

**TIC**

<b>START NEW CARD DUP COL 1 - 10</b>	
MOD.	<u>B</u> <u>3</u> [11 - 12]
CARD NO.	<u>0</u> <u>1</u> [13 - 14] <u>b</u> [15]

1. Now I would like to ask you about muscle jerks or twitches, called tics, which people sometimes make. I'm talking about movements that a person can't keep from doing, like ...

blinking their eyes like this [DEMONSTRATE UNILATERAL EYE BLINK] ...

or making other movements of the face like this [DEMONSTRATE MOUTH TWITCH] ...

or shrugging their shoulders [DEMONSTRATE] ...

or jerking their heads ...

or suddenly moving their arms or twisting their bodies.

In the last year – that is, since [[NAME EVENT]/[NAME CURRENT MONTH] of last year] – has \_\_\_\_\_ had any tics or movements that it seemed like [he/she] had to make? 0      2      7      9      [16]

**IF YES, A.** Please tell me about this. Can you show me the kind of movements [he/she] made? **(DESCRIBE:)**

\_\_\_\_\_ | \_\_\_\_ |      [17-18]  
 \_\_\_\_\_

<p><b>NOTE 1: WAS MORE THAN ONE TIC DESCRIBED IN Q 1A?</b></p> <p><b>IF YES: GO TO D</b> <b>IF NO: CONTINUE</b></p>	<p>0      2      [19]</p>
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B. Has [he/she] had any other tics or movements? 0      2      7      9      [20]

**IF YES, C.** Can you show me those other tics or movements? **(DESCRIBE:)**

\_\_\_\_\_ | \_\_\_\_ |      [21-22]  
 \_\_\_\_\_

D. Was there ever a time in the last year when [he/she] had these tics or movements many times a day? 0      2      7      9      [23]

**IF NO, GO TO Q 2**

E. In the last year, when [he/she] has had these tics or movements, have they happened almost every day? 0      2\*      7      9      [24]

F. Has [he/she] had these tics or movements for more than a year? 0      [2]      7      9      [25]

**IF NO, G.** In the last year, has [he/she] had these tics or movements for four weeks or longer? 0      [2]      7      9      [26]

- H. During the last year, was there a time [he/she] didn't have these tics or movements for three months in a row or longer? 0 2 7 9 [27]
- IF NO,** I. During the last year, has [he/she] gone as long as two months without these tics or movements? 0 2 7 9 [28]
- J. Now what about the last four weeks? 0 2 7 9 [29]  
 Since [[NAME EVENT]]//the beginning of/the middle of/the end of [LAST MONTH]], has [he/she] had these tics or movements?

2. I have just been asking you about whether [he/she] has had sudden movements that [he/she] couldn't stop [himself/herself] from making.

Sometimes people feel they can't stop themselves from making sounds or noises in the same way. I don't mean burping or sneezing or coughing. They suddenly feel they have to make a noise or say a word ... they don't want to make these noises, but they can't stop themselves.

In the last year – that is, since [[NAME EVENT]]/[NAME CURRENT MONTH] of last year] – has [he/she] often made noises or sounds or words in that way? 0 2 7 9 [30]

**IF YES,** A. Please tell me about this. What [noises/words] did [he/she] [make/say]? (**DESCRIBE:**)

\_\_\_\_\_ |\_\_\_\_\_| [31-32]  
 \_\_\_\_\_

B. Was there ever a time in the last year when [he/she] made these noises or said these words many times a day? 0 2 7 9 [33]

**IF NO, GO TO INSTRUCTION BOX "a"**

C. In the last year, when [he/she] made these noises or said these words did [he/she] do this almost every day? 0 **2\*** 7 9 [34]

D. Has [he/she] been making these noises or saying these words for more than a year? 0 **[2]** 7 9 [35]

**IF NO,** E. In the last year, has [he/she] made these noises or said these words for four weeks or longer? 0 **[2]** 7 9 [36]

F. During the last year, has [he/she] ever gone without making these noises or saying these words for three months in a row or longer? 0 2 7 9 [37]

**IF NO,** G. During the last year, has [he/she] gone as long as two months without making these noises or saying these words? 0 2 7 9 [38]

H. Now what about the last four weeks? 0 2 7 9 [39]  
 Since [[NAME EVENT]]//the beginning of/the middle of/the end of [LAST MONTH]], has [he/she] made these noises or said these words?

**a: IF A \* OR [ ] RESPONSE WAS CODED IN Q 1 - 2 CONTINUE**  
**ALL OTHERS, GO TO Q 13, P. 43**

3. You said that in the last year [he/she] [had tics or movements [he/she] seemed to have to make/made noises or said words [he/she] didn't want to ].

How old was [he/she] the first time [he/she] did [this/any of these things]?

CODE AGE (66 = WHOLE LIFE, ALWAYS) -----> | \_\_\_\_ \_\_\_\_ | YRS. [40-41]

IF AGE NOT KNOWN, ASK: What grade was [he/she] in?

CODE GRADE -----> | \_\_\_\_ \_\_\_\_ | GRADE [42-43]

(44 = PRE-K, 55 = KINDERGARTEN, 13 = COLLEGE FRESHMAN, 14 = SOPHOMORE, 15 = JUNIOR, 16 = SENIOR, 17 = POST B.A.)

b: IF [AGE/GRADE] GIVEN WAS CHILD'S CURRENT [AGE/GRADE], GO TO Q 4

IF [AGE/GRADE] GIVEN WAS CHILD'S CURRENT [AGE/GRADE] MINUS ONE, GO TO A

ALL OTHERS, GO TO B

A. Was that more than a year ago – that is, before [[NAME EVENT]/ [NAME CURRENT MONTH] of last year]? 0 2 7 9 [44]

**IF NO, GO TO Q 4**

B. Since that first time, was there ever a time when [he/she] did not [have tics or movements [he/she] seemed to have to make/make these noises or say these words [he/she] didn't want to]? 0 2 7 9 [45]

**IF NO, GO TO Q 4**

C. Did that time when [he/she] didn't [have these tics or movements [he/she] seemed to have to make/make these noises or say these words [he/she] didn't want to] last for two months or more? 0 2 7 9 [46]

**IF NO, GO TO Q 4**

D. You said that [he/she] [had tics or movements [he/she] seemed to have to make/made noises or said words [he/she] didn't want to] in the last year.

How old was [he/she] when [having tics or movements [he/she] seemed to have to make/making noises or saying words [he/she] didn't want to] began this time?

CODE AGE (88 = NEVER STARTED AGAIN) -----> | \_\_\_\_ \_\_\_\_ | YRS. [47-48]

IF AGE NOT KNOWN, ASK: What grade was [he/she] in?

CODE GRADE: (44 = PRE-K, 55 = KINDERGARTEN, 13 = COLLEGE FRESHMAN, 14 = SOPHOMORE, 15 = JUNIOR, 16 = SENIOR, 17 = POST B.A. 88 = NEVER STARTED AGAIN) -----> | \_\_\_\_ \_\_\_\_ | GRADE [49-50]

c: IF [AGE/GRADE] GIVEN WAS CHILD'S CURRENT [AGE/GRADE] MINUS ONE, GO TO E

ALL OTHERS, GO TO Q 4

E. Did [he/she] start to [have these tics or movements [he/she] seemed to have to make/make these noises or say these words [he/she] didn't want to] again more than a year ago – that is, before [[NAME EVENT]/[NAME CURRENT MONTH] of last year]? 0 2 7 9 [51]

4. You said that in the last year \_\_\_\_\_ [had tics or movements [he/she] seemed to have to make/made noises or said words [he/she] didn't want to].

Now I'd like you to think back to the time in the last year when [having these tics or movements/making these noises or saying these words] caused the most problems.

At that time, did [you (or [his/her] [CARETAKERS])/[his/her] [CARETAKERS]] get annoyed or upset with \_\_\_\_\_ because [he/she] was [having these tics or movements/making these noises or saying these words]? 0 1 2 7 9 [52]

**IF YES, A.** How often did [you (or [his/her] [CARETAKERS])/[his/her] [CARETAKERS]] get annoyed or upset with [him/her] because of this? Would you say: a lot of the time, some of the time, or hardly ever?

- A lot of the time ..... 3 [53]
- Some of the time ..... 2
- Hardly ever ..... 1
- Refuse to answer ..... 7
- Don't know ..... 9

5. At that time, did [having these tics or movements/making these noises or saying these words] keep \_\_\_\_\_ from doing things or going places with [you or [his/her] family/[his/her] family]? 0 1 2 7 9 [54]

**IF YES, A.** How often did this keep [him/her] from doing things or going places with [you or his/her family/his/her family]? Would you say: a lot of the time, some of the time, or hardly ever?

- A lot of the time ..... 3 [55]
- Some of the time ..... 2
- Hardly ever ..... 1
- Refuse to answer ..... 7
- Don't know ..... 9

6. At that time, did [having these tics or movements/making these noises or saying these words] keep [him/her] from doing things or going places with other [children/people [his/her] age]? 0 1 2 7 9 [56]

**IF YES, A.** How often did this keep [him/her] from doing things or going places with other [children/people [his/her] age]? Would you say: a lot of the time, some of the time, or hardly ever?

- A lot of the time ..... 3 [57]
- Some of the time ..... 2
- Hardly ever ..... 1
- Refuse to answer ..... 7
- Don't know ..... 9

**d: IF CHILD DID NOT ATTEND SCHOOL OR WORK IN LAST YEAR, CODE "8" IN Q 7 AND Q 8, THEN GO TO Q 9**

7. When the problems were worst, did [having these tics or movements/making these noises or saying these words][make it difficult for \_\_\_\_\_ to do [his/her] schoolwork or cause problems with [his/her] grades/make it difficult for \_\_\_\_\_ to do [his/her] work]? 0 1 2 7 8 9 [58]

**IF YES, A.** How bad were the problems [he/she] had with [his/her] [schoolwork/work] because of this? Would you say: very bad, bad, or not too bad?

- Very bad ..... 3 [59]
- Bad ..... 2
- Not too bad ..... 1
- Refuse to answer ..... 7
- Don't know ..... 9

8. At that time, did [having these tics or movements/making these noises or saying these words] cause \_\_\_\_\_'s [teachers/boss] to be annoyed or upset with [him/her]? 0 1 2 7 8 9 [60]

**IF YES, A.** How often [were/was] [his/her] [teachers/boss] annoyed or upset with [him/her] because of this? Would you say: a lot of the time, some of the time, or hardly ever?

- A lot of the time ..... 3 [61]
- Some of the time ..... 2
- Hardly ever ..... 1
- Refuse to answer ..... 7
- Don't know ..... 9

9. When the problems were worst, did it seem like [having these tics or movements/making these noises or saying these words] made [him/her] feel bad or made [him/her] feel upset? 0 1 2 7 9 [62]

**IF YES, A.** How bad did this seem to make [him/her] feel? Would you say: very bad, bad, or not too bad?

- Very bad ..... 3 [63]
- Bad ..... 2
- Not too bad ..... 1
- Refuse to answer ..... 7
- Don't know ..... 9

10. In the last year – that is, since [[NAME EVENT]/[NAME CURRENT MONTH] of last year] – has \_\_\_\_\_ been to see someone at a hospital or a clinic or at their office because [he/she] [had tics or movements/made these noises or said these words]? 0 2 7 9 [64]

**IF YES, GO TO OPTIONAL DETAILS, NEXT PAGE**

**IF NO, A.** Does [he/she] have an appointment set up to see someone because of this? 0 2 7 9 [65]

**IF YES, GO TO OPTIONAL DETAILS, NEXT PAGE**

**OPTIONAL DETAILS:**

11. Who [did \_\_\_\_\_ see/is \_\_\_\_\_ going to see]? (**WRITE IN:**)

Name: \_\_\_\_\_ [66-67]

Profession: \_\_\_\_\_

Address: \_\_\_\_\_

**A. IF SOMEONE WAS SEEN, ASK:**

What did the person [he/she] saw say was the matter?

\_\_\_\_\_ [68-69]

\_\_\_\_\_

\_\_\_\_\_

12. In the last year – that is, since [[NAME EVENT]/[NAME CURRENT MONTH] of last year] – has [he/she] taken any medicine for tics or Tourette’s syndrome? 0 2 7 9 [70]

**IF YES, A.** What is the name of the medicine?  
(**LIST ALL MEDICATIONS:**)

\_\_\_\_\_ [71-72]

**e:** If ANY [ ] RESPONSES WERE CODED IN Q 1 - 2  
(see tally sheet), GO TO PICA, P. 45

**ALL OTHERS, CONTINUE**

**START NEW CARD  
DUP COL 1 - 12**

CARD NO. 0 2 [13-14]  
                  b [15]

**Whole Life Screen**

13. Now I want you to think about [his/her] whole life, back to when [he/she] turned five years old (*INTERVIEWER: point out age five on whole life chart*).

Was there ever a time when [he/she] did the things I just asked you about ... things like having tics or jerky movements that [he/she] couldn't keep from doing ... or making certain noises that [he/she] didn't want to make ... or saying words that [he/she] didn't really want to say? 0 2 7 9 [16]

**IF YES, A.** I want to ask you some questions about that time. Can you remember what [he/she] did? Can you show me now? (**DESCRIBE**):

\_\_\_\_\_ |\_\_\_\_\_| [17-18]  
 \_\_\_\_\_

B. Did [he/she] make these tics or movements or noises several times a day, most days? 0 2 7 9 [19]

**IF YES, C.** Did [he/she] make these tics or movements or noises for four weeks or longer? 0 2 7 9 [20]

**IF YES, D.** Did making these tics or movements or noises cause any serious problems for [him/her] at home, at school, or with [his/her] friends? 0 2 7 9 [21]

E. Did making these tics or movements or noises seem to make [him/her] really unhappy or bother [him/her] a lot? 0 2 7 9 [22]

F. Did [he/she] ever see a doctor, counselor, or some other person like that because [he/she] made these tics or movements or noises? 0 2 7 9 [23]

G. How old was [he/she] when [he/she] first started to make these tics or movements or noises?

**CODE AGE ----->** |\_\_\_\_\_| YRS. [24-25]

**IF AGE NOT KNOWN, ASK:**  
 What grade was [he/she] in?  
**CODE GRADE (44 = PRE-K, 55 = KINDERGARTEN, 13 = COLLEGE FRESHMAN, 14 = SOPHOMORE, 15 = JUNIOR, 16 = SENIOR, 17 = POST B.A.) ---->** |\_\_\_\_\_| GRADE [26-27]

H. When [he/she] stopped doing this, how old was [he/she] then?

**CODE AGE ----->** |\_\_\_\_\_| YRS. [28-29]

**IF AGE NOT KNOWN, ASK:**  
 What grade was [he/she] in?  
**CODE GRADE (44 = PRE-K, 55 = KINDERGARTEN, 13 = COLLEGE FRESHMAN, 14 = SOPHOMORE, 15 = JUNIOR, 16 = SENIOR, 17 = POST B.A.) ---->** |\_\_\_\_\_| GRADE [30-31]

**INTENTIONALLY LEFT BLANK**