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**2006 NHIS Questionnaire - Sample Child**  
**Child Identification**

Document Version Date: 31-May-07

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**Question ID:** CID.001\_00.000    **Instrument Variable Name:** CURRE5    **QuestionnaireFileName:** Sample Child

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

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

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

**SkipInstructions:**    if CSTAT <> empty and CSTAT <> 2 THEN  
                          if ASTAT = empty or ASTAT = 2 THEN  
                              goto adult.aid.SADULT  
                          elseif recontact.RCIFLAG <> 1 THEN  
                              goto recontact.RCI\_BEGIN procedure  
                          else  
                              goto back.OUTCOMEB1 procedure  
                          endif  
                          goto back.OUTCOMEB1 procedure  
                          endif

<01-25> if this is NOT an allowable line number  
                          goto ERR\_CURRES  
                          elseif CURRE5 = a line number entered in KNOWSC2  
                              store CURRE5 in CSPAVAIL and CSRESP  
                              goto CSRELTIV  
                          elseif KNOWSC2 = 'Don't know' or 'Refused' or empty (no line numbers in KNOWSC2)  
                              goto KNOAVAIL  
                          else  
                              goto CSPAVAIL  
                          endif

**2006 NHIS Questionnaire - Sample Child**  
**Child Identification**

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

**QuestionText:** The next questions are about [fill1: S.C. name].

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

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

\* If refused enter CTRL\_R.

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

**96** No person available

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

**SkipInstructions:**

```

<01-25> if line number not equal one of the line numbers in KNOWSC2
    goto child.cid.ERR_CSPAVAIL
    else
        store child.cid.CSPAVAIL in child.cid.CSRESP
        goto child.cid.CSRELATIV
    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 <> 1 THEN
        goto recontact.RCI_BEGIN procedure
    else
        goto back.OUTCOMEB1 procedure
    endif
  
```

**Question ID:** CID.030\_00.000 **Instrument Variable Name:** CSRELATIV **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C1

[fill1: The next questions are about [fill2: S.C. name]  
 What is your relationship to [fill2: S.C. name]?

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

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

**SkipInstructions:**

```

<1-8,R,D> If CSRESP = demographics.hhc.RELRESP_A
    goto child.chs.BWGT_LB
    elseif CSRESP = demographics.hhc.HHRESP
    goto child.chs.BWGT_LB
    else]
    goto CSPVERF_S
    endif]
  
```

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

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

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

- 1 Yes
- 2 No

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

---

**Question ID:** CID.041\_00.000 **Instrument Variable Name:** NEWSEX **QuestionnaireFileName:** Sample Child**QuestionText:** \* Ask if appropriate; otherwise, enter your best guess of the person's sex.

Is [fill: S.C. name] Male or Female?

- 1 Male
- 2 Female

**UniverseText:** Respondent said child's sex is not correct.**SkipInstructions:** <1,2> store NEWSEX in SEX  
goto ERR\_NEWSEX  
reset CSPVERF\_S  
goto CSPVERF\_S

---

**Question ID:** CID.042\_00.000 **Instrument Variable Name:** CSPVERF\_A **QuestionnaireFileName:** Sample Child**QuestionText:** \* Please verify the following information about the sample child before proceeding:

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

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

- 1 Yes
- 2 No

**UniverseText:** Respondent verified child's sex**SkipInstructions:** <1> goto CSPVERF\_D  
<2> goto NEWAGE

---

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**2006 NHIS Questionnaire - Sample Child**  
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**Question ID:** CID.043\_00.000 **Instrument Variable Name:** NEWAGE **QuestionnaireFileName:** Sample Child**QuestionText:** How old is [fill1: S.C. name]?

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

**000-120** Age in years**UniverseText:** Respondent said child's age is not correct**SkipInstructions:** <0-120, Refused, Don't know>  
if NEWAGE = Refused or NEWAGE = Don't know or NEWAGE = AGE  
reset CSPVERF\_A  
goto ERR\_NEWAGE  
else  
store NEWAGE in AGE  
goto NEWDOB\_M

---

**Question ID:** CID.044\_00.000 **Instrument Variable Name:** CSPVERF\_D **QuestionnaireFileName:** Sample Child**QuestionText:** \* Please verify the following information about the sample child before proceeding:

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

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

**1** Yes**2** No**UniverseText:** Respondent verified child's sex**SkipInstructions:** <1> if AGE of Sample Child ge <18>  
goto CNO\_MORE  
else  
goto child.chs.BWGT\_LB  
endif  
<2> goto NEWDOB\_M

---

**2006 NHIS Questionnaire - Sample Child**  
**Child Identification**

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

**QuestionText:** 1 of 3

What is [fill: S.C. name]'s birthday?

\*Enter month of birth.

- 1 January
- 10 October
- 11 November
- 12 December
- 2 February
- 3 March
- 4 April
- 5 May
- 6 June
- 7 July
- 8 August
- 9 September

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

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

---

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

**QuestionText:** 2 of 3

\* Enter day of birth.

01-31 Day of the month

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

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

If days not valid, goto ERR\_NEWDOB\_D

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**2006 NHIS Questionnaire - Sample Child**  
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**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**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 = No then reset CSPVERF\_A to empty  
goto CSPVERF\_A  
elseif CSPVERF\_D = 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 = &lt;02&gt; and birth day = &lt;29&gt; and this is not a leap year)

goto ERR2\_NEWDOB\_Y  
endif

(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

store NEWDOB\_D in DOBD

store NEWDOB\_Y in DOBY

if CSPVERF\_A = No then reset CSPVERF\_A to empty

goto CSPVERF\_A

elseif CSPVERF\_D = 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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Health Status & Limitations**Document Version Date: 31-May-07

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**Question ID:** CHS.010\_01.000 **Instrument Variable Name:** BWGT\_LB **QuestionnaireFileName:** Sample Child**QuestionText:** What was [fill: S.C. name]'s birth weight?

\* Enter 'M' to record metric measurements.

**01-15** 1-15 pounds  
**97** Refused  
**99** Don't know  
**M** Metric

**UniverseText:** Sample children <18**SkipInstructions:** <1-12> [goto BWGT\_OZ]  
<13-15> [goto ERR1\_BWGT\_LB]  
<R,D> [goto CHGT\_FT]  
<M> [goto BWGT\_GR]  
[If NE <1-15, M, R, D> goto ERR2\_BWGT\_LB]

---

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

**00-15** 0-15 ounces  
**97** Refused  
**99** Don't know  
**Blank** Blank

**UniverseText:** Sample children <18 who have a value entered for weight in pounds.**SkipInstructions:** <0-15,R,D> [goto CHGT\_FT]  
[if BWGT\_LB = <0-15, R, D> and BWGT\_OZ = <empty> go to CHGT\_FT]

---

**Question ID:** CHS.011\_00.000 **Instrument Variable Name:** BWGT\_GR **QuestionnaireFileName:** Sample Child**QuestionText:** \* Enter weight in grams.

**0500-5485** 500-5485 grams  
**9997** Refused  
**9999** Don't know

**UniverseText:** Sample children <18 whose birth weight will be entered in metric.**SkipInstructions:** <500-5485,R,D> [goto CHGT\_FT]  
<5486-6900> [goto ERR\_BWGT\_GR]

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**2006 NHIS Questionnaire - Sample Child**  
**Child Health Status & Limitations**  
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**Question ID:** CHS.020\_01.000 **Instrument Variable Name:** CHGT\_FT **QuestionnaireFileName:** Sample Child

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

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

\* Enter 'M' to record metric measurements.

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

**UniverseText:** Sample children <18

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

---

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

**QuestionText:** \* Enter inches.

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

**UniverseText:** Sample children <18 whose height in feet is 0-7 or is left empty.

**SkipInstructions:** <0-36> [goto CWGT\_LB]  
[If both CHGT\_FT and CHGT\_IN are either <empty> or <0>, display ERR1\_CHGT\_IN]  
[If CHGT\_FT = <0-7> and CHGT\_IN is GE <12> display ERR2\_CHGT\_IN]

---

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

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

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

**0-2** 0-2 meters  
**7** Refused  
**9** Don't know  
**Blank** Blank

**UniverseText:** Sample children <18 whose current height will be entered in metric.

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Health Status & Limitations**  
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**Question ID:** CHS.021\_02.000 **Instrument Variable Name:** CHGT\_CM **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Enter centimeters.

**000-241** 0-241 centimeters  
**Blank** Blank

**UniverseText:** Sample children <18 whose weight will be entered in metric, and who entered "0-2" for height in meters or left it empty.

**SkipInstructions:** <0-241> [goto CWGT\_LB]  
 [if CHGT\_M = <empty, 0> and CHGT\_CM = <empty, 0> go to ERR1\_CHGT\_CM]  
 [if CHGT\_M = 2 and CHGT\_CM > 41 goto ERR2\_CHGT\_CM]  
 [if CHGT\_M = 1 and CHGT\_CM >141 goto ERR2\_CHGT\_CM]

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

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

\* Enter 'M' to record metric measurements.

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

**001-500** 1-500 pounds  
**997** Refused  
**999** Don't know  
**M** Metric

**UniverseText:** Sample children <18

**SkipInstructions:** <1-500,R,D> [if age ge <2> goto ADD\_1, else, goto ADD1\_2]  
 <M> [goto CWGT\_KG]  
 [if = <501-999> goto ERR1\_CWGT\_LB]  
 [if NE <1-999, M, R, D> goto ERR2\_CWGT\_KG]

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

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

**002-226** 2-226 kilograms

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

**SkipInstructions:** <2-226> [if AGE ge <2> goto ADD\_1; else goto ADD1\_2]  
 [if CWGT\_KG > 226 goto ERR\_CWGT\_KG]

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**2006 NHIS Questionnaire - Sample Child**  
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**Question ID:** CHS.031\_02.000 **Instrument Variable Name:** ADD1\_2 **QuestionnaireFileName:** Sample Child

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

Mental Retardation?

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

**UniverseText:** Sample children <2

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

---

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

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

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

Any other developmental delay?

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

**UniverseText:** Sample children <2

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

---

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

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

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

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

**UniverseText:** Sample children 2-17

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

---

**2006 NHIS Questionnaire - Sample Child**  
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**Question ID:** CHS.032\_02.000 **Instrument Variable Name:** ADD\_2 **QuestionnaireFileName:** Sample Child

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

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

Mental Retardation?

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

**UniverseText:** Sample children 2-17

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

---

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

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

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

Any other developmental delay?

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

**UniverseText:** Sample children 2-17

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

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**2006 NHIS Questionnaire - Sample Child**  
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**Question ID:** CHS.060\_00.000 **Instrument Variable Name:** CONDL **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C2

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

Which ones?

\* Enter all that apply, separate with commas.

- 00 None
- 01 Down syndrome
- 02 Cerebral palsy
- 03 Muscular dystrophy
- 04 Cystic fibrosis
- 05 Sickle cell anemia
- 06 Autism
- 07 Diabetes
- 08 Arthritis
- 09 Congenital heart disease
- 10 Other heart condition
- 97 Refused
- 99 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <0-10,R,D> [go to CPOX]  
[If <0> and <1-10> go to ERR\_CONDL]

---

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

**QuestionText:** Has [fill: S.C. Name] EVER had chickenpox?

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

**UniverseText:** Sample children <18

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

---

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

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

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

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

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

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**2006 NHIS Questionnaire - Sample Child**  
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**Question ID:** CHS.080\_00.000 **Instrument Variable Name:** CASHMEV **QuestionnaireFileName:** Sample Child

**QuestionText:** Has a doctor or other health professional EVER told you that [fill: S.C. name] had asthma?

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

**UniverseText:** Sample children <18

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

---

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

**QuestionText:** Does [fill: S.C. name] still have asthma?

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

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

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

---

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

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

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

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

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

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

---

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

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

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

**UniverseText:** Sample children <18 who has had an episode of asthma or an asthma attack in the past 12 months

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Health Status & Limitations**  
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**Question ID:** CHS.111\_01.000 **Instrument Variable Name:** CCONDT1\_1 **QuestionnaireFileName:** Sample Child

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

Hay fever?

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

**UniverseText:** Sample children LE 2

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

---

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

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

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

Any kind of respiratory allergy?

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

**UniverseText:** Sample children LE 2

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

---

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

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

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

Any kind of food or digestive allergy?

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

**UniverseText:** Sample children LE 2

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

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**2006 NHIS Questionnaire - Sample Child**  
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**Question ID:** CHS.111\_04.000 **Instrument Variable Name:** CCONDT1\_4 **QuestionnaireFileName:** Sample Child

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

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

Eczema or any kind of skin allergy?

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

**UniverseText:** Sample children LE 2

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

---

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

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

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

Frequent or repeated diarrhea or colitis?

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

**UniverseText:** Sample children LE 2

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

---

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

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

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

Anemia?

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

**UniverseText:** Sample children LE 2

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

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**2006 NHIS Questionnaire - Sample Child**  
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**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: S.C. name] had any of the following conditions...

Three or more ear infections?

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

**UniverseText:** Sample children LE 2

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

---

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

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

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

Seizures?

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

**UniverseText:** Sample children LE 2

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

---

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

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

Hay fever?

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

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

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

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**2006 NHIS Questionnaire - Sample Child**  
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**Question ID:** CHS.115\_02.000 **Instrument Variable Name:** CCONDT\_2 **QuestionnaireFileName:** Sample Child

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

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

Any kind of respiratory allergy?

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

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

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

---

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

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

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

Any kind of food or digestive allergy?

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

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

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

---

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

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

DURING THE PAST 12 MONTHS, has [fill: S.C. 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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**2006 NHIS Questionnaire - Sample Child**  
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**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: S.C. name] had any of the following conditions...

Frequent or repeated diarrhea or colitis?

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

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

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

---

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

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

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

Anemia?

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

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

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

---

**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: S.C. name] had any of the following conditions...

Frequent or severe headaches, including migraines?

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

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

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

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**2006 NHIS Questionnaire - Sample Child**  
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**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: S.C. name] had any of the following conditions...

Three or more ear infections?

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

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

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

---

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

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

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

Seizures?

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

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

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

---

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

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

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

Stuttering or stammering?

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

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

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

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**2006 NHIS Questionnaire - Sample Child**  
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**Question ID:** CHS.210\_00.000 **Instrument Variable Name:** CHSTATYR **QuestionnaireFileName:** Sample Child

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

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

**UniverseText:** Sample children <18

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

---

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

**QuestionText:** DURING THE PAST 12 MONTHS, that is, since [fill1: 12-month ref. date], about how many days did [fill2: S.C. name] miss school because of illness or injury?

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

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

**UniverseText:** Sample children 5-17

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

---

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

**QuestionText:** \* Hand calendar card.

These next questions are about [fill: S.C name]'s recent health during the 2 weeks outlined on that calendar.

Did [fill: SC name] have a head cold or chest cold that started during those two weeks?

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

**UniverseText:** Sample children <18

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

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**2006 NHIS Questionnaire - Sample Child**  
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**Question ID:** CHS.240\_00.000 **Instrument Variable Name:** CINTIL2W **QuestionnaireFileName:** Sample Child

**QuestionText:** Did [fill: S.C. name] have a stomach or intestinal illness with vomiting or diarrhea that started during those two weeks?

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

**UniverseText:** Sample children <18

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

---

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

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

- 1 Good
- 2 A little trouble
- 3 A lot of trouble
- 4 Deaf
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1-4,R,D> [go to CVISION]

---

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

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

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

**UniverseText:** Sample children <18

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

---

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

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

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

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

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Health Status & Limitations**  
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**Question ID:** CHS.290\_00.000 **Instrument Variable Name:** IHSPEQ **QuestionnaireFileName:** Sample Child

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

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

**UniverseText:** Sample children <18

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

---

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

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

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

**UniverseText:** Sample children <18

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

---

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

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

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

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

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Health Status & Limitations**  
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**Question ID:** CHS.311\_00.000 **Instrument Variable Name:** PROBRX **QuestionnaireFileName:** Sample Child

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

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

**UniverseText:** Sample children <18

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

---

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

**QuestionText:** Has a representative from a school or a health professional ever told you that [fill: S.C. name] had a learning disability?

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

**UniverseText:** Sample children 3-17

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

---

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

**QuestionText:** (book) C3

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.

HE:

Has been uncooperative?

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

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

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Health Status & Limitations**  
Document Version Date: 31-May-07

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

**QuestionText:** (book) C3

\* 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.

HE:

Has trouble getting to sleep?

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

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

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

---

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

**QuestionText:** (book) C3

\* 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.

HE:

Has speech problems?

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

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

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Health Status & Limitations**  
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**Question ID:** CHS.321\_04.000 **Instrument Variable Name:** CMHAGM11\_4 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C3

\* 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.

HE:

Has been unhappy, sad, or depressed?

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

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

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

---

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

**QuestionText:** (book) C3

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

SHE:

Has temper tantrums or a hot temper?

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

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

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Health Status & Limitations**  
Document Version Date: 31-May-07

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**Question ID:** CHS.361\_02.000 **Instrument Variable Name:** CMHAGF11\_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C3

\* Read if necessary.

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

SHE:

Has speech problems?

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

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

**SkipInstructions:** <0-2,R,D> [go to CMHAGF11\_3]

---

**Question ID:** CHS.361\_03.000 **Instrument Variable Name:** CMHAGF11\_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C3

\* Read if necessary.

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

SHE:

Has been nervous or high-strung?

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

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

**SkipInstructions:** <0-2,R,D> [go to CMHAGF11\_4]

---

**2006 NHIS Questionnaire - Sample Child**  
**Child Health Status & Limitations**

Document Version Date: 31-May-07

---

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

**QuestionText:** (book) C3

\* Read if necessary.

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

SHE:

Has been unhappy, sad, or depressed?

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

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

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
Document Version Date: 31-May-07

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

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

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

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

**UniverseText:** Sample children <18

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

---

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

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

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

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

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

---

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

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

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

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

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
Document Version Date: 31-May-07

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

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

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

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

**SkipInstructions:** <0-6,R,D> [ if CUSUALPL=2,R,D goto CHCDLYR\_1; else goto CHCCHGYR]

---

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

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

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

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

**SkipInstructions:** <1> [go to CHCCHGHI]  
<2,R,D> [goto to CHCDLYR1\_1]

---

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

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

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

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

**SkipInstructions:** <1,2,R,D> [goto CHCDLYR1\_1]

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
Document Version Date: 31-May-07

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

**QuestionText:**

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

You couldn't get through on the telephone.

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

**UniverseText:** Sample children <18

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

---

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

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

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

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

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

**UniverseText:** Sample children <18

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

---

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

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

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

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

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

**UniverseText:** Sample children <18

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
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**Question ID:** CAU.080\_04.000 **Instrument Variable Name:** CHCDLYR1\_4 **QuestionnaireFileName:** Sample Child

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

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

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

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

**UniverseText:** Sample children <18

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

---

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

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

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

You didn't have transportation.

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

**UniverseText:** Sample children <18

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

---

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

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

Prescription medicines?

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

**UniverseText:** Sample children <2

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
Document Version Date: 31-May-07

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

**QuestionText:**

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

Prescription medicines?

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

**UniverseText:** Sample children GE 2

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

---

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

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

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

Mental health care or counseling?

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

**UniverseText:** Sample children GE 2

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

---

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

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

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

Dental care (including check-ups)?

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

**UniverseText:** Sample children GE 2

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
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---

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

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

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

Eyeglasses?

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

**UniverseText:** Sample children GE 2

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

---

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

**QuestionText:** (book) C4

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

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

**UniverseText:** Sample children GE 1

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

---

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

**QuestionText:**

DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], 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]

---

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
Document Version Date: 31-May-07

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

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

DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], has anyone in the family seen or talked to any of the following health care providers about [fill2: alias]'s health?

A foot doctor?

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

**UniverseText:** Sample children <2

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

---

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

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

DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], has anyone in the family seen or talked to any of the following health care providers about [fill2: alias]'s health?

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

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

**UniverseText:** Sample children <2

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

---

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

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

DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], has anyone in the family seen or talked to any of the following health care providers about [fill2: alias]'s health?

A nurse practitioner, physician assistant or midwife?

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

**UniverseText:** Sample children <2

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

---

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
Document Version Date: 31-May-07

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

**QuestionText:**

DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], have you seen or talked to any of the following health care providers about [fill2: alias]'s health?

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

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

**UniverseText:** Sample children GE 2

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

---

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

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

DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], have you seen or talked to any of the following health care providers about [fill2: alias]'s health?

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

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

**UniverseText:** Sample children GE 2

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

---

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

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

DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], have you seen or talked to any of the following health care providers about [fill2: alias]'s health?

A foot doctor?

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

**UniverseText:** Sample children GE 2

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

---

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
Document Version Date: 31-May-07

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

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

DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], have you seen or talked to any of the following health care providers about [fill2: alias]'s health?

A chiropractor?

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

**UniverseText:** Sample children GE 2

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

---

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

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

DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], have you seen or talked to any of the following health care providers about [fill2: alias]'s health?

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

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

**UniverseText:** Sample children GE 2

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

---

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

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

DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], have you seen or talked to any of the following health care providers about [fill2: alias]'s health?

A nurse practitioner, physician assistant or midwife?

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

**UniverseText:** Sample children GE 2

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
Document Version Date: 31-May-07

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

**QuestionText:** DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], have you seen or talked to a doctor who specializes in women's health (an obstetrician/gynecologist) about [fill2: alias]'s health?

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

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

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

---

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

**QuestionText:** DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], have you seen or talked to the following about [fill2: alias]'s health?  
A medical doctor who specializes in a particular medical disease or problem (fill3:other than obstetrician/ gynecologist, psychiatrist or ophthalmologist? /fill4: other than psychiatrist or ophthalmologist)?

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

**UniverseText:** Sample children <18

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

---

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

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

DURING THE PAST 12 MONTHS, that is since [fill1: 12 month reference date], have you seen or talked to the following about [fill2: alias]'s health?

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

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

**UniverseText:** Sample children <18

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

---

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
Document Version Date: 31-May-07

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

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

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

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

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

---

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

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

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

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

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

---

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

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

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

**UniverseText:** Sample children <18

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
Document Version Date: 31-May-07

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

**QuestionText:** (book) C5

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

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

**UniverseText:** Sample children <18

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

---

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

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

1	Yes
2	No
7	Refused
9	Don't know

**UniverseText:** Sample children <18

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

---

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

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

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

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

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

---

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
Document Version Date: 31-May-07

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

**QuestionText:** (book) C6

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

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

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

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

---

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

**QuestionText:** (book) C5

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

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

**UniverseText:** Sample children <18

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**  
Document Version Date: 31-May-07

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

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

\* Read if necessary.

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

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

**UniverseText:** Sample children <18

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

---

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

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

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

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

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

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

---

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

**QuestionText:** (book) C4

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

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

**UniverseText:** Sample children <18

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

---

**2006 NHIS Questionnaire - Sample Child**  
**Child Influenza Immunization**  
Document Version Date: 31-May-07

**Question ID:** CFI.010\_00.000    **Instrument Variable Name:** CSHFLUYR    **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, has {fill1: SC name} had a flu shot? A flu shot is usually given in the fall and protects against influenza for the flu season.

\* Read if necessary: A flu shot is injected in the arm. Do not include an influenza vaccine sprayed in the nose.

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

**UniverseText:** Sample children <18

**SkipInstructions:** <1> [goto CSHFLU\_M] <2,R,D> [ goto CSPFLUYR ]

**Question ID:** CFI.015\_01.000    **Instrument Variable Name:** CSHFLU\_M    **QuestionnaireFileName:** Sample Child

**QuestionText:** 1 of 2

During what month and year did {fill1: SC name} receive {fill2: his/her} most recent flu shot?

- 01 January
- 02 February
- 03 March
- 04 April
- 05 May
- 06 June
- 07 July
- 08 August
- 09 September
- 10 October
- 11 November
- 12 December
- 97 Refused
- 99 Don't know

**UniverseText:** Sample children <18 who have had a flu shot

**SkipInstructions:** <1-12,D> [ goto CSHFLU\_Y] <R> [goto CSPFLUYR]

**Question ID:** CFI.015\_02.000    **Instrument Variable Name:** CSHFLU\_Y    **QuestionnaireFileName:** Sample Child

**QuestionText:** 2 of 2

\*Enter year of most recent flu shot.

- Year Year
- 9997 Refused
- 9999 Don't know

**UniverseText:** Sample children <18 who gave a month for their last flu shot or who didn't know the month

**SkipInstructions:** <valid year,R,D> [goto CSPFLUYR]  
[If CSHFLU\_M and CSHFLU\_Y = a future date] goto ERR1\_CSHFLU\_Y]  
[If CSHFLU\_M and CSHFLU\_Y = a date prior to birth] goto ERR2\_CSHFLU\_Y]  
[If CSHFLU\_M and CSHFLU\_Y = a date prior to 12 months ago] goto ERR3\_CSHFLU\_Y]

---

**2006 NHIS Questionnaire - Sample Child**  
**Child Influenza Immunization**  
Document Version Date: 31-May-07

---

**Question ID:** CFI.020\_00.000    **Instrument Variable Name:** CSPFLUYR    **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, has {fill1: SC name} had a flu vaccine sprayed in {fill2: his/her} nose by a doctor or other health professional? This vaccine is usually given in the fall and protects against influenza for the flu season.

\* Read if necessary: This influenza vaccine is called FluMist (trademark).

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

**UniverseText:** Sample children <18

**SkipInstructions:** <1> [goto CSPFLU\_M] <2,R,D> [goto next section]  
[if CSHFLUYR =1 and CSPFLUYR=1] goto ERR\_CSPFLUYR

---

**Question ID:** CFI.025\_01.000    **Instrument Variable Name:** CSPFLU\_M    **QuestionnaireFileName:** Sample Child

**QuestionText:** 1 of 2

During what month and year did {fill1: SC name} receive {his/her} most recent flu nasal spray?

- 01 January
- 02 February
- 03 March
- 04 April
- 05 May
- 06 June
- 07 July
- 08 August
- 09 September
- 10 October
- 11 November
- 12 December
- 97 Refused
- 99 Don't know

**UniverseText:** Sample children <18 who have had a flu nasal vaccine

**SkipInstructions:** <1-12,D> [ goto CSPFLU\_Y] <R> [goto next section]

---

**2006 NHIS Questionnaire - Sample Child**  
**Child Influenza Immunization**  
Document Version Date: 31-May-07

---

**Question ID:** CFI.025\_02.000    **Instrument Variable Name:** CSPFLU\_Y    **QuestionnaireFileName:** Sample Child

**QuestionText:** 2 of 2

\*Enter year of most recent flu nasal spray.

<b>Year</b>	Year
<b>9997</b>	Refused
<b>9999</b>	Don't know

**UniverseText:** Sample children 18+ who gave a month for their flu nasal vaccine or who didn't know the month

**SkipInstructions:** <valid year,R,D> [goto next section]  
[If CSPFLU\_M and CSPFLU\_Y = a future date] goto ERR1\_CSPFLU\_Y]  
[If CSPFLU\_M and CSPFLU\_Y = a date prior to birth] goto ERR2\_CSPFLU\_Y]  
[If CSPFLU\_M and CSPFLU\_Y = a date prior to 12 months ago] goto ERR3\_CSPFLU\_Y]

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**2006 NHIS Questionnaire - Sample Child**  
**Child Mental Health Brief Questionnaire**

Document Version Date: 31-May-07

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**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.

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\* Enter 1 to Continue.

1 Enter 1 to continue

**UniverseText:** Sample children GE 4

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

---

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

**QuestionText:** (book) C7

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

[fill2: He/She...]

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

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

**UniverseText:** Sample children GE 4

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Mental Health Brief Questionnaire**  
Document Version Date: 31-May-07

---

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

**QuestionText:** (book) C7

\* Read if necessary.

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

[fill2: He/She...]

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

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

**UniverseText:** Sample children GE 4

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

---

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

**QuestionText:** (book) C7

\* Read if necessary.

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

[fill2: He/She...]

...is often unhappy, depressed, or tearful.

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

**UniverseText:** Sample children GE 4

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Mental Health Brief Questionnaire**  
Document Version Date: 31-May-07

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

**QuestionText:** (book) C7

\* Read if necessary.

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

[fill2: He/She...]

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

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

**UniverseText:** Sample children GE 4

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

---

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

**QuestionText:** (book) C7

\* Read if necessary.

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

[fill2: He/She...]

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

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

**UniverseText:** Sample children GE 4

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

---

**2006 NHIS Questionnaire - Sample Child**  
**Child Mental Health Brief Questionnaire**  
Document Version Date: 31-May-07

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

**QuestionText:** (book) C8

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

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

**UniverseText:** Sample children GE 4

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



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**2006 NHIS Questionnaire - Sample Child**  
**Child Mental Health Services**  
**Document Version Date: 31-May-07**

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**Question ID:** CMS.010\_00.000 **Instrument Variable Name:** SEEDIFF **QuestionnaireFileName:** Sample Child

**QuestionText:** Did you ever see or talk to any health care provider or school staff/personnel about difficulties [fill1: SC name] has with emotions, concentration, behavior or being able to get along with others?

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

**UniverseText:** Sample children GE 4

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

---

**Question ID:** CMS.020\_00.000 **Instrument Variable Name:** MRVSEE **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C9

When was the MOST RECENT conversation or visit?

- 1 In the past 6 months
- 2 7 to 12 months ago
- 3 More than 12 months ago
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 4 who have seen or talked to health care provider/school/staff/personnel about child's difficulties

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

---

**Question ID:** CMS.030\_00.000 **Instrument Variable Name:** MEDDIFF **QuestionnaireFileName:** Sample Child

**QuestionText:** Was [fill1: SC name] ever prescribed medication for difficulties with [fill2: his/her] emotions, concentration, behavior or being able to get along with others?

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

**UniverseText:** Sample children GE 4

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Mental Health Services**  
Document Version Date: 31-May-07

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**Question ID:** CMS.040\_00.000 **Instrument Variable Name:** MRVMED **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C9

When was the MOST RECENT medication prescribed for these difficulties?

- 1 In the past 6 months
- 2 7 to 12 months ago
- 3 More than 12 months ago
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 4 who have had medication prescribed for difficulties with emotion, concentration, behavior, or getting along with others

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

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**Question ID:** CMS.050\_00.000 **Instrument Variable Name:** MEDWHY **QuestionnaireFileName:** Sample Child

**QuestionText:** Was this medication prescribed for difficulties with concentration, hyperactivity, or impulsivity?

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

**UniverseText:** Sample children GE 4 who have had medication prescribed for difficulties with emotion, concentration, behavior, or getting along with others

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

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**Question ID:** CMS.060\_00.000 **Instrument Variable Name:** TRETDIFF **QuestionnaireFileName:** Sample Child

**QuestionText:** Has [Fill1: SC name] EVER received ANY treatment or help, [Fill2: other than medication,] for difficulties with emotions, concentration, behavior or being able to get along with others?

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

**UniverseText:** Sample children GE 4

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

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**2006 NHIS Questionnaire - Sample Child**  
**Child Mental Health Services**  
Document Version Date: 31-May-07

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**Question ID:** CMS.070\_00.000 **Instrument Variable Name:** MRVTRET **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C9

When was the MOST RECENT help or treatment received?

- 1 In the past 6 months
- 2 7 to 12 months ago
- 3 More than 12 months ago
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 4 who have received treatment or help for difficulties with emotions, concentration, behavior, or getting along with others

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

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**Question ID:** CMS.080\_00.000 **Instrument Variable Name:** TRETWHER **QuestionnaireFileName:** Sample Child

**QuestionText:** (book) C10

Was any of this treatment or help received from any of the following?

\*Enter all that apply, separate with commas.

- 1 A pediatric or general medical care practice
- 2 A mental health private practice
- 3 A mental health clinic or center
- 4 The child's school
- 5 Other
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children GE 4 who have received treatment or help for difficulties with emotions, concentration, behavior, or getting along with others

**SkipInstructions:** <1-5,R,D> [goto next section]

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