangle$ [go to CCONDT_8]					
Question ID:	CHS.115_08.000 Instrument Variable Name: CCONDT_8 QuestionnaireFileName: Sample Child					
QuestionText:	* Read if necessary.					
	DURING THE PAST 12 MONTHS, has [fill: SC name] had any of the following conditions					
	Three or more ear infections?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	<b>xt:</b> Sample children = 3-17					
SkipInstruct	<b>Example :</b> $<1,2,R,D>$ [go to CCONDT_9]					

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2018 NHIS Questionnaire - Sample Child Child Health Status & Limitations Document Version Date: 12-Jun-19						
Question ID:	CHS.115_09.000 Instrument Variable Name: CCO	NDT_9	QuestionnaireFileName:	Sample Child		
QuestionText:	* Read if necessary.					
	DURING THE PAST 12 MONTHS, has [fill: SC na	me] had any of th	e following conditions			
	Seizures?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	<b>xt:</b> Sample children = 3-17					
SkipInstruct	tions: <1,2,R,D> [go to CCONDT_10]					
Question ID:	CHS.115_10.000 Instrument Variable Name: CCO	NDT_10	QuestionnaireFileName:	Sample Child		
QuestionText:	* Read if necessary.					
	DURING THE PAST 12 MONTHS, has [fill: SC na	me] had any of th	e following conditions			
	Stuttering or stammering?					
1	Yes					
2	No					
7	Refused					
9	Don't know					
UniverseTex	<b>xt:</b> Sample children = 3-17					
SkipInstruct	tions: <1,2,R,D> [goto CHSTATYR]					

## **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 s	say [fill: SC name]'s h	ealth is now better, worse, or abo	out the same?
1	Better			
2	Worse			
3	About the same			
7	Refused			
9	Don't know			
UniverseText	: Sample children < 18			
SkipInstructi	ons: <1-3,R,D> [if AGE le <4> goto CCC	OLD2W: else goto SCI	HDAYR]	
Simprinstructi				
Question ID:	CHS.220_00.000 Instrument Variable Name:	SCHDAYR	QuestionnaireFileName:	Sample Child
JuestionText:	DURING THE PAST 12 MONTHS about h	now many days did [fil	ll2: SC name] miss school becau	se 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	Did not go to school Refused			
997 999	-			
	Refused Don't know			
999	Refused Don't know : Sample children 5-17			
999 UniverseText	Refused Don't know Sample children 5-17 ons: <0-99,996,R,D> [goto CCOLD2W] <100-240> [go to ERR1_SCHDAYF			
999 UniverseText SkipInstructi	Refused Don't know Sample children 5-17 ons: <0-99,996,R,D> [goto CCOLD2W] <100-240> [go to ERR1_SCHDAYR <241-995> [goto ERR2_SCHDAYR	]		
999 UniverseText SkipInstructi	Refused Don't know Sample children 5-17 ons: <pre>&lt;0-99,996,R,D&gt; [goto CCOLD2W] &lt;100-240&gt; [go to ERR1_SCHDAYF &lt;241-995&gt; [goto ERR2_SCHDAYR ERR2_SCHDAYR * "241-995" days not allowed in this</pre>	]		

#### **Child Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID:	CHS.23	0_00.000	Instrument Variab	le Name:	CCOLD2W		QuestionnaireFile	eName:	Sample Child
QuestionText:	Thes	e next que	estions are about [fi	ll: SC name	e]'s recent health D	URING	THE LAST 2 WI	EEKS.	
	Did	fill: SC n	ame] have a head co	old or chest	cold that started I	OURING	G THE LAST 2 W	EEKS?	
1	Yes								
2	No								
7	Ref	used							
9	Don	't know							
UniverseTex	t:	Sample	children <18						
SkipInstruct	ions:	<1,2,R,I	D> [goto CINTIL2]	W]					

QuestionnaireFileName:

Sample Child

QuestionText:	Did [fill: SC name] have a stomach or intestinal illness with vomiting or diarrhea that started DURING THE LAST 2 WEEKS?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText:	Sample children <18
SkipInstruction	s: <1,2,R,D> [goto CHEARST1]

CINTIL2W

CHS.240\_00.000 Instrument Variable Name:

Question ID:

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## **Child Health Status & Limitations**

QuestionText:				
Question 1 ext:	moderate trouble, a lot of trouble, or is [fill: S.C. nar	- 0	ut a hearing aid: Excellent, good, a	a little trouble hearing,
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			
SkipInstruction	s: <1-6,R,D> [go to CVISION]			

Question ID:	CHS.260_00.000	Instrument Variable Name:	CVISION	QuestionnaireFileName:	Sample Child
QuestionText:	Does [fill1: SO	C name] have any trouble seeir	ng [fill2: , even when wea	ring glasses or contact lenses	?
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sample	children <18			
SkipInstruct	10	oto CBLIND] D> [goto IHSPEQ]			

## **Child Health Status & Limitations**

Document Version Date: 12-Jun-19

Question ID:	CHS.270_00	.000 Instrument Variable Name:	CBLIND	QuestionnaireFileName:	Sample Child
QuestionText:	Is [fill: So	C name] blind or unable to see at a	all?		
1	Yes				
2	No				
7	Refused				
9	Don't kn	ow			
UniverseTex	xt: Sa	mple children <18 having trouble	seeing		
SkipInstruc	<b>tions:</b> <1	,2,R,D> [goto IHSPEQ]			
Question ID:	CHS.290_00	.000 Instrument Variable Name:	IHSPEQ	QuestionnaireFileName:	Sample Child
QuestionText:		1: SC name] have any impairment e, a wheelchair, or a hearing aid (e:		m that requires [fill2: him/her] to use y eyeglasses or corrective shoes)?	special equipment, such
1	Yes				

-	103
2	No
-	

- 7 Refused9 Don't know
- UniverseText: Sample children <18

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

Question ID:	CHS.300_00.00	() Instrument Variable Name:	ІНМОВ	QuestionnaireFileName:	Sample Child
QuestionText:	Does [fill1: S	C name] have an impairment or	health problem that limits	s [fill2: his/her] ability to (cr	awl), walk, run, or play?
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	t: Sampl	e children <18			
SkipInstruct		goto IHMOBYR] D> [goto PROBRX]			

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# 2018 NHIS Questionnaire - Sample Child

## **Child Health Status & Limitations**

	CHS.310_00.0	000 Instrument Variable Nam	e: IHMOBYR	QuestionnaireFileName:	Sample Child
QuestionText:	Is this an ir	mpairment or health problem	that has lasted, or is exp	ected to last, 12 months or longer?	,
1	Yes				
2	No				
7	Refused				
9	Don't know	W			
UniverseTex	xt: Sam	ple children <18 that have lin	nited ability to crawl, wa	alk, run, or play	
SkipInstruct	tions: <1,2	2,R,D> [goto PROBRX]			
Question ID:	CHS.311_00.0	000 Instrument Variable Nam	e: PROBRX	QuestionnaireFileName:	Sample Child
-	CHS.311_00.0 ?[F1]	000 Instrument Variable Nam	e: PROBRX	QuestionnaireFileName:	Sample Child
-	?[F1]	: SC name] NOW have a prob		QuestionnaireFileName: /she] has regularly taken prescripti	·
-	?[F1] Does [fill1:	: SC name] NOW have a prob			·
QuestionText:	?[F1] Does [fill1: least three p	: SC name] NOW have a prob			·
QuestionText:	?[F1] Does [fill1: least three p Yes	: SC name] NOW have a prob			·
QuestionText: 1 2	?[F1] Does [fill1] least three r Yes No	: SC name] NOW have a prob months?			·
2 7	?[F1] Does [fill1] least three r Yes No Refused Don't know	: SC name] NOW have a prob months?			·

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## **Child Health Status & Limitations**

	CHS.312_00.000 Instrument Variable Name: LEARND QuestionnaireFileName: Sample Child
QuestionText:	?[F1]
	Has a representative from a school or a health professional ever told you that [fill: SC name] had a learning disability?
1	Yes
2	No
7	Refused
9	Don't know
UniverseText	: Sample children 3-17
SkipInstructio	ons: <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
QuestionTort	
QuestionText:	(book) C3 ?[F1]
QuestionText:	
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
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.
QuestionText: 0	(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:
	<ul> <li>(book) C3 ?[F1]</li> <li>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.</li> <li>He:</li> <li>Has been uncooperative?</li> </ul>
0	<ul> <li>(book) C3 ?[F1]</li> <li>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.</li> <li>He:</li> <li>Has been uncooperative?</li> <li>Not true</li> </ul>
0 1	<ul> <li>(book) C3 ?[F1]</li> <li>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.</li> <li>He:</li> <li>Has been uncooperative?</li> <li>Not true</li> <li>Sometimes true</li> </ul>
0 1 2	<ul> <li>(book) C3 ?[F1]</li> <li>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.</li> <li>He:</li> <li>Has been uncooperative?</li> <li>Not true</li> <li>Sometimes true</li> <li>Often true</li> </ul>
0 1 2 7	<ul> <li>(book) C3 ?[F1]</li> <li>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.</li> <li>He:</li> <li>Has been uncooperative?</li> <li>Not true</li> <li>Sometimes true</li> <li>Often true</li> <li>Refused</li> <li>Don't know</li> </ul>

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	2018 NHIS Questionnaire - Sample Child					
	Child Health Status & Limitations					
	Document Version Date: 12-Jun-19					
Question ID:	CHS.321_02.000 Instrument Variable Name: CMHAGM11_2 QuestionnaireFileName: Sample Child					
QuestionText:	(book) C3 ?[F1]					
	* Read if necessary.					
	I am going to read a list of items that describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: SC name] DURING THE PAST TWO MONTHS.					
	He:					
	Has trouble getting to sleep?					
0	Not true					
1	Sometimes true					
2	Often true					
7	Refused					
9	Don't know					
UniverseTex	<b>xt:</b> Male sample children 2-3					
SkipInstruc	tions: <0-2,R,D> [go to CMHAGM11_3]					

Question ID:	CHS.321_03.000 Instrument Variable Name:	CMHAGM11_3	QuestionnaireFileName:	Sample Child
QuestionText:	(book) C3 ?[F1]			
	* Read if necessary.			
	I am going to read a list of items that descri TRUE, or OFTEN TRUE, of [fill: SC name		•	TRUE, SOMETIMES
	He:			
	Has speech problems?			
0	Not true			
1	Sometimes true			
2	Often true			
7	Refused			
9	Don't know			
UniverseTe	<b>xt:</b> Male sample children 2-3			
SkipInstruc	<b>tions:</b> <0-2,R,D> [go to CMHAGM11_4]			

## **Child Health Status & Limitations**

Question ID:	CHS.321_04.000 Instrument Variable Name:	CMHAGM11_4	QuestionnaireFileName:	Sample Child
QuestionText:	(book) C3 ?[F1]			
	* Read if necessary.			
	I am going to read a list of items that describ TRUE, or OFTEN TRUE, of [fill: SC name]			IRUE, SOMETIMES
	He:			
	Has been unhappy, sad, or depressed?			
0	Not true			
1	Sometimes true			
2	Often true			
7	Refused			
9	Don't know			
UniverseTex	t: Male sample children 2-3			
Question ID:	CHS.361_01.000 Instrument Variable Name:	CMHAGF11_1	QuestionnaireFileName:	Sample Child
QuestionText:	(book) C3 ?[F1]	_		
	I am going to read a list of items that describ TRUE, or OFTEN TRUE, of [fill: S.C. name			TRUE, SOMETIMES
	She:			
	Has temper tantrums or a hot temper?			
0	Not true			
1	Sometimes true			
2	Often true			
7	Refused			
9	Don't know			
UniverseTex	<b>t:</b> Female sample children 2-3			
SkipInstruct	ions: <0-2,R,D> [go to CMHAGF11_2]			

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	2018 NHIS Questionnaire - Sample Child						
	Child Health Status & Limitations						
	Document Version Date: 12-Jun-19						
Question ID:	CHS.361_02.000 Instrument Variable Name: CMHAGF11_2 QuestionnaireFileName: Sample Child						
QuestionText:	(book) C3 ?[F1]						
	* Read if necessary.						
	I am going to read a list of items that describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: S.C. name] DURING THE PAST TWO MONTHS.						
	She:						
	Has speech problems?						
0	Not true						
1	Sometimes true						
2	Often true						
7	Refused						
9	Don't know						
UniverseTex	t: Female sample children 2-3						
SkipInstruc	ions: <0-2,R,D> [go to CMHAGF11_3]						

Question ID:	CHS.361_03.000 Instrument Variable Name: CMHA	HAGF11_3 QuestionnaireFileName: Sample Child	
QuestionText:	: (book) C3 ?[F1]		
	* Read if necessary.		
	I am going to read a list of items that describe children TRUE, or OFTEN TRUE, of [fill: S.C. name] DURIN	en. For each one, tell me if it has been NOT TRUE, SOMETIMES ING 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		
UniverseTex	<b>Ext:</b> Female sample children 2-3		
SkipInstruct	<b>ctions:</b> <0-2,R,D> [go to CMHAGF11_4]		

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## **Child Health Status & Limitations**

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 TRUE, or OFTEN TRUE, of [fill: S.C. name]			TRUE, SOMETIMES
	She:			
	Has been unhappy, sad, or depressed?			
0	Not true			
1	Sometimes true			
2	Often true			
7	Refused			
9	Don't know			
UniverseTex	<b>ct:</b> Female sample children 2-3			
SkipInstruct	tions: <0-2,R,D> [go to CAU.CUSUALPL]			

## Child Access to Health Care & Utilization

Document Version Date: 12-Jun-19

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 about [fill3: his/her] health?	( goes when [fill2: h	e/she] is sick or you need advice	
1	Yes			
2	There is NO place			
3	There is MORE THAN ONE place			
7	Refused			
9	Don't know			
UniverseTex	t: Sample children <18			
SkipInstruct	ions: <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 p emergency room, or some other place?	place does [fill2: alias	] go to most often] - a clinic, d	octor's office,
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 wh	en sick or need health advice	
SkipInstructi	ons: <1-5> [go to CHCPLROU]			

<6,R,D> [go to CHCPLKND]

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# 2018 NHIS Questionnaire - Sample Child

## Child Access to Health Care & Utilization

	CAU.035_00.000 Instrument Variable Name: CHCPLROU QuestionnaireFileName: Sample Child
QuestionText:	Is that [fill1: CPLKIND/CAU.030] the same place [fill2: alias] USUALLY goes when [fill3: he/she] needs routine or preventive care, such as a physical examination or (well baby/child) check-up?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	<b>:</b> 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
SkipInstruct	ions: <1> [go to CHCCHGYR] <2,R,D> [go to CHCPLKND]
Question ID:	CAU.037_00.000 Instrument Variable Name: CHCPLKND QuestionnaireFileName: Sample Child
QuestionText:	What kind of place does [fill1: alias] USUALLY go to when [fill2: he/she] needs routine or preventive care, such as a physical examination or (well baby/child) check-up?
0	
	Doesn't get preventive care anywhere
1	Doesn't get preventive care anywhere Clinic or health center
1 2	
	Clinic or health center Doctor's office or HMO
2	Clinic or health center
2 3	Clinic or health center Doctor's office or HMO Hospital emergency room
2 3 4	Clinic or health center Doctor's office or HMO Hospital emergency room Hospital outpatient department
2 3 4 5	Clinic or health center Doctor's office or HMO Hospital emergency room Hospital outpatient department Some other place
2 3 4 5 6	Clinic or health center Doctor's office or HMO Hospital emergency room Hospital outpatient department Some other place Doesn't go to one place most often
2 3 4 5 6 7	Clinic or health center Doctor's office or HMO Hospital emergency room Hospital outpatient department Some other place Doesn't go to one place most often Refused Don't know

## Child Access to Health Care & Utilization

Question ID:	CAU.040	00.000	Instrument Variable Name:	CHCCHGYR	QuestionnaireFileName:	Sample Child
QuestionText:	At any care?	y time IN	THE PAST 12 MONTHS di	d you CHANGE the	place(s) to which [fill: alias] USU	ALLY goes for health
1	Yes					
2	No					
7	Refu	sed				
9	Don'	t know				
UniverseTex	xt:	-	children <18 with one or mor f routine/preventive care]	re place to go when si	ck/need advice [or who reported s	ame place as usual
SkipInstructions: <1> [go to CHCCHGHI] <2,R,D> to CHCDLYR1_1]						
Question ID:	CAU.050	)_00.000	Instrument Variable Name:	CHCCHGHI	QuestionnaireFileName:	Sample Child
QuestionText:	Was t	his chang	e for a reason related to heal	th insurance?		
1	Yes					
2	No					
7	Refu	sed				
9	Don'	t know				
UniverseTex	xt:	Sample	children <18 that have chang	ed their usual place o	f health care in the past 12 months	5
SkipInstruct	tions:	<1.2.R.I	> [goto CHCDLYR1_1]			

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## Child Access to Health Care & Utilization

Document Version Date: 12-Jun-19

uestion ID:	CAU.080_01.000 Instrument Variable Name:	CHCDLYR1_1	QuestionnaireFileName:	Sample Child
QuestionText:				
	There are many reasons people delay gettin following reasons IN THE PAST 12 MON		ou delayed getting care for [fill:	alias] for any of the
	You couldn't get through on the telephone.			
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTe	<b>xt:</b> Sample children <18			
SkipInstruc	ctions: <1,2,R,D> [goto CHCDLYR1_2]			
•				
uestion ID:	CAU.080_02.000 Instrument Variable Name:	CHCDLYR1_2	QuestionnaireFileName:	Sample Child
QuestionText:	* Read if necessary.			
				alias] for any of the

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]

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	2018 NHIS Questionnaire - Sample Child		
	Child Access to Health Care & Utilization		
Document Version Date: 12-Jun-19			
Question ID: (	CAU.080_03.000 Instrument Variable Name: CHCDLYR1_3 QuestionnaireFileName: Sample Child		
JuestionText:	* Read if necessary.		
	There are many reasons people delay getting medical care. Have you delayed getting care for [fill: alias] for any of the following reasons IN THE PAST 12 MONTHS		
	Once you get there, [fill: alias] has to wait too long to see the doctor.		
1	Yes		
2	No		
7	Refused		
9	Don't know		
UniverseText:	Sample children <18		
SkipInstructio	ons: <1,2,R,D> [goto CHCDLYR1_4]		
1			
uestion ID: (	CAU.080_04.000 Instrument Variable Name: CHCDLYR1_4 QuestionnaireFileName: Sample Child		
	* Dead ::		
JuestionText:	* Read if necessary.		
QuestionText:	* Read 11 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		
uestionText:	There are many reasons people delay getting medical care. Have you delayed getting care for [fill: alias] for any of the		
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		

- No
- 7 Refused
- 9 Don't know
- Sample children <18 UniverseText:

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

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2018 NHIS Questionnaire - Sample Child Child Access to Health Care & Utilization					
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				
UniverseTex	xt:   Sample children <18				
SkipInstruc	ctions: <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
UniverseTex	t: Sample children <2
SkipInstruct	ions: <1,2,R,D> [if AGE <1 goto CHCSYR1_2; else goto CDENLONG]

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2018 NHIS Questionnaire - Sample Child Child Access to Health Care & Utilization					
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				
UniverseTe	ext: 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
UniverseTex	t: Sample children GE 2
SkipInstruct	ions: <1,2,R,D> [goto CHCAFYR1_3]

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	2018 NHIS Q	uestionnaire - Sa	mple Child		
Child Access to Health Care & Utilization					
Document Version Date: 12-Jun-19					
Question ID:	CAU.135_03.000 Instrument Variable Name:	CHCAFYR1_3	QuestionnaireFileName:	Sample Child	
QuestionText:	* Read if necessary.				
	DURING THE PAST 12 MONTHS, was th because you couldn't afford it	ere any time when [fill:	alias] NEEDED any of the fol	lowing, but didn't get it	
	Dental care (including check-ups)?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	<b>xt:</b> Sample children GE 2				
SkipInstruc	tions: <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 th because you couldn't afford it	ere any time when [fill:	alias] NEEDED any of the fol	lowing, but didn't get it	
	Eyeglasses?				

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know
- **UniverseText:** Sample children GE 2

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

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#### **Child Access to Health Care & Utilization**

Document Version Date: 12-Jun-19

Question ID:	CAU.160_00.000 Instrument Variable Name: CDENLONG Question	nnaireFileName: Sample Child
QuestionText:	: (book) C4	
	About how long has it been since [fill: alias] last saw a dentist? Include all types surgeons, and all other dental specialists, as well as dental hygienists.	of dentists, such as orthodontists, oral
0	Never	
1	6 months or less	
2	More than 6 months, but not more than 1 year ago	
3	More than 1 year, but not more than 2 years ago	
4	More than 2 years, but not more than 5 years ago	
5	More than 5 years ago	
7	Refused	
9	Don't know	
UniverseText	ext: Sample children GE 1	
SkipInstructi	ctions: <0-5,R,D> [if AGE GE <2> goto CHCSYR_1; else go to CHCSYR1_2]	
Question ID:	CAU.170_01.000 Instrument Variable Name: CHCSYR1_2 Question	nnaireFileName: Sample Child

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

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

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know
- **UniverseText:** Sample children <2

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

## Child Access to Health Care & Utilization

Juestion ID:	CAU.170_02.000 Instrument Variable Name	e: CHCSYR1_3	QuestionnaireFileName:	Sample Child
QuestionText:	?[F1]			
	* Read if necessary.			
	DURING THE PAST 12 MONTHS, has about [fill2: alias]'s health?	anyone in the family seen	or talked to any of the following	g health care providers
	A foot doctor?			
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseText	t: Sample children <2			
SkipInstructi	ions: <1,2,R,D> [goto CHCSYR1_5]			
	ions: <1,2,R,D> [goto CHCSYR1_5] CAU.170_03.000 Instrument Variable Name	e: CHCSYR1_5	QuestionnaireFileName:	Sample Child
SkipInstructi Question ID: QuestionText:		e: CHCSYR1_5	QuestionnaireFileName:	Sample Child
Question ID:	CAU.170_03.000 Instrument Variable Name	e: CHCSYR1_5	QuestionnaireFileName:	Sample Child
Question ID:	CAU.170_03.000 Instrument Variable Name ?[F1]			
Question ID:	CAU.170_03.000 <b>Instrument Variable Name</b> ?[F1] * Read if necessary. DURING THE PAST 12 MONTHS, has	anyone in the family seen	or talked to any of the followir	g health care providers
Question ID:	CAU.170_03.000 <b>Instrument Variable Name</b> ?[F1] * Read if necessary. DURING THE PAST 12 MONTHS, has about [fill2: alias]'s health?	anyone in the family seen	or talked to any of the followir	g health care providers
Question ID: QuestionText:	CAU.170_03.000 <b>Instrument Variable Name</b> ?[F1] * Read if necessary. DURING THE PAST 12 MONTHS, has about [fill2: alias]'s health? A physical therapist, speech therapist, res	anyone in the family seen	or talked to any of the followir	g health care providers
Question ID: QuestionText:	CAU.170_03.000 <b>Instrument Variable Name</b> ?[F1] * Read if necessary. DURING THE PAST 12 MONTHS, has about [fill2: alias]'s health? A physical therapist, speech therapist, res Yes	anyone in the family seen	or talked to any of the followir	g health care providers
Question ID: QuestionText: 1 2	CAU.170_03.000 <b>Instrument Variable Name</b> ?[F1] * Read if necessary. DURING THE PAST 12 MONTHS, has about [fill2: alias]'s health? A physical therapist, speech therapist, res Yes No	anyone in the family seen	or talked to any of the followir	g health care providers
Question ID: QuestionText: 1 2 7	CAU.170_03.000 Instrument Variable Name ?[F1] * Read if necessary. DURING THE PAST 12 MONTHS, has about [fill2: alias]'s health? A physical therapist, speech therapist, res Yes No Refused Don't know	anyone in the family seen	or talked to any of the followir	g health care providers

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				Question ID:	CAU.170_04.00
QuestionText:	about [fill2: a	•	-	n or talked to any of the followir	ng health care providers
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	UniverseText: Sample children <2				
SkipInstruct	tions: <1,2,R	,D>[goto CHCSYR8_1]			

Question ID:	AU.175_01.000 Instrument Variable Name: CHCSYR_1 QuestionnaireFileName: Sample Child
QuestionText:	DURING THE PAST 12 MONTHS, have you seen or talked to any of the following health care providers about [fill2: alias]'s health?
	A mental health professional such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker?
1	Yes
2	No
7	Refused
9	Don't know
UniverseTex	Sample children GE 2
SkipInstruct	as: <1,2,R,D> [goto CHCSYR_2]

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Child Access to Health Care & Utilization Document Version Date: 12-Jun-19					
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				
Question ID:	CAU.175_03.000 Instrument Variable Name: CHCSYR_3 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?				
	A foot doctor?				
1	Yes				
2	No				
7	Refused				
9	Don't know				
UniverseTex	<b>xt:</b> Sample children GE 2				
SkipInstruct	ctions: <1,2,R,D>[goto CHCSYR_4]				

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2018 NHIS Questionnaire - Sample Child Child Access to Health Care & Utilization Document Version Date: 12-Jun-19				
Question ID:	D: CAU.175_04.000 Instrument Variable Name: CHCSYR_4	QuestionnaireFileName: Sample Child		
QuestionText:	ext: ?[F1]			
	Read if necessary.			
	DURING THE PAST 12 MONTHS, have you seen or talked to a alias]'s health?	any of the following health care providers about [fill2:		
	A chiropractor?			
1 2 7 9	Yes No Refused Don't know			
UniverseTe	eText: Sample children GE 2			
SkipInstruc	<b>ructions:</b> <1,2,R,D> [goto CHCSYR_5]			
Question ID:	D: CAU.175_05.000 Instrument Variable Name: CHCSYR_5	QuestionnaireFileName: Sample Child		
QuestionText:	ext: ?[F1]			
	* Read if necessary.			
	DURING THE PAST 12 MONTHS, have you seen or talked to a alias]'s health?	any of the following health care providers about [fill2:		

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]

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		Child Access to	o Health Care &	& Utilization	
		Document V	Version Date: 12-Ju	n-19	
Question ID:	CAU.17	5_06.000 Instrument Variable Name:	CHCSYR_6	QuestionnaireFileName:	Sample Child
QuestionText:	?[F1]				
	* Rea	d if necessary.			
		ING THE PAST 12 MONTHS, have yo 's health?	ou seen or talked to a	any of the following health care p	oviders about [fill2:
	A nui	rse practitioner, physician assistant or n	nidwife?		
1	Yes				
2	No				
7	Refu	sed			
9	Don	t know			
UniverseTex	xt:	Sample children GE 2			
SkipInstruc	SkipInstructions: <1,2,R,D> [if SEX eq <2> and AGE GE 15 goto CHCSYR7; else goto CHCSYR8_1]				

Question ID:	CAU.230_00.000 Instrument Variable Names	CHCSYR7	QuestionnaireFileName:	Sample Child
QuestionText:	?[F1]			
	DURING THE PAST 12 MONTHS, have obstetrician/gynecologist) about [fill2: ali	•	a doctor who specializes in women	's health (an
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	t: Sample children GE 15 who are fer	nale		
SkipInstruct	tions: <1,2,R,D> [goto CHCSYR8_1]			

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	2018 NHIS Questionnaire - Sample Child				
	Child Access to Health Care & Utilization				
	Document Version Date: 12-Jun-19				
Question ID:	D: 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				
~					
SkipInstructio	ons: <1,2,R,D> [goto CHCSYR8_2]				
-					
Question ID:					
	CAU.240_02.000 Instrument Variable Name: CHCSYR8_2 QuestionnaireFileName: Sample Child				
Question ID:	CAU.240_02.000 Instrument Variable Name: CHCSYR8_2 QuestionnaireFileName: Sample Child * Read if necessary.				
Question ID:	CAU.240_02.000 <b>Instrument Variable Name:</b> CHCSYR8_2 <b>QuestionnaireFileName:</b> Sample Child * 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				
Question ID: QuestionText:	CAU.240_02.000 Instrument Variable Name: CHCSYR8_2 QuestionnaireFileName: Sample Child * 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)?				
Question ID: QuestionText:	CAU.240_02.000 Instrument Variable Name: CHCSYR8_2 QuestionnaireFileName: Sample Child * 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)? Yes				
Question ID: QuestionText:	CAU.240_02.000 Instrument Variable Name: CHCSYR8_2 QuestionnaireFileName: Sample Child * 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)? Yes No				
Question ID: QuestionText:	CAU.240_02.000 Instrument Variable Name: CHCSYR8_2 QuestionnaireFileName: Sample Child * 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)? Yes No Refused Don't know				

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## 2018 NHIS Questionnaire - Sample Child

## Child Access to Health Care & Utilization

Document Version Date: 12-Jun-19

	Document ver	rsion Date: 12-Jun	-19	
Question ID:	CAU.260_00.000 Instrument Variable Name:	CHCSYR10	QuestionnaireFileName:	Sample Child
QuestionText:	Does that doctor treat children and adults (a do	octor in general pra	ctice or family medicine)?	
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	<b>xt:</b> Sample children <18 who have seen or	talked to a general	doctor during the past 12 months	3
SkipInstruct	tions: <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 becau	use of an emotional	or behavioral problem that [fill]	: alias] may have?
1	Yes			
2	No			
7	Refused			
9	Don't know			
UniverseTex	<b>xt:</b> Sample children <18 who have seen a ge	eneral doctor in the	e past 12 months	
SkipInstruct	tions: <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: he/she] was not sick or injured?	alias] receive a we	ell-child check-up, that is a gener	al check-up, when [fill2
1	Yes			
-				
2	No			
	No Refused			

**UniverseText:** Sample children <18

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

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	2018 NHIS Questionnaire - Sample Child		
	Child Access to Health Care & Utilization		
Document Version Date: 12-Jun-19			
Question ID:	CAU.280_00.000 Instrument Variable Name: CHERNOYR QuestionnaireFileName: Sample Child		
QuestionText:	(book) C5		
	DURING THE PAST 12 MONTHS, HOW MANY TIMES has [fill1: alias] gone to a HOSPITAL EMERGENCY ROOM about [fill2: his/her] health? (This includes emergency room visits that resulted in a hospital admission.)		
00	None		
01	1		
02	2-3		
03	4-5		
04	6-7		
05	8-9		
06	10-12		
07	13-15		
08	16 or more		
97	Refused		
99	Don't know		
UniverseTex	t: Sample children <18		
SkipInstruc	tions: <0-8,R,D> [goto CHCHYR]		

Question ID:	CAU.29	0_00.000 1	Instrument Variable	Name:	CHCHYR		QuestionnaireFileName:	Sample Child
QuestionText:		ING THE I ssional?	PAST 12 MONTHS	, did [fill1	: alias] receive ca	e AT I	HOME from a nurse or oth	her health care
1	Yes							
2	No							
7	Refu	ised						
9	Don	't know						
UniverseTex	xt:	Sample cl	hildren <18					
SkipInstruct	tions:		OCHCHMOYR] [goto CHCNOYR]					

## Child Access to Health Care & Utilization

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	
UniverseTex	: Sample children <18 that have received home care from health professional during the past 12 months	
SkipInstruct	ons: <01-12,R,D> [goto CHCHNOYR]	

Question ID:	CAU.310_00.000 Instrument Variable Name:	CHCHNOYR	QuestionnaireFileName:	Sample Child
QuestionText:	(book) C6 ?[F1]			
	What was the total number of home visits rea	ceived for [fill1: alias] d	luring [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			
UniverseTex	<b>Sample children</b> <18 that have received	ed home care from healt	h professional during the past	12 months
SkipInstruct	tions: <1-8,R,D> [goto CHCNOYR]			

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	2018 NHIS Questionnaire - Sample Child			
	Child Access to Health Care & Utilization			
	Document Version Date: 12-Jun-19			
Question ID:	CAU.320_00.000 Instrument Variable Name: CHCNOYR QuestionnaireFileName: Sample Child			
QuestionText:	(book) C5 ?[F1]			
	DURING THE PAST 12 MONTHS, HOW MANY TIMES has [fill1: alias] seen a doctor or other health care professional about [fill2: his/her] health at A DOCTOR'S OFFICE, A CLINIC, OR SOME OTHER PLACE? Do not include times [fill1: alias] was hospitalized overnight, visits to hospital emergency rooms, home visits, dental visits or telephone calls.			
00	None			
01	1			
02	2-3			
03	4-5			
04	6-7			
05	8-9			
06	10-12			
07	13-15			
08	16 or more			
97	Refused			
99	Don't know			
UniverseTex	t: Sample children <18			
SkipInstruct	ions: <0-8,R,D> [goto CSRGYR]			

Question ID:	CAU.330_00.000 Instrument Variable Name:	CSRGYR	QuestionnaireFileName:	Sample Child
QuestionText:	DURING THE PAST 12 MONTHS has [fil outpatient?	11: alias] had SU	RGERY or other surgical procedures	either as an inpatient or
	* 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			
UniverseTex	xt: Sample children <18			
SkipInstruc	tions: <1> [goto CSRGNOYR] <2,R,D> [goto CMDLONG]			

## Child Access to Health Care & Utilization

Question ID: C	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
SkipInstruction	ns: <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.
Question ID: C	CAU.345_00.000 Instrument Variable Name: CMDLONG QuestionnaireFileName: Sample Child
QuestionText:	(book) C4
	About how long has it been since anyone in the family last saw or talked to a doctor or other health care professional about [fill1: alias]'s health? Include doctors seen while [fill2: he/she] was a patient in a hospital.
0	Never
1	6 months or less
2	More than 6 months, but not more than 1 year ago
3	More than 1 year, but not more than 2 years ago
4	More than 2 years, but not more than 5 years ago
5	More than 5 years ago
7	Refused
9	Don't know
UniverseText:	Sample children <18
SkipInstructio	ns: <0-5,R,D> If AGE LT 4 [goto CH1N1_1]

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	2018 NHIS Questionnaire - Sample Child			
Child Mental Health Brief Questionnaire				
	Document Version Date: 12-Jun-19			
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			
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			
<b>a</b>				

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

# **Child Mental Health Brief Questionnaire**

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 N SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MON [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 N SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MON         [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	
SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MON         [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	
<ul> <li>has many worries, or often seems worried.</li> <li>Not true</li> <li>Somewhat true</li> <li>Certainly true</li> <li>Refused</li> <li>Don't know</li> </ul> UniverseText: Sample children GE 4	
0Not true1Somewhat true2Certainly true7Refused9Don't knowSample children GE 4	
1Somewhat true2Certainly true7Refused9Don't knowSample children GE 4	
2Certainly true7Refused9Don't knowSample children GE 4	
7Refused9Don't knowUniverseText:Sample children GE 4	
7Refused9Don't knowUniverseText:Sample children GE 4	
UniverseText: Sample children GE 4	
·	
uestion ID: CMB.020_03.000 Instrument Variable Name: CMHMF_3 QuestionnaireFileName:	Sample Chil
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 N SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MON	
[fill2: He/She]	
is often unhappy, depressed or tearful.	
0 Not true	
<ul><li>Not true</li><li>Somewhat true</li></ul>	
1 Somewhat true	
1Somewhat true2Certainly true	

# **Child Mental Health Brief Questionnaire**

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 SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MONTH [fill2: He/She]        gets along better with adults than with other [fill3: children/youth].      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]
I am going to read a list of items that describe children. For each item, please tell me if it has been NOT SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MONTH         [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
SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MONTH [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
<ul> <li>gets along better with adults than with other [fill3: children/youth].</li> <li>Not true</li> <li>Somewhat true</li> <li>Certainly true</li> <li>Refused</li> <li>Don't know</li> </ul> UniverseText: Sample children GE 4
0Not true1Somewhat true2Certainly true7Refused9Don't knowUniverseText:Sample children GE 4
1Somewhat true2Certainly true7Refused9Don't knowSample children GE 4
2Certainly true7Refused9Don't knowSample children GE 4
7Refused9Don't knowUniverseText:Sample children GE 4
9     Don't know       UniverseText:     Sample children GE 4
UniverseText: Sample children GE 4
Question ID: CMB.020_05.000 Instrument Variable Name: CMHMF_5 QuestionnaireFileName: Sar
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 SOMEWHAT TRUE, or CERTAINLY TRUE for [fill1: SC name] DURING THE PAST SIX MONTH
[fill2: He/She]
has good attention span, sees chores or homework through to the end.
0 Not true
<ul><li>0 Not true</li><li>1 Somewhat true</li></ul>
1 Somewhat true
1Somewhat true2Certainly true

## **Child Mental Health Brief Questionnaire**

Question ID:	CMB.030_00.000 Instrument Variable Name:	CMHDIFF	QuestionnaireFileName:	Sample Child				
QuestionText:	(book) C8							
	Overall, do you think that [fill1: SC name] h behavior, or being able to get along with other		ny of the following areas: emotions,	concentration,				
1	No							
2	Yes, minor difficulties	Yes, minor difficulties						
3	Yes, definite difficulties	Yes, definite difficulties						
4	Yes, severe difficulties							
7	Refused	Refused						
9	Don't know							
UniverseTex	t: Sample children GE 4							
SkipInstruct	ions: <1-4,R,D> [goto next section]							

2018 NHIS Questionnaire - Sample Child Child Influenza Immunization Document Version Date: 12-Jun-19							
Question ID:	CFI.005_	_00.010	Instrument Variable Name:	CH1N1_1	QuestionnaireFileName:	Sample Child	
QuestionText:	?[F1]						
			E PAST 12 MONTHS, has {S gainst influenza for the flu sea		vaccination? A flu vaccination is u	sually given in the fall	
1	Yes						
2	No						
7	Refu	sed					
9	Don'	t know					
UniverseTex	UniverseText: Sample Child LE 17 years						
SkipInstructions:		-0	to CH1N1_2] > [goto next section]				

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Question ID: C	FI.005_00.020 Instrument Variable Name: CH	1N1_2	QuestionnaireFileName:	Sample Child			
QuestionText:	How many vaccinations has {S.C. name} received	?					
1	1 vaccination or dose						
2	2 or more vaccination doses						
7	Refused						
9	Don't know						
UniverseText: Sample Child LE 17 years who have had an vaccine dose							
SkipInstructio	ns: <1,2> [goto CH1N1_3M] <r,d> [goto next section]</r,d>						

			Page 2 of 4					
		2018 NHIS Qu	iestionnaire - S	Sample Child				
		Child In	fluenza Immuni	zation				
	Document Version Date: 12-Jun-19							
Onection ID: OF 005 00 020 Instrument Variable Name: OUINI 2M Onection airs File Name: Could all								
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							
UniverseTex	xt: Sample	Child LE 17 who have had or	ne or more vaccine d	oses				
SkipInstruc	tions: <1-12,1	D> [ goto CH1N1_4Y] <r> [g</r>	oto CH1N1_5]					
Question ID:	CFI.005_00.040	Instrument Variable Name:	CH1N1_4Y	QuestionnaireFileName:	Sample Child			
QuestionText:	2 of 2							
	*Enter year of	f most recent flu vaccine.						
Year	Year							

	*Enter year of most recent flu vaccine.
Year 9997 9999	Year Refused 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
SkipInstruction	<ul> <li><valid year,r,d=""> [goto CH1N1_5]</valid></li> <li>[If CH1N1_3M and CH1N1_4Y = a future date] goto ERR1_CH1N1_4Y]</li> <li>[If CH1N1_3M and CH1N1_4Y = a date prior to birth] goto ERR2_CH1N1_4Y]</li> <li>[If CH1N1_3M and CH1N1_4Y = a date prior to 12 months ago] goto ERR3_CH1N1_4Y]</li> </ul>
Hard Edit:	ERR1_ CH1N1_4Y *Future date invalid. ERR2_ CH1N1_4Y *Date before birth.
	ERR3_CH1N1_4Y *Date before 12 months ago.

## **Child Influenza Immunization**

Question ID:	CFI.005_00	050	Instrume	nt Variable Name:	CH1N1_5	QuestionnaireFileName:	Sample Child	
QuestionText:	Was this	a sho	t, or was it	a vaccine sprayed	l in the nose?			
	*Read if	neces	sary: The	flu nasal spray is ca	alled FluMist(trade	emark).		
1	Flu shot							
2	Flu nasa	Flu nasal spray (spray, mist or drop in nose)						
7	Refused	Refused						
9	Don't kn	Don't know						
UniverseTex	a <b>t:</b> Sa	mple	Child LE	17 years who have	had one or more v	raccine doses		
SkipInstructions:		-2,R,	D> IF CH	IN1_2=1 [goto nex	xt 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 n	nonth and year did {S.C. name	e} 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				
UniverseTex	at: Sample	Child LE 17 years who have h	had more than one	vaccine doses	
SkipInstruct	tions: <1-12,D	D> [ goto CH1N1_7Y] <r> [g</r>	oto CH1N1_8]		

## **Child Influenza Immunization**

Question ID:	CFI.005_00.0	70 Instrument Variable Nar	ne: CH1N1_7Y	QuestionnaireFileName:	Sample Child				
QuestionText:	2 of 2								
	*Enter yea	r of next most recent flu vacc	cine.						
Year	Year								
9997	Refused								
9999	Don't kno	Don't know							
UniverseText: Sample Child LE 17 years who have had more than one vaccine doses and gave month/don't know month 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</valid>					1				
Hard Edit:		R1_ CH1N1_7Y nture date invalid.							
		R2_ CH1N1_7Y ate before birth.							
		R3_ CH1N1_7Y ate before 12 months ago.							
Question ID:	CFI.005_00.0	80 Instrument Variable Nar	ne: CH1N1_8	QuestionnaireFileName:	Sample Child				
QuestionText:	Was this a	shot, or was it a vaccine spra	ayed in the nose?						
	*Read if n	ecessary: The flu nasal spray	is called FluMist(tradem	ark).					
1	Flu shot								
2	Flu nasal	spray (spray, mist or drop in	nose)						
7	Refused	-							
9	Don't kno	W							
UniverseTex	t: Sar	pple Child LE 17 years who h	nave more than one vacci	ne dose					
SkipInstructions: <1-2,R,D> [goto next section]									