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**2017 NHIS Questionnaire - Sample Child**

**Child Identification**

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

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

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

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

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

**SkipInstructions:** if CSTAT ne empty and CSTAT ne '2' THEN  
if ASTAT = empty or ASTAT = '2' THEN  
goto adult.aid.SADULT  
elseif recontact.RCIFLAG ne '1' THEN  
goto recontact.RCI\_BEGIN procedure  
else  
goto back.OUTCOMEB1 procedure  
endif  
goto back.OUTCOMEB1 procedure  
endif  
  
<01-25> if this is NOT an allowable line number  
goto ERR\_CURRES  
elseif CURRES = a line number entered in KNOWSC2  
store CURRES in CSPAVAIL and CSRESP  
goto CSRELTIV  
elseif KNOWSC2 = 'Don't know' or 'Refused' or empty (no line numbers in KNOWSC2)  
goto KNOAVAIL  
else  
goto CSPAVAIL  
endif

**Hard Edit:** ERR\_CURRES

\* You have selected a non-selectable person.

\* Please correct.

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**2017 NHIS Questionnaire - Sample Child**

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**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 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.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

**Hard Edit:** ERR\_CSPAVAIL

\* You have selected a non-selectable person.

\* Please correct.

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**2017 NHIS Questionnaire - Sample Child****Child Identification****Document Version Date: 04-Jun-18**

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**Question ID:** CID.030\_00.000 **Instrument Variable Name:** CSRELTIV **QuestionnaireFileName:** Sample Child**QuestionText:** (book) C1[fill1: The next questions are about [fill2: ALIAS of Sample Child].]  
What is your relationship to [fill2: ALIAS of Sample Child]?

- 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: ALIAS of Sample Child]'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

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**Question ID:** CID.041\_00.000 **Instrument Variable Name:** NEWSEX **QuestionnaireFileName:** Sample Child

**QuestionText:** Is [fill: ALIAS of Sample Child] Male or Female?

\* If don't know or refused enter your best guess of the child's sex.

- 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

**Hard Edit:** ERR\_NEWSEX

\* The gender will now be changed to [fill: NEWSEX].

goto CSPVERF\_S (as the default goto)

---

**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: ALIAS of Sample Child]'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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**Question ID:** CID.043\_00.000 **Instrument Variable Name:** NEWAGE **QuestionnaireFileName:** Sample Child

**QuestionText:** How old is [fill1: ALIAS of Sample Child]?

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

**000-120** Age in years

**UniverseText:** Respondent said child's age is not correct

**SkipInstructions:** <0-120, Refused, Don't know>  
 if NEWAGE = 'Refused' or NEWAGE = 'Don't know' or NEWAGE = AGE  
 reset CSPVERF\_A  
 goto ERR\_NEWAGE  
 else  
 store NEWAGE in AGE  
 goto NEWDOB\_M

**Hard Edit:** ERR\_NEWAGE

\*Age of [fill1: ALIAS of Sample Child] remains [fill2: Age of Sample Child] years old.

goto CSPVERF\_A (whether suppressed or not)

---

**Question ID:** CID.044\_00.000 **Instrument Variable Name:** CSPVERF\_D **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Please verify the following information about the sample child before proceeding:

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

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

**1** Yes

**2** No

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

**SkipInstructions:** <1> if AGE of Sample Child ge '18'  
 goto CNO\_MORE  
 else  
 goto child.chs.BWGT\_LB  
 endif  
 <2> goto NEWDOB\_M

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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: ALIAS of Sample Child]'s birthday?

\*Enter month of birth.

- 01 January
- 02 February
- 03 March
- 04 April
- 05 May
- 06 June
- 07 July
- 08 August
- 09 September
- 10 October
- 11 November
- 12 December

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

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

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

**QuestionText:** 2 of 3

\* Enter day of birth.

01-31 Day of the month

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

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

If days not valid, goto ERR\_NEWDOB\_D

**Hard Edit:** ERR\_NEWDOB\_D

\* [fill2: NEWDOB\_D] is not a valid day for [fill3: NEWDOB\_M].

\* Please correct.

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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

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**2017 NHIS Questionnaire - Sample Child**
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**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

(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 = '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.

goto NEWDOB\_M (whether suppressed or not)

ERR2\_NEWDOB\_Y

\*Not a valid day: [fill2: <NEWDOB\_M> <NEWDOB\_D>, <NEWDOB\_Y>]  
 \*Please correct.

goto NEWDOB\_M (whether suppressed or not)

ERR3\_NEWDOB\_Y

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

goto CSPVERF\_A

ERR4\_NEWDOB\_Y

\*Data mismatched. Please fix Age or Birthday.

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goto CSPVERF\_A (whether suppressed or not)

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**2017 NHIS Questionnaire - Sample Child****Child Health Status & Limitations**Document Version Date: 04-Jun-18

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**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?

\* Enter 'M' to record metric measurements.

<b>01-15</b>	1-15 pounds
<b>97</b>	Refused
<b>99</b>	Don't know
<b>M</b>	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, D, R> goto ERR2\_BWGT\_LB]

**Hard Edit:** ERR2\_BWGT\_LB

\* Only "1-15" or "M" or "Don't know/Refused" allowed in this field.  
\* Please correct.

**Soft Edit:** ERR1\_BWGT\_LB

\* [fill: BWGT\_LB] is an unusually high number.  
\* Please verify.

---

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

**QuestionText:** \* Enter ounces.

<b>00-15</b>	0-15 ounces
<b>97</b>	Refused
<b>99</b>	Don't know
<b>Blank</b>	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, D, R> and BWGT\_OZ = <empty> go to CHGT\_FT]

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**2017 NHIS Questionnaire - Sample Child**
**Child Health Status & Limitations**
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**Question ID:** CHS.011\_00.000 **Instrument Variable Name:** BWGT\_GR **QuestionnaireFileName:** Sample Child

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

<b>0500</b>	500 grams or less
<b>0501-6899</b>	501-6899 grams
<b>6900</b>	6900+ grams
<b>9997</b>	Refused
<b>9999</b>	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]

**Soft Edit:** ERR\_BWGT\_GR

\* [fill1: BWGT\_GR] is an unusually high number (equal to [fill2] pounds, [fill3] ounces).  
\* Please verify.

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**Question ID:** CHS.020\_01.000 **Instrument Variable Name:** CHGT\_FT **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

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

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

\* Enter 'M' to record metric measurements.

<b>00-07</b>	0-7 feet
<b>97</b>	Refused
<b>99</b>	Don't know
<b>M</b>	Metric

**UniverseText:** Sample children 12+

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

**Hard Edit:** ERR\_CHGT\_FT

\* Only "0-7" or "M" or "Don't know/Refused" allowed in this field.  
\* Please correct.

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**2017 NHIS Questionnaire - Sample Child**
**Child Health Status & Limitations**
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**Question ID:** CHS.020\_02.000 **Instrument Variable Name:** CHGT\_IN **QuestionnaireFileName:** Sample Child

**QuestionText:** \* Enter inches.

<b>00-36</b>	0-36 inches
<b>97</b>	Refused
<b>99</b>	Don't know

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

**SkipInstructions:** <0-36,R,D> If (CHGT\_FT = '0', 'empty') and (CHGT\_IN = '0', 'empty')  
    goto ERR1\_CHGT\_IN  
    elseif CHGT\_FT = '1-7' and CHGT\_IN ge '12'  
        goto ERR2\_CHGT\_IN  
    elseif (SEX = '1' and  
        AGE = '12' and (CHTINCH lt '53' or CHTINCH gt '68')) or  
        AGE = '13' and (CHTINCH lt '55' or CHTINCH gt '72')) or  
        AGE = '14' and (CHTINCH lt '58' or CHTINCH gt '73')) or  
        AGE = '15' and (CHTINCH lt '60' or CHTINCH gt '74')) or  
        AGE = '16' and (CHTINCH lt '61' or CHTINCH gt '74')) or  
        AGE = '17' and (CHTINCH lt '62' or CHTINCH gt '75')) or  
        (SEX = '2' and  
        AGE = '12' and (CHTINCH lt '54' or CHTINCH gt '68')) or  
        AGE = '13' and (CHTINCH lt '55' or CHTINCH gt '69')) or  
        AGE = '14' and (CHTINCH lt '57' or CHTINCH gt '69')) or  
        AGE = '15' and (CHTINCH lt '57' or CHTINCH gt '69')) or  
        AGE = '16' and (CHTINCH lt '57' or CHTINCH gt '70')) or  
        AGE = '17' and (CHTINCH lt '57' or CHTINCH gt '69'))  
    goto ERR3\_CHGT\_IN  
    else  
        goto CWGT\_LB

**Hard Edit:** ERR1\_CHGT\_IN

\* Must enter an answer in at least the inches item.  
\* Please correct.

ERR2\_CHGT\_IN

\* Number of inches exceeds maximum allowed.  
\* Please correct.

**Soft Edit:** ERR3\_CHGT\_IN

\* Please verify that the height was entered correctly. Probe only if necessary.

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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**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 12+ whose current height will be entered in metric.

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

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**2017 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 12+ whose weight will be entered in metric, and who entered "0-2" for height in meters or left it empty.

**SkipInstructions:** <0-241,R,D> If (CHGT\_M = '0', 'empty') and (CHGT\_CM = '0', 'empty')  
    goto ERR1\_CHGT\_CM  
    elseif (CHGT\_M eq '2' and CHGT\_CM gt '41') or (CHGT\_M eq '1' and CHGT\_CM gt '141')  
    goto ERR2\_CHGT\_CM  
    elseif (SEX = '1' and  
        AGE = '12' and (CHTCM lt '137' or CHTCM gt '174')) or  
        AGE = '13' and (CHTCM lt '140' or CHTCM gt '184')) or  
        AGE = '14' and (CHTCM lt '148' or CHTCM gt '186')) or  
        AGE = '15' and (CHTCM lt '152' or CHTCM gt '189')) or  
        AGE = '16' and (CHTCM lt '156' or CHTCM gt '189')) or  
        AGE = '17' and (CHTCM lt '157' or CHTCM gt '192')) or  
    (SEX = '2' and  
        AGE = '12' and (CHTCM lt '138' or CHTCM gt '173')) or  
        AGE = '13' and (CHTCM lt '141' or CHTCM gt '176')) or  
        AGE = '14' and (CHTCM lt '145' or CHTCM gt '176')) or  
        AGE = '15' and (CHTCM lt '145' or CHTCM gt '177')) or  
        AGE = '16' and (CHTCM lt '145' or CHTCM gt '177')) or  
        AGE = '17' and (CHTCM lt '145' or CHTCM gt '176'))  
    goto ERR3\_CHGT\_CM  
    else  
    goto CWGT\_LB

**Hard Edit:** ERR1\_CHGT\_CM

    \* Must enter an answer at least in the centimeters item.  
    \* Please correct.

ERR2\_CHGT\_CM

    \* Total height exceeds maximum allowed.  
    \* Please correct.

**Soft Edit:** ERR3\_CHGT\_CM

    \* Please verify that the height was entered correctly. Probe only if necessary.

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**2017 NHIS Questionnaire - Sample Child**
**Child Health Status & Limitations**
**Document Version Date: 04-Jun-18**


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**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.

<b>001-500</b>	1-500 pounds
<b>997</b>	Refused
<b>999</b>	Don't know
<b>M</b>	Metric

**UniverseText:** Sample children 12+

**SkipInstructions:**

```

<1-500> if CWGT_LB lt '1' or CWGT_LB gt '500'
  goto ERR1_CWGT_LB
elseif (SEX = '1' and
  AGE = '12' and (CWGT_LB lt '62' or CWGT_LB gt '209')) or
  AGE = '13' and (CWGT_LB lt '70' or CWGT_LB gt '247')) or
  AGE = '14' and (CWGT_LB lt '83' or CWGT_LB gt '266')) or
  AGE = '15' and (CWGT_LB lt '94' or CWGT_LB gt '267')) or
  AGE = '16' and (CWGT_LB lt '98' or CWGT_LB gt '306')) or
  AGE = '17' and (CWGT_LB lt '106' or CWGT_LB gt '317')) or
  (SEX = '2' and
  AGE = '12' and (CWGT_LB lt '62' or CWGT_LB gt '212')) or
  AGE = '13' and (CWGT_LB lt '73' or CWGT_LB gt '238')) or
  AGE = '14' and (CWGT_LB lt '84' or CWGT_LB gt '252')) or
  AGE = '15' and (CWGT_LB lt '84' or CWGT_LB gt '238')) or
  AGE = '16' and (CWGT_LB lt '87' or CWGT_LB gt '257')) or
  AGE = '17' and (CWGT_LB lt '90' or CWGT_LB gt '292'))
  goto ERR2_CWGT_LB
elseif CHGT_FLG = '1' and CWGT_FLG = '1' and AGE ge '2'
  goto ADD_1
elseif CHGT_FLG = '1' and CWGT_FLG = '1' and AGE lt '2'
  goto ADD1_2
else
  calculate the BMI (Body Mass Index) – See CBMI spec page
<R,D> if AGE ge '2'
  goto ADD_1
else
  goto ADD1_2
<M> goto CWGT_KG

```

**Hard Edit:** ERR1\_CWGT\_LB

\* Weight is out of range (1-500).

\* Please correct.

**Soft Edit:** ERR2\_CWGT\_LB

 \* Please verify that the weight was entered correctly. Probe only if necessary.

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**2017 NHIS Questionnaire - Sample Child**
**Child Health Status & Limitations**
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**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 12+ whose weight will be entered in metric.

**SkipInstructions:**

```

<2-226> if CWGT_KG lt '2' or CWGT_KG gt '226'
  goto ERR1_CWGT_KG
elseif (SEX = '1' and
  AGE = '12' and (CWGT_KG = '28' or CWGT_KG = '95')) or
  AGE = '13' and (CWGT_KG = '32' or CWGT_KG = '112')) or
  AGE = '14' and (CWGT_KG = '38' or CWGT_KG = '121')) or
  AGE = '15' and (CWGT_KG = '42' or CWGT_KG = '121')) or
  AGE = '16' and (CWGT_KG = '44' or CWGT_KG = '139')) or
  AGE = '17' and (CWGT_KG = '48' or CWGT_KG = '144')) or
  (SEX = '2' and
  AGE = '12' and (CWGT_KG = '28' or CWGT_KG = '96')) or
  AGE = '13' and (CWGT_KG = '33' or CWGT_KG = '108')) or
  AGE = '14' and (CWGT_KG = '38' or CWGT_KG = '114')) or
  AGE = '15' and (CWGT_KG = '38' or CWGT_KG = '108')) or
  AGE = '16' and (CWGT_KG = '39' or CWGT_KG = '117')) or
  AGE = '17' and (CWGT_KG = '41' or CWGT_KG = '133'))
  goto ERR2_CWGT_KG
elseif CHGT_FLG = '1' and CWGT_FLG = '1' and AGE ge '2'
  goto ADD_1
elseif CHGT_FLG = '1' and CWGT_FLG = '1' and AGE lt '2'
  goto ADD1_2
else
  calculate the BMI (Body Mass Index) – See CBMI spec page
<R,D> if AGE ge '2'
  goto ADD_1
else
  goto ADD1_2

```

**Hard Edit:** ERR1\_CWGT\_KG

\* Weight is out of range (2-226).  
\* Please correct.

**Soft Edit:** ERR2\_CWGT\_KG

\* Please verify that the weight was entered correctly. Probe only if necessary.

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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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...  
an intellectual disability, also known as mental retardation?

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

**UniverseText:** Sample children <2

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

---

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

**QuestionText:** ?[F1]

\* Read if necessary.

Has a doctor or health professional ever told you that [fill: S.C. name] had...  
Any other developmental delay?

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

**UniverseText:** Sample children <2

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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**Question ID:** CHS.031\_04.010 **Instrument Variable Name:** ADD1\_2N **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

Does [fill: S.C. name] currently have an intellectual disability, also known as mental retardation?

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

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

**SkipInstructions:** <1,2,R,D> if ADD1\_3=1 [goto ADD1\_3N]; else [goto CONDL]

---

**Question ID:** CHS.031\_05.010 **Instrument Variable Name:** ADD1\_3N **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

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

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

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

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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

**QuestionText:** ?[F1]

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

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

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

**UniverseText:** Sample children 2-17

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

---

**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....

an intellectual disability, also known as mental retardation?

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

**UniverseText:** Sample children 2-17

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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**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 told you that [fill: S.C. name] had...

Autism, Asperger's disorder, pervasive developmental disorder, or autism spectrum disorder?

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

**UniverseText:** Sample children 2-17

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

---

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

**QuestionText:** ?[F1]

\* Read if necessary.

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

Any other developmental delay?

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

**UniverseText:** Sample children 2-17

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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**Question ID:** CHS.032\_04.010 **Instrument Variable Name:** ADD\_1N **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

Does {S.C. name} currently have 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 who have ever been told by a doctor or other health professional that they had Attention Deficit Hyperactivity Disorder (ADHD) or Attention Deficit Disorder (ADD)

**SkipInstructions:** <1,2,R,D> if ADD\_2=1 [go to ADD\_2N]; else if AUTISM=1 [goto AUTISMN] else if ADD\_3=1 [goto ADD\_3N]; else [goto CONDL]

---

**Question ID:** CHS.032\_05.010 **Instrument Variable Name:** ADD\_2N **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1] Does [fill: S.C. name] currently have an Intellectual disability, also known as mental retardation?

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

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

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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**Question ID:** CHS.032\_06.010 **Instrument Variable Name:** AUTISMN **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

Does [fill: S.C. name] currently have Autism, Asperger's disorder, pervasive developmental disorder, or autism spectrum disorder?

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

**UniverseText:** Sample children 2-17 who have ever been told by a doctor or other health professional that they had Autism, Asperger's Disorder, pervasive developmental disorder, or autism spectrum disorder

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

---

**Question ID:** CHS.032\_07.010 **Instrument Variable Name:** ADD\_3N **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

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

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

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

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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**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

**SkipInstructions:** <1> [goto CONDL1] <2,R,D> [goto CPOX]

---

**Question ID:** 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]

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**2017 NHIS Questionnaire - Sample Child****Child Health Status & Limitations**Document Version Date: 04-Jun-18

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

**QuestionText:** Has [fill: SC Name] EVER had chickenpox?

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

**UniverseText:** Sample children <18

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

---

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

**QuestionText:** Has [fill: SC 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]

---

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

**QuestionText:** ? [F1]

Has a doctor or other health professional EVER told you that [fill: SC name] had asthma?

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

**UniverseText:** Sample children <18

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

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**2017 NHIS Questionnaire - Sample Child****Child Health Status & Limitations****Document Version Date: 04-Jun-18**

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**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

**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: SC name]'s asthma DURING THE PAST 12 MONTHS.

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

- 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> [goto CASMERYR]

---

**Question ID:** CHS.100\_00.000 **Instrument Variable Name:** CASMERYR **QuestionnaireFileName:** Sample Child**QuestionText:** DURING THE PAST 12 MONTHS, did [fill1: SC name] have to visit an emergency room or urgent care center because of [fill2: his/her] asthma?

- 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> if AGE LE 2 [go to CCONDT1\_1];  
else [go to CCONDT\_1]

**2017 NHIS Questionnaire - Sample Child**

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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: SC name] had any of the following conditions...

Hay fever?

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

**UniverseText:** Sample children LE 2

**SkipInstructions:** <1,2,R,D> [go to 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: SC name] had any of the following conditions...

Any kind of respiratory allergy?

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

**UniverseText:** Sample children LE 2

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

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**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: SC name] had any of the following conditions...

Any kind of food or digestive allergy?

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

**UniverseText:** Sample children LE 2

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

---

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

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

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

Eczema or any kind of skin allergy?

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

**UniverseText:** Sample children LE 2

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

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**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: SC name] had any of the following conditions...

Frequent or repeated diarrhea or colitis?

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

**UniverseText:** Sample children LE 2

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

---

**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: SC name] had any of the following conditions...

Anemia?

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

**UniverseText:** Sample children LE 2

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

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**2017 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: SC 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: SC 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]

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**2017 NHIS Questionnaire - Sample Child**

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

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

Hay fever?

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

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

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

---

**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: SC name] had any of the following conditions...

Any kind of respiratory allergy?

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

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

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

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**2017 NHIS Questionnaire - Sample Child**

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**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: SC name] had any of the following conditions...

Any kind of food or digestive allergy?

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

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

**SkipInstructions:** <1,2,R,D> [go to 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: 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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**2017 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: SC name] had any of the following conditions...

Frequent or repeated diarrhea or colitis?

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

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

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

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

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

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**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

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

**SkipInstructions:** <1,2,R,D> [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

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

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

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

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

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

Seizures?

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

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

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

---

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

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

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

Stuttering or stammering?

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

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

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

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**2017 NHIS Questionnaire - Sample Child****Child Health Status & Limitations****Document Version Date: 04-Jun-18**

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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: SC name]'s health is now better, worse, or about the same?

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

**UniverseText:** Sample children < 18**SkipInstructions:** <1-3,R,D> [if AGE le <4> goto CCOLD2W; else goto SCHDAYR]

---

**Question ID:** CHS.220\_00.000 **Instrument Variable Name:** SCHDAYR **QuestionnaireFileName:** Sample Child**QuestionText:** DURING THE PAST 12 MONTHS about how many days did [fill2: SC name] miss school because of illness or injury?

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

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

**UniverseText:** Sample children 5-17**SkipInstructions:** <0-99,996,R,D> [goto CCOLD2W]  
<100-240> [go to ERR1\_SCHDAYR]  
<241-995> [goto ERR2\_SCHDAYR]**Hard Edit:** ERR2\_SCHDAYR\* "241-995" days not allowed in this field.  
\* Please correct.**Soft Edit:** ERR1\_SCHDAYR

[fill4: SCHDAYR] is an unusually large number. Did [fill2: SC name] miss [fill: SCHDAYR] days of school because of illness or injury?

\* Please verify.

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**2017 NHIS Questionnaire - Sample Child**

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

**QuestionText:** These next questions are about [fill: SC name]'s recent health DURING THE LAST 2 WEEKS.

Did [fill: SC name] have a head cold or chest cold that started DURING THE LAST 2 WEEKS?

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

**UniverseText:** Sample children <18

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

---

**Question ID:** CHS.240\_00.000 **Instrument Variable Name:** CINTIL2W **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

**SkipInstructions:** <1,2,R,D> [goto CHEARST1]

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**2017 NHIS Questionnaire - Sample Child**

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**Question ID:** CHS.250\_00.000 **Instrument Variable Name:** CHEARST1 **QuestionnaireFileName:** Sample Child

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

- 1 Excellent
- 2 Good
- 3 A little trouble hearing
- 4 Moderate trouble
- 5 A lot of trouble
- 6 Deaf
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <18

**SkipInstructions:** <1-6,R,D> [go to CVISION]

---

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

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

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

**UniverseText:** Sample children <18

**SkipInstructions:** <1> [goto CBLIND]  
<2,R,D> [if AGE <6 goto CVISTST;  
if AGE =6-17 goto CVISGLAS]

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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

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

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

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

**SkipInstructions:** <1> [if AGE <6 go to IHSPEQ;  
else if AGE = 6-17 go to CVISACT]  
<2,R,D> [if AGE <6 goto CVISTST;  
else if AGE = 6-17 goto CVISGLAS]

---

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

**QuestionText:** ?[F1]

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

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

**UniverseText:** Sample children <6 who is not blind

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

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**2017 NHIS Questionnaire - Sample Child****Child Health Status & Limitations****Document Version Date: 04-Jun-18**

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**Question ID:** CHS.270\_00.020 **Instrument Variable Name:** CVISLT **QuestionnaireFileName:** Sample Child**QuestionText:** When was [fill: his/her] vision last tested?

- 1 In the last 12 months
- 2 In the last 13-24 months
- 3 Over 24 months
- 7 Refused
- 9 Don't know

**UniverseText:** Sample children <6 ever had vision tested**SkipInstructions:** <1-3,R,D> [go to IHSPEQ]

---

**Question ID:** CHS.270\_00.025 **Instrument Variable Name:** CVISGLAS **QuestionnaireFileName:** Sample Child**QuestionText:** Does [fill: SC name] wear eyeglasses or contact lenses?

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

**UniverseText:** Sample children <18 who is not blind**SkipInstructions:** <1> [goto CVISDIST]  
<2,R,D> [go to CVISACT]

---

**Question ID:** CHS.270\_00.030 **Instrument Variable Name:** CVISDIST **QuestionnaireFileName:** Sample Child**QuestionText:** Does [fill: SC name] wear eyeglasses or contact lenses to read road and street signs, see the blackboard, play sports, watch TV, or see things in the distance?

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

**UniverseText:** Sample children <18 wear glasses or contact lenses**SkipInstructions:** <1,2,R,D> [go to CVISREAD]

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**2017 NHIS Questionnaire - Sample Child****Child Health Status & Limitations**Document Version Date: 04-Jun-18

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**Question ID:** CHS.270\_00.035 **Instrument Variable Name:** CVISREAD **QuestionnaireFileName:** Sample Child**QuestionText:** Does [fill: SC name] wear eyeglasses or contact lenses to read books, write, play hand-held games, or do other things that require [fill: him/her] to see well up close?

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

**UniverseText:** Sample children <18 wear glasses or contact lenses**SkipInstructions:** <1,2,R,D> [AGE GE 6 go to CVISACT;  
else go to IHSPEQ]

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**Question ID:** CHS.270\_00.040 **Instrument Variable Name:** CVISACT **QuestionnaireFileName:** Sample Child**QuestionText:** Does [fill: SC name] participate in sports, hobbies, or other activities that can cause eye injury? This includes activities such as baseball, basketball, soccer and mowing the lawn.

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

**UniverseText:** Sample children 6-17**SkipInstructions:** <1> [go to CVISPROT] <2,R,D> [go to IHSPEQ]

---

**Question ID:** CHS.270\_00.050 **Instrument Variable Name:** CVISPROT **QuestionnaireFileName:** Sample Child**QuestionText:** When doing these activities, on average, does [fill: he/she] wear eye protection always, most of the time, some of the time, or none of the time?

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

**UniverseText:** Sample children 6-17 participate in sports that cause eye injuries**SkipInstructions:** <1-4,R,D> [go to IHSPEQ]



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**2017 NHIS Questionnaire - Sample Child****Child Health Status & Limitations****Document Version Date: 04-Jun-18**

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**Question ID:** CHS.290\_00.000 **Instrument Variable Name:** IHSPEQ **QuestionnaireFileName:** Sample Child**QuestionText:** Does [fill1: SC name] have any impairment or health problem that requires [fill2: him/her] to use special equipment, such as a brace, a wheelchair, or a hearing aid (excluding ordinary eyeglasses or corrective shoes)?

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

**UniverseText:** Sample children <18**SkipInstructions:** <1,2,R,D> [goto IHMOB]

---

**Question ID:** CHS.300\_00.000 **Instrument Variable Name:** IHMOB **QuestionnaireFileName:** Sample Child**QuestionText:** Does [fill1: SC name] have an impairment or health problem that limits [fill2: his/her] ability to (crawl), walk, run, or

- 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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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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**Question ID:** CHS.311\_00.000 **Instrument Variable Name:** PROBRX **QuestionnaireFileName:** Sample Child

**QuestionText:** ?[F1]

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

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

**UniverseText:** Sample children <18

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

---

**Question ID:** CHS.312\_00.000 **Instrument Variable Name:** LEARNND **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

**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]

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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

**QuestionText:** (book) C3 ?[F1]

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

He:

Has been uncooperative?

- 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]

---

**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

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

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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**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 describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: SC name] DURING THE PAST TWO MONTHS.

He:

Has speech problems?

- 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]

---

**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 describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: SC name] DURING THE PAST TWO MONTHS.

He:

Has been unhappy, sad, or depressed?

- 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 CAU.CUSUALPL]

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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**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 describe children. For each one, tell me if it has been NOT TRUE, SOMETIMES TRUE, or OFTEN TRUE, of [fill: S.C. name] DURING THE PAST TWO MONTHS.

She:

Has temper tantrums or a hot temper?

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

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

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

---

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

**QuestionText:** (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

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

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Health Status & Limitations**

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

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

**QuestionText:** (book) C3 ?[F1]

\* Read if necessary.

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

She:

Has been nervous or high-strung?

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

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

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

---

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

**QuestionText:** (book) C3 ?[F1]

\* Read if necessary.

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

She:

Has been unhappy, sad, or depressed?

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

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

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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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]

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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**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]

---

**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 CPRVTRYR]; ELSE [goto CHCCHGYR]

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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**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 CPRVTRYR]

---

**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 CPRVTRYR]

---

**Question ID:** CAU.052\_00.010 **Instrument Variable Name:** CPRVTRYR **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, did you have any trouble finding a general doctor or provider who would see [fill: alias]?

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

**UniverseText:** Sample children <18

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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**Question ID:** CAU.053\_00.010 **Instrument Variable Name:** CPRVTRFD **QuestionnaireFileName:** Sample Child

**QuestionText:** Were you able to find a general doctor or provider who could see [fill: alias]?

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

**UniverseText:** Sample children <18 who had trouble finding a provider in the last year

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

---

**Question ID:** CAU.055\_00.010 **Instrument Variable Name:** CDRNANP **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, were you told by a doctor's office or clinic that they would not accept [fill: alias] as a new patient?

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

**UniverseText:** Sample children <18

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

---

**Question ID:** CAU.056\_00.010 **Instrument Variable Name:** CDRNAI **QuestionnaireFileName:** Sample Child

**QuestionText:** DURING THE PAST 12 MONTHS, were you told by a doctor's office or clinic that they did not accept [fill: alias]'s health care coverage?

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

**UniverseText:** Sample children <18

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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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]

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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**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]

---

**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]

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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

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

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

You didn't have transportation.

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

**UniverseText:** Sample children <18

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

---

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

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

Prescription medicines?

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

**UniverseText:** Sample children <2

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

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**2017 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**

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

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**Question ID:** CAU.133\_00.010 **Instrument Variable Name:** CHCAFYRN **QuestionnaireFileName:** Sample Child

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

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

To see a specialist?

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

**UniverseText:** Sample children <2

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

---

**Question ID:** CAU.133\_00.020 **Instrument Variable Name:** CHCAFYRF **QuestionnaireFileName:** Sample Child

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

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

Follow-up care?

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

**UniverseText:** Sample children <2

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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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]

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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

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

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

Dental care (including check-ups)?

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

**UniverseText:** Sample children GE 2

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

---

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

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

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

Eyeglasses?

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

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCAFYR1\_5]

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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**Question ID:** CAU.135\_05.010 **Instrument Variable Name:** CHCAFYR1\_5 **QuestionnaireFileName:** Sample Child

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

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

To see a specialist?

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

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCAFYR1\_6]

---

**Question ID:** CAU.135\_06.010 **Instrument Variable Name:** CHCAFYR1\_6 **QuestionnaireFileName:** Sample Child

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

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

Follow-up care?

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

**UniverseText:** Sample children GE 2

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

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**2017 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**

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

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**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, 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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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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

**QuestionText:** ?[F1]

\* Read if necessary.

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

A foot doctor?

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

**UniverseText:** Sample children <2

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

---

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

**QuestionText:** ?[F1]

\* Read if necessary.

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

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

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

**UniverseText:** Sample children <2

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

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**2017 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**

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

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

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

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

A nurse practitioner, physician assistant or midwife?

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

**UniverseText:** Sample children <2

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

---

**Question ID:** CAU.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

**UniverseText:** Sample children GE 2

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

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**2017 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**

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

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

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

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

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

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

**UniverseText:** Sample children GE 2

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

---

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

**QuestionText:** ?[F1]

\* Read if necessary.

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

A foot doctor?

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

**UniverseText:** Sample children GE 2

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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

**QuestionText:** ?[F1]

Read if necessary.

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

A chiropractor?

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

**UniverseText:** Sample children GE 2

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

---

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

**QuestionText:** ?[F1]

\* Read if necessary.

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

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

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

**UniverseText:** Sample children GE 2

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

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**2017 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**

Document Version Date: 04-Jun-18

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

**QuestionText:** ?[F1]

\* Read if necessary.

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

A 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\_1]

---

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

**QuestionText:** ?[F1]

DURING THE PAST 12 MONTHS, have you seen or talked to a doctor who specializes in women's health (an obstetrician/gynecologist) about [fill2: alias]'s health?

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

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

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

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---

**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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

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

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

**UniverseText:** Sample children <18

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

---

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

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

DURING THE PAST 12 MONTHS, have you seen or talked to the following about [fill2: alias]'s health?

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

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

**UniverseText:** Sample children <18

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

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**2017 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**

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

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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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**2017 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**

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

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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,R,D> [goto CHCHYR] <1-8> [goto CERVISND]

---

**Question ID:** CAU.281\_00.010 **Instrument Variable Name:** CERVISND **QuestionnaireFileName:** Sample Child

**QuestionText:** Thinking about [fill: S.C. name]'s most recent emergency room visit, did [fill: he/she ] go to the emergency room either at night or on the weekend?

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

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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**Question ID:** CAU.282\_00.010 **Instrument Variable Name:** CERHOS **QuestionnaireFileName:** Sample Child

**QuestionText:** Did this emergency room visit result in a hospital admission?

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

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [go to CERREAS1]

---

**Question ID:** CAU.283\_01.010 **Instrument Variable Name:** CERREAS1 **QuestionnaireFileName:** Sample Child

**QuestionText:** Tell me which of these apply to [fill: alias]'s last emergency room visit?

... [fill: He/She] didn't have another place to go

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

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS2]

---

**Question ID:** CAU.283\_02.020 **Instrument Variable Name:** CERREAS2 **QuestionnaireFileName:** Sample Child

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

Tell me which of these apply to [fill: alias]'s last emergency room visit?

... [fill: alias]'s doctor's office or clinic was not open

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

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS3]

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**2017 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**

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

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**Question ID:** CAU.283\_03.030 **Instrument Variable Name:** CERREAS3 **QuestionnaireFileName:** Sample Child

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

Tell me which of these apply to [fill: alias]'s last emergency room visit?

... [fill: alias]'s health provider advised that [fill: he/she] go

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

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS4]

---

**Question ID:** CAU.283\_04.040 **Instrument Variable Name:** CERREAS4 **QuestionnaireFileName:** Sample Child

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

Tell me which of these apply to [fill: alias]'s last emergency room visit?

... The problem was too serious for the doctor's office or clinic

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

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS5]

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**2017 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**

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

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**Question ID:** CAU.283\_05.050 **Instrument Variable Name:** CERREAS5 **QuestionnaireFileName:** Sample Child

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

Tell me which of these apply to [fill: alias]'s last emergency room visit?

... Only a hospital could help [fill: alias]

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

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS6]

---

**Question ID:** CAU.283\_06.060 **Instrument Variable Name:** CERREAS6 **QuestionnaireFileName:** Sample Child

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

Tell me which of these apply to [fill: alias]'s last emergency room visit?

... The emergency room is [fill: alias]'s closest provider

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

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS7]

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**2017 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**

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

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**Question ID:** CAU.283\_07.070 **Instrument Variable Name:** CERREAS7 **QuestionnaireFileName:** Sample Child

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

Tell me which of these apply to [fill: alias]'s last emergency room visit?

...[fill: alias] gets most of [fill: his/her] care at the emergency room

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

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

**SkipInstructions:** <1,2,R,D> [goto CERREAS8]

---

**Question ID:** CAU.283\_08.080 **Instrument Variable Name:** CERREAS8 **QuestionnaireFileName:** Sample Child

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

Tell me which of these apply to [fill: alias]'s last emergency room visit?

...[fill: alias] arrived by ambulance or other emergency vehicle

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

**UniverseText:** Sample children <18 who had at least one ER visit in the past year

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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**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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**2017 NHIS Questionnaire - Sample Child**  
**Child Access to Health Care & Utilization**

Document Version Date: 04-Jun-18

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**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 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 ?[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

**UniverseText:** Sample children <18

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

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

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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]**Soft Edit:** ERR\_CMDLONG

[fill2: CSRGNOYR] is an unusually large number. Did [fill1: alias] have [fill2: CSRGNOYR] surgical procedures?

\*Please verify.

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**2017 NHIS Questionnaire - Sample Child**

**Child Access to Health Care & Utilization**

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

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**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, D, R> [if AGE=4-17 goto CMHCOPY; else goto CH1N1\_1]

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**2017 NHIS Questionnaire - Sample Child**  
**Child Mental Health Brief Questionnaire**

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

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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.

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

**UniverseText:** Sample children GE 4

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Mental Health Brief Questionnaire**

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

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**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.

- 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]

---

**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.

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

**UniverseText:** Sample children GE 4

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Mental Health Brief Questionnaire**

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

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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].

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

**UniverseText:** Sample children GE 4

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

---

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

**QuestionText:** (book) C7

\* Read if necessary.

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

[fill2: He/She]

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

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

**UniverseText:** Sample children GE 4

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Mental Health Brief Questionnaire**

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

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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 next section]

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**2017 NHIS Questionnaire - Sample Child**

**Child Influenza Immunization**

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

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**Question ID:** CFI.005\_00.010    **Instrument Variable Name:** CH1N1\_1    **QuestionnaireFileName:** Sample Child

**QuestionText:**    ?[F1]

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

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

**UniverseText:**        Sample Child LE 17 years

**SkipInstructions:**    <1> [goto CH1N1\_2]  
                         <2,R,D> [goto next section]

---

**Question ID:** CFI.005\_00.020    **Instrument Variable Name:** CH1N1\_2    **QuestionnaireFileName:** Sample Child

**QuestionText:**        How many vaccinations has {S.C. name} received?

- 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

**SkipInstructions:**    <1,2> [goto CH1N1\_3M]  
                         <R,D> [goto next section]

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**2017 NHIS Questionnaire - Sample Child**
**Child Influenza Immunization**
**Document Version Date: 05-Jun-18**


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**Question ID:** CFI.005\_00.030 **Instrument Variable Name:** CH1N1\_3M **QuestionnaireFileName:** Sample Child

**QuestionText:** 1 of 2

During what month and year did {S.C. name} receive {fill: his/her} most recent flu vaccine?

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

**UniverseText:** Sample Child LE 17 who have had one or more vaccine doses

**SkipInstructions:** <1-12,D> [ goto CH1N1\_4Y] <R> [goto CH1N1\_5]

---

**Question ID:** CFI.005\_00.040 **Instrument Variable Name:** CH1N1\_4Y **QuestionnaireFileName:** Sample Child

**QuestionText:** 2 of 2

\*Enter year of most recent flu vaccine.

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

**UniverseText:** Sample Child LE 17 years who have had one or more vaccine doses and gave month/don't know month of vaccine dose

**SkipInstructions:** <valid year,R,D> [goto CH1N1\_5]  
 [If CH1N1\_3M and CH1N1\_4Y = a future date] goto ERR1\_ CH1N1\_4Y  
 [If CH1N1\_3M and CH1N1\_4Y = a date prior to birth] goto ERR2\_ CH1N1\_4Y  
 [If CH1N1\_3M and CH1N1\_4Y = a date prior to 12 months ago] goto ERR3\_ CH1N1\_4Y]

**Hard Edit:** ERR1\_ CH1N1\_4Y  
 \*Future date invalid.

 ERR2\_ CH1N1\_4Y  
 \*Date before birth.

 ERR3\_ CH1N1\_4Y  
 \*Date before 12 months ago.



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**2017 NHIS Questionnaire - Sample Child**

**Child Influenza Immunization**

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

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**Question ID:** CFI.005\_00.050 **Instrument Variable Name:** CH1N1\_5 **QuestionnaireFileName:** Sample Child

**QuestionText:** Was this a shot, or was it a vaccine sprayed in the nose?

\*Read if necessary: The flu nasal spray is called FluMist(trademark).

- 1 Flu shot
- 2 Flu nasal spray (spray, mist or drop in nose)
- 7 Refused
- 9 Don't know

**UniverseText:** Sample Child LE 17 years who have had one or more vaccine doses

**SkipInstructions:** <1-2,R,D> IF CH1N1\_2=1 [goto next section]; else if CH1N1\_2=2 [goto CH1N1\_6M]

---

**Question ID:** CFI.005\_00.060 **Instrument Variable Name:** CH1N1\_6M **QuestionnaireFileName:** Sample Child

**QuestionText:** 1 of 2

During what month and year did {S.C. name} receive {fill: his/her} next most recent flu vaccine?

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

**UniverseText:** Sample Child LE 17 years who have had more than one vaccine doses

**SkipInstructions:** <1-12,D> [ goto CH1N1\_7Y] <R> [goto CH1N1\_8]

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**2017 NHIS Questionnaire - Sample Child**

**Child Influenza Immunization**

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

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**Question ID:** CFI.005\_00.070 **Instrument Variable Name:** CH1N1\_7Y **QuestionnaireFileName:** Sample Child

**QuestionText:** 2 of 2

\*Enter year of next most recent flu vaccine.

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

**UniverseText:** Sample Child LE 17 years who have had more than one vaccine doses and gave month/don't know month of vaccine dose

**SkipInstructions:** <valid year,R,D> [goto CH1N1\_8]  
[If CH1N1\_6M and CH1N1\_7Y = a future date] goto ERR1\_ CH1N1\_7Y]  
[If CH1N1\_6M and CH1N1\_7Y = a date prior to birth] goto ERR2\_ CH1N1\_7Y]  
[If CH1N1\_6M and CH1N1\_7Y = a date prior to 12 months ago] goto ERR3\_ CH1N1\_7Y]

**Hard Edit:** ERR1\_ CH1N1\_7Y  
\*Future date invalid.

ERR2\_ CH1N1\_7Y  
\*Date before birth.

ERR3\_ CH1N1\_7Y  
\*Date before 12 months ago.

---

**Question ID:** CFI.005\_00.080 **Instrument Variable Name:** CH1N1\_8 **QuestionnaireFileName:** Sample Child

**QuestionText:** Was this a shot, or was it a vaccine sprayed in the nose?

\*Read if necessary: The flu nasal spray is called FluMist(trademark).

<b>1</b>	Flu shot
<b>2</b>	Flu nasal spray (spray, mist or drop in nose)
<b>7</b>	Refused
<b>9</b>	Don't know

**UniverseText:** Sample Child LE 17 years who have more than one vaccine dose

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

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**2017 NHIS Questionnaire - Sample Child**

**Child Complementary Health**

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

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**Question ID:** CCH.010\_00.000 **Instrument Variable Name:** CNAT\_USM **QuestionnaireFileName:** Sample Child

**QuestionText:** ? [F1]

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

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

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

**UniverseText:** Sample children 4+

**SkipInstructions:** <1,2,R,D> [goto CCHE\_USM]

---

**Question ID:** CCH.020\_00.000 **Instrument Variable Name:** CCHE\_USM **QuestionnaireFileName:** Sample Child

**QuestionText:** ? [F1]

\* Read if necessary: DURING THE PAST 12 MONTHS

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

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

**UniverseText:** Sample children 4+

**SkipInstructions:** <1,2,R,D> [goto CTRD\_USM]

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**2017 NHIS Questionnaire - Sample Child**

**Child Complementary Health**

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

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**Question ID:** CCH.030\_00.000 **Instrument Variable Name:** CTRD\_USM **QuestionnaireFileName:** Sample Child

**QuestionText:** ? [F1]

\* Read if necessary: DURING THE PAST 12 MONTHS

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

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

**UniverseText:** Sample children 4+

**SkipInstructions:** <1> [goto CTRD\_US1]  
<2,R,D> [goto CHOM\_USM]

---

**Question ID:** CCH.040\_00.000 **Instrument Variable Name:** CTRD\_US1 **QuestionnaireFileName:** Sample Child

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

\* Enter all that apply, separate with commas.

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

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

**SkipInstructions:** <1-6,R,D> [goto CHOM\_USM]

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**2017 NHIS Questionnaire - Sample Child**

**Child Complementary Health**

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

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**Question ID:** CCH.050\_00.000 **Instrument Variable Name:** CHOM\_USM **QuestionnaireFileName:** Sample Child

**QuestionText:** ? [F1]

Practitioners of homeopathy (ho-mee-AH-puh-thee) recommend small pills or drops that are often placed under the tongue to treat health problems.

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

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

**UniverseText:** Sample children 4+

**SkipInstructions:** <1,2,R,D> [goto CMBOU\_MN]

---

**Question ID:** CCH.060\_00.000 **Instrument Variable Name:** CMBOU\_MN **QuestionnaireFileName:** Sample Child

**QuestionText:** ? [F1]

DURING THE PAST 12 MONTHS, did {fill1: S.C. name} use

... Mantra Meditation, including Transcendental Meditation®, Relaxation Response, and Clinically Standardized Meditation?

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

**UniverseText:** Sample children 4+

**SkipInstructions:** <1,2,R,D> [goto CMBOU\_MD]

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**2017 NHIS Questionnaire - Sample Child**

**Child Complementary Health**

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

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**Question ID:** CCH.070\_00.000 **Instrument Variable Name:** CMBOU\_MD **QuestionnaireFileName:** Sample Child

**QuestionText:** ? [F1]

\* Read if necessary: DURING THE PAST 12 MONTHS, did {fill1: S.C. name} use

... Mindfulness meditation, including Vipassana (vih-PAS-sah-nah), Zen Buddhist meditation, Mindfulness-based Stress Reduction, and Mindfulness-based Cognitive Therapy?

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

**UniverseText:** Sample children 4+

**SkipInstructions:** <1,2,R,D> [goto CMBOU\_SP]

---

**Question ID:** CCH.080\_00.000 **Instrument Variable Name:** CMBOU\_SP **QuestionnaireFileName:** Sample Child

**QuestionText:** ? [F1]

\* Read if necessary: DURING THE PAST 12 MONTHS, did {fill1: S.C. name} use

... Spiritual meditation including Centering Prayer and Contemplative Meditation?

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

**UniverseText:** Sample children 4+

**SkipInstructions:** <1,2,R,D> [goto CMBOU\_IM]

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**2017 NHIS Questionnaire - Sample Child**

**Child Complementary Health**

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

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

**QuestionText:** ? [F1]

\* Read if necessary: DURING THE PAST 12 MONTHS, did {fill1: S.C. name} use

... Guided imagery

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

**UniverseText:** Sample children 4+

**SkipInstructions:** <1,2,R,D> [goto CMBOU\_PR]

---

**Question ID:** CCH.100\_00.000 **Instrument Variable Name:** CMBOU\_PR **QuestionnaireFileName:** Sample Child

**QuestionText:** ? [F1]

\* Read if necessary: DURING THE PAST 12 MONTHS, did {fill1: S.C. name} use

... Progressive relaxation?

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

**UniverseText:** Sample children 4+

**SkipInstructions:** <1,2,R,D> [goto CYTQU\_YG]

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**2017 NHIS Questionnaire - Sample Child**

**Child Complementary Health**

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

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**Question ID:** CCH.110\_00.000 **Instrument Variable Name:** CYTQU\_YG **QuestionnaireFileName:** Sample Child

**QuestionText:** ? [F1]

DURING THE PAST 12 MONTHS, did {fill1: S.C. name} practice Yoga for {fill2: himself/herself}?

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

**UniverseText:** Sample children 4+

**SkipInstructions:** <1> [goto CYTQ\_BTY]  
<2,R,D> [goto CYTQU\_TA]

---

**Question ID:** CCH.120\_00.000 **Instrument Variable Name:** CYTQ\_BTY **QuestionnaireFileName:** Sample Child

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

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

**UniverseText:** Sample children 4+ who have practiced Yoga in the past 12 months

**SkipInstructions:** <1,2,R,D> [goto CYTQ\_MDY]

---

**Question ID:** CCH.130\_00.000 **Instrument Variable Name:** CYTQ\_MDY **QuestionnaireFileName:** Sample Child

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

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

**UniverseText:** Sample children 4+ who have practiced Yoga in the past 12 months

**SkipInstructions:** <1,2,R,D> [goto CYTQU\_TA]

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**2017 NHIS Questionnaire - Sample Child**

**Child Complementary Health**

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

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**Question ID:** CCH.140\_00.000 **Instrument Variable Name:** CYTQU\_TA **QuestionnaireFileName:** Sample Child

**QuestionText:** ? [F1]

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

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

**UniverseText:** Sample children 4+

**SkipInstructions:** <1> [goto CYTQ\_BTT]  
<2,R,D> [goto CYTQU\_QG]

---

**Question ID:** CCH.150\_00.000 **Instrument Variable Name:** CYTQ\_BTT **QuestionnaireFileName:** Sample Child

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

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

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

**SkipInstructions:** <1,2,R,D> [goto CYTQ\_MDT]

---

**Question ID:** CCH.160\_00.000 **Instrument Variable Name:** CYTQ\_MDT **QuestionnaireFileName:** Sample Child

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

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

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

**SkipInstructions:** <1,2,R,D> [goto CYTQU\_QG]

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**2017 NHIS Questionnaire - Sample Child**

**Child Complementary Health**

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

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**Question ID:** CCH.170\_00.000 **Instrument Variable Name:** CYTQU\_QG **QuestionnaireFileName:** Sample Child

**QuestionText:** ? [F1]

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

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

**UniverseText:** Sample children 4+

**SkipInstructions:** <1> [goto CYTQ\_BTQ]  
<2,R,D> [goto next section]

---

**Question ID:** CCH.180\_00.000 **Instrument Variable Name:** CYTQ\_BTQ **QuestionnaireFileName:** Sample Child

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

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

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

**SkipInstructions:** <1,2,R,D> [goto CYTQ\_MDQ]

---

**Question ID:** CCH.190\_00.000 **Instrument Variable Name:** CYTQ\_MDQ **QuestionnaireFileName:** Sample Child

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

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

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

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

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