# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization

**Document Version Date: 05-May-09**

**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]

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**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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**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]

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

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

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

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

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

**SkipInstructions:** <0-6,R,D> [ if CUSUALPL=2,R,D goto CHCDLYR_1; else goto CHCCHGYR]

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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 CHCDLYR1_1]

---

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

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

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

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

**SkipInstructions:** <1,2,R,D> [goto CHCDLYR1_1]

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

**Question ID:** CAU.080_01.000 **Instrument Variable Name:** CHCDLYR1_1 **QuestionnaireFileName:** Sample Child

**QuestionText:**

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

You couldn't get through on the telephone.

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

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CHCDLYR1_2]

**Question ID:** CAU.080_02.000 **Instrument Variable Name:** CHCDLYR1_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

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

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

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CHCDLYR1_3]

**Question ID:** CAU.080_03.000 **Instrument Variable Name:** CHCDLYR1_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

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

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

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CHCDLYR1_4]

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

**Question ID:** CAU.080_04.000 **Instrument Variable Name:** CHCDLYR1_4 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

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

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

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CHCDLYR1_5]

**Question ID:** CAU.080_05.000 **Instrument Variable Name:** CHCDLYR1_5 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

You didn’t have transportation.

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

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [if AGE GE <2> goto CHCAFYR1_1; else goto CHCAFYR]

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

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

Prescription medicines?

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

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [if AGE <1 goto CHCSYR1_2; else goto CDENLONG]

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

**Question ID:** CAU.135_01.000 **Instrument Variable Name:** CHCAFYR1_1 **QuestionnaireFileName:** Sample Child

**QuestionText:**

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

Prescription medicines?

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

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCAFYR1_2]

**Question ID:** CAU.135_02.000 **Instrument Variable Name:** CHCAFYR1_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

Mental health care or counseling?

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

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCAFYR1_3]

**Question ID:** CAU.135_03.000 **Instrument Variable Name:** CHCAFYR1_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

Dental care (including check-ups)?

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

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCAFYR1_4]

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

**Question ID:** CAU.135_04.000 **Instrument Variable Name:** CHCAFYR1_4 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

Eyeglasses?

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

**UniverseText:** Sample children GE 2

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

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

**QuestionText:** (book) C4

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

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

**UniverseText:** Sample children GE 1

**SkipInstructions:** <0-5,R,D> [if AGE GE <2> goto CHCSYR_1; else go to CHCSYR1_2]

**Question ID:** CAU.170_01.000 **Instrument Variable Name:** CHCSYR1_2 **QuestionnaireFileName:** Sample Child

**QuestionText:**

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

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

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

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR1_3]

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

**Question ID:** CAU.170_02.000 **Instrument Variable Name:** CHCSYR1_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

A foot doctor?

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

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR1_5]

**Question ID:** CAU.170_03.000 **Instrument Variable Name:** CHCSYR1_5 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

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

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

**UniverseText:** Sample children <2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR1_6]

**Question ID:** CAU.170_04.000 **Instrument Variable Name:** CHCSYR1_6 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

A nurse practitioner, physician assistant or midwife?

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

**UniverseText:** Sample children <2

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

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

**Question ID:** CAU.175_01.000 **Instrument Variable Name:** CHCSYR_1 **QuestionnaireFileName:** Sample Child

**QuestionText:**

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

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

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

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR_2]

**Question ID:** CAU.175_02.000 **Instrument Variable Name:** CHCSYR_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

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

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

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR_3]

**Question ID:** CAU.175_03.000 **Instrument Variable Name:** CHCSYR_3 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

A foot doctor?

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

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR_4]

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

**Question ID:** CAU.175_04.000 **Instrument Variable Name:** CHCSYR_4 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

A chiropractor?

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

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR_5]

**Question ID:** CAU.175_05.000 **Instrument Variable Name:** CHCSYR_5 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

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

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

**UniverseText:** Sample children GE 2

**SkipInstructions:** <1,2,R,D> [goto CHCSYR_6]

**Question ID:** CAU.175_06.000 **Instrument Variable Name:** CHCSYR_6 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

A nurse practitioner, physician assistant or midwife?

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

**UniverseText:** Sample children GE 2

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

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

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

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

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

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

**SkipInstructions:** <1,2,R,D> [goto CHCSYR8_1]

**Question ID:** CAU.240_01.000 **Instrument Variable Name:** CHCSYR8_1 **QuestionnaireFileName:** Sample Child

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

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

**UniverseText:** Sample children <18

**SkipInstructions:** <1,2,R,D> [goto CHCSYR8_2]

**Question ID:** CAU.240_02.000 **Instrument Variable Name:** CHCSYR8_2 **QuestionnaireFileName:** Sample Child

**QuestionText:** * Read if necessary.

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

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

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

**UniverseText:** Sample children <18

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

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

**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]

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

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

**QuestionText:** (book) C5

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

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

**UniverseText:** Sample children <18

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

---

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

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

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

**UniverseText:** Sample children <18

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

---

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

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

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

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

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

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

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

**QuestionText:** (book) C6

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

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

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

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

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

**QuestionText:** (book) C5

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

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

**UniverseText:** Sample children <18

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

# DRAFT 2010 NHIS Questionnaire - Sample Child
## Child Access to Health Care & Utilization
**Document Version Date: 05-May-09**

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

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

* Read if necessary.

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

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

**UniverseText:** Sample children <18

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

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

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

* Enter '95' for 95 or more times.

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

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

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

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

**QuestionText:** (book) C4

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

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

**UniverseText:** Sample children <18

**SkipInstructions:** <0-5, R,D> [goto next section]