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| Questionnaire  |
| Thank you for agreeing to participate in the National Children’s Study and completing the Brief Symptom Inventory (BSI®). This questionnaire will take about 10 minutes to complete. It includes questions about problems or difficulties that people may sometimes have. You may use a pencil or pen to record your answers. Your answers are important to us. We will keep everything that you tell us confidential. |
| Listed below are several points that you may find helpful in completing the questionnaire:  |
| * The BSI® includes questions about problems or difficulties people sometimes have.
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| * Read each item carefully before you begin and select the response that best describes how much that problem or difficulty has distressed or bothered you during the PAST 7 DAYS, INCLUDING TODAY.
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| * Please try not to skip any questions and please mark only one response for each problem.
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| * If you change your mind about an answer, please strike out your original answer and then select your new answer.
* Before returning this questionnaire to the Regional Operations Center (ROC), please make sure you have answered all the items and that there is only one answer for each item.
* Follow instructions on the next page for information about returning this questionnaire to the Regional Operations Center.
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| If you have any questions, please call the local contact number located on the last page. Thank you for taking the time to complete this questionnaire! |

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| *For Office Use Only:**Instructions for returning the questionnaire to the Regional Operations Center (ROC):**{Local instructions inserted by ROC: Provide the parent/caregiver with ROC-specific instructions for returning the questionnaire to the ROC here.}* |
| Insert ROC contact information label here.  |