As a result of this injury/these injuries {do/does} {you/subject’s name} now need the help of other persons in handling routine needs such as everyday household chores, doing necessary business, shopping or getting around for other purposes?

>\text{JIAD}< \begin{tabular}{ll}
(1) Yes (FIJ.295) & (7) Refused (FIJCCI1A)) \\
(2) No (FIJCCI1A) & (9) DK (FIJCCI1A)
\end{tabular}

Do you expect {you/subject’s name} will need this help for a total of 6 months or longer?

>\text{HLIMT}< \begin{tabular}{ll}
(1) Yes & (7) Refused \\
(2) No & (9) DK
\end{tabular}

\textbf{Check item FIJCCI1A:} Return to FIJ.040 for next injury episode or next person. 
If there are no more persons and no more injury episodes, go to FIJ.300.

The next questions are about POISONING, which includes coming into contact with harmful substances, and overdose or wrong use of any drug or medication. Do not include any illnesses such as poison ivy or food poisoning.

\textbf{FR: HAND CALENDAR CARD.}

DURING THE PAST THREE MONTHS, that is since \{91 days before today’s date\}, did {you/anyone in the family} have a poisoning that caused someone to seek medical advice or treatment, including calls to a poison control center?

>\text{POIS3M}< \begin{tabular}{ll}
(1) Yes (FIJ.310) & (7) Refused (FAU.010) \\
(2) No (FAU.010) & (9) DK (FAU.010)
\end{tabular}

Who was this? (Anyone else?)

>\text{POIS3MR}< [ ] [ ] [ ]

How many different times in the PAST THREE MONTHS \{were/was\} {you/subject’s name} poisoned?

(01-94) 1-94 times \hspace{1cm} (97) Refused \\
(95) \hspace{0.5cm} 95+ times \hspace{1cm} (99) DK

When did {subject’s name} poisoning happen?

>\text{POIDTEM1}< \text{MONTH: ________} \\
>\text{POIDTED1}< \text{DAY: ________} \\
>\text{POIDTEY1}< \text{YEAR: ________}
Now I’m going to ask a few questions about subject’s name’s most recent poisoning. When did that happen?

>POIDTEM1< MONTH: ______
>POIDTED1< DAY: ______
>POIDTEY1< YEAR: ______

We just talked about subject’s name’s poisoning on recent poisoning date. When did subject’s name’s poisoning BEFORE THAT happen?

>POIDTEM#< MONTH: ______
>POIDTED#< DAY: ______
>POIDTEY#< YEAR: ______

[FIJ.340 to FIJ.410 are repeated for each poisoning episode.]

FLJ.340 Did you or subject’s name poisoning result from:

FR: SHOW CARD F8.

>POITPR2#< (1) a drug or medical substance used mistakenly or in overdose (FIJ.360)
(2) a harmful or toxic solid or liquid substance (FIJ.360)
(3) inhaling gases or vapors (FIJ.360)
(4) eating a poisonous plant or other substance mistaken for food (FIJ.360)
(5) a venomous animal or plant (FIJ.360)
(6) something else (FIJ.350)
(7) Refused (FIJ.360)
(9) DK (FIJ.360)

FLJ.350

FR: ENTER THE VERBATIM RESPONSE.

>PSPEC_1< __________________________
>PSPEC_2< __________________________
>PSPEC_3< __________________________
>PSPEC_4< __________________________

FLJ.360 Did you or did someone else call a poison control center for advice in treating subject’s name poisoning?

>POICC#< (1) Yes (7) Refused
(2) No (9) DK
FIJ.370  {Were/Was} {you/subject’s name} hospitalized for at least one night as a result of this poisoning?

>PHOSP#<  
(1) Yes (FIJ.380)  
(2) No (FIJ.390)  
(7) Refused (FIJ.390)  
(9) DK (FIJ.390)

FIJ.380 How many nights {were/was} {you/subject’s name} in the hospital?

FR:  IF “STILL IN HOSPITAL,” ASK HOW MANY NIGHTS UP TO TODAY.

>PHNO#<  
(01-94) 1-94 nights  
(95) 95+ nights  
(97) Refused  
(99) DK

Check item FIJCC12:  If AGE greater than 13 then go to FIJ.400; Else  
If AGE greater than 4 and less than 14 then go to FIJ.410; Else  
If AGE less than 5 then return to FIJ.330 for the next poisoning event or the next person.  
If there are no more persons and no more poisoning events, go to FAU.010.

FIJ.400 As a result of this poisoning, how much work did {you/subject’s name} miss?


>PWKLS#<  
(0) None  
(1) Less than 1 day  
(2) One to five days  
(3) Six or more days  
(6) Not employed at the time of poisoning  
(7) Refused  
(9) DK

FIJ.410 As a result of this poisoning, how many days of school did {you/subject’s name} miss?

FR:  SHOW CARD F7.

>PSCLS#<  
(0) None  
(1) Less than 1 day  
(2) One to five days  
(3) Six or more days  
(6) Not in school at the time of poisoning  
(7) Refused  
(9) DK

Check item FIJCC13:  Return to FIJ.330 for next poison episode or next person.  
If there are no more persons and no more poison episodes, go to next section--Health Care Access and Utilization.