

Child Preventive Health Supplement (CS) Section

BOX_01

=====

| IF ANY RU MEMBERS < OR = 17 YEARS OF AGE OR IN AGE |
CATEGORIES 1 THROUGH 4, CONTINUE WITH LOOP_01

OTHERWISE, GO TO BOX_08

LOOP_01

=====

| FOR EACH ELEMENT IN THE RU-MEMBERS-ROSTER, |
ASK CS01-END_LP01

| LOOP DEFINITION: LOOP_01 COLLECTS INFORMATION |
| ABOUT A CHILD'S RESISTANCE TO ILLNESS, HEALTH NEEDS |
| A CHILD MAY HAVE BECAUSE OF A HEALTH CONDITION |
| (LWIM), RATINGS ON THE CHILD'S BEHAVIOR AND |
| RELATIONSHIPS (CIS), HEALTH CARE THE CHILD RECEIVED |
| IN THE LAST YEAR (CAHPS), AND INFORMATION ABOUT THE |
| CHILD'S USE OF CLINICAL PREVENTIVE SERVICES. THIS |
| LOOP CYCLES ON EACH PERSON IN THE RU-MEMBERS-ROSTER |
WHO MEETS THE FOLLOWING CONDITIONS:

- PERSON IS A CURRENT OR INSTITUTIONALIZED RU MEMBER
 - AND
 - PERSON IS NOT DECEASED
 - AND
 - PERSON IS < OR = 17 YEARS OF AGE OR IN AGE CATEGORIES 1 THROUGH 4
-

CS01
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

SHOW CARD CS-1.

{Now I'd like to talk about (PERSON).}

The following are statements about (PERSON)'s general health status.

How true or false is each of these statements for (PERSON)?

- | | |
|---------------------|----------------------|
| 1 = DEFINITELY TRUE | 4 = MOSTLY FALSE |
| 2 = MOSTLY TRUE | 5 = DEFINITELY FALSE |
| 3 = DON'T KNOW | |

CS01_01
=====

a. (PERSON) seems to be less healthy than other children that I know. ()

CS01_02
=====

b. (PERSON) has never been seriously ill. ()

CS01_03
=====

c. When there is something going around, (PERSON) usually catches it. ()

CS01_04
=====

d. I expect (PERSON) will have a very healthy life. ()

CS01_05
=====

e. I worry more about (PERSON)'s health than other people worry about their children's health. ()

REFUSED (-7) ALLOWED ON ALL ENTRY FIELDS.

| DISPLAY "Now I'd like to talk about (PERSON)." IF |
| NOT FIRST CYCLE THROUGH LOOP_01. OTHERWISE (THAT |
| IS, IF IT IS THE FIRST CYCLE THROUGH LOOP_01), USE |
A NULL DISPLAY.

| PROGRAMMER NOTE: CS01_01 AND CS01_03 WERE |
| PREVIOUSLY NUMBERED HE55_01 AND HE55_03, |
RESPECTIVELY.

CS02
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

The next questions are about (PERSON)'s health needs and whether (PERSON) has a health condition. A **health condition** can be physical, mental or behavioral. **Health conditions** may affect a child's development, daily functioning or need for services.

PRESS ENTER TO CONTINUE.

CS03
=====

Does (PERSON) currently need or use **medicine prescribed by a doctor**, other than vitamins?

YES 1
NO 2 {CS04}
REF -7 {CS04}
DK -8 {CS04}

CS03OV1
=====

Is this because of **any** medical, behavioral or other health condition?

YES 1
NO 2 {CS04}
REF -7 {CS04}
DK -8 {CS04}

CS030V2

=====

Is this a condition that has lasted or is expected to last for
at least 12 months?

YES	.....	1
NO	.....	2
REF	.....	-7
DK	.....	-8

CS04

=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Does (PERSON) need or use more **medical care, mental health or
educational services** than is usual for most children of the same
age?

YES	.....	1
NO	.....	2 {CS05}
REF	.....	-7 {CS05}
DK	.....	-8 {CS05}

CS040V1

=====

Is this because of **any** medical, behavioral or other health
condition?

YES	.....	1
NO	.....	2 {CS05}
REF	.....	-7 {CS05}
DK	.....	-8 {CS05}

CS040V2

=====

Is this a condition that has lasted or is expected to last for
at least 12 months?

YES	.....	1
NO	.....	2
REF	.....	-7
DK	.....	-8

CS05
====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Is (PERSON) **limited or prevented** in any way in (his/her) ability
to do the things most children of the same age can do?

YES	.....	1	
NO	.....	2	{CS06}
REF	.....	-7	{CS06}
DK	.....	-8	{CS06}

CS050V1
=====

Is this because of **any** medical, behavioral or other health
condition?

YES	.....	1	
NO	.....	2	{CS06}
REF	.....	-7	{CS06}
DK	.....	-8	{CS06}

CS050V2
=====

Is this a condition that has lasted or is expected to last for
at least 12 months?

YES	.....	1	
NO	.....	2	
REF	.....	-7	
DK	.....	-8	

CS06

====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Does (PERSON) need or get **special therapy** such as physical,
occupational or speech therapy?

YES	1
NO	2 {CS07}
REF	-7 {CS07}
DK	-8 {CS07}

CS06OV1

=====

Is this because of **any** medical, behavioral or other health
condition?

YES	1
NO	2 {CS07}
REF	-7 {CS07}
DK	-8 {CS07}

CS06OV2

=====

Is this a condition that has lasted or is expected to last for
at least 12 months?

YES	1
NO	2
REF	-7
DK	-8

CS07
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Does (PERSON) have any kind of emotional, developmental or behavioral problem for which (he/she) needs or gets **treatment or counseling?**

YES 1
NO 2 {BOX_02}
REF -7 {BOX_02}
DK -8 {BOX_02}

CS070V
=====

Is this a condition that has lasted or is expected to last for **at least** 12 months?

YES 1
NO 2
REF -7
DK -8

BOX_02
=====

| IF RU MEMBER BEING ASKED ABOUT IS AGED 5-17 YEARS, |
| INCLUSIVE, OR IN AGE CATEGORIES 3 OR 4, CONTINUE |
WITH CS08

OTHERWISE, GO TO CS09A

CS08

====

{PERSON'S FIRST MIDDLE AND LAST NAME}

SHOW CARD CS-2.

The following questions are about some aspects of (PERSON)'s health.

In this series of questions, please rate (PERSON) on a scale of 0 to 4 where 0 indicates no problem and 4 indicates a very big problem.

In general, how much of a problem do you think (PERSON) has with:

PROBE: Please rate on a scale of 0 to 4 where 0 indicates no problem and 4 indicates a very big problem, how much of a problem you think (PERSON) has with (ACTIVITY).

CODE 99 IF RESPONDENT INDICATES THE QUESTION IS INAPPLICABLE.

- | | | |
|----------|---|-----|
| CS08_01. | a. Getting along with (his/her) mother? | () |
| CS08_02. | b. Getting along with (his/her) father? | () |
| CS08_03. | c. Feeling unhappy or sad? | () |
| CS08_04. | d. (His/Her) behavior at school? | () |
| CS08_05. | e. Having fun? | () |
| CS08_06. | f. Getting along with other adults? | () |
| CS08_07. | g. Feeling nervous or afraid? | () |
| CS08_08. | h. Getting along with brothers and sisters? | () |
| CS08_09. | i. Getting along with other kids? | () |
| CS08_10. | j. Getting involved in activities like sports or hobbies? | () |
| CS08_11. | k. (His/Her) schoolwork? | () |
| CS08_12. | l. (His/Her) behavior at home? | () |
| CS08_13. | m. Staying out of trouble? | () |

ONLY THE VALUES OF 0 AND 4 WILL BE DEFINED IN THE TEXT OF THE QUESTION. HOWEVER, THE VALUES OF ALL THE ANSWER CATEGORIES ARE:

0 = NO PROBLEM
1
2 = SOME PROBLEM
3
4 = VERY BIG PROBLEM
-7 = REF
-8 = DK
99 = INAPPLICABLE

NOTE: THIS SCREEN WILL BE SPLIT INTO TWO SCREENS IN CAPI. THE FIRST SCREEN (CS08A) WILL CONTAIN THE FOLLOWING PARTS OF THE QUESTION AS SPECIFIED BELOW:

- THE SHOW CARD LINE
- THE FIRST THREE BLOCKS OF TEXT
- THE INTERVIEWER INSTRUCTION: 'CODE 99...'
- CS08_01 (a.) THROUGH CS08_08 (h.) DISPLAYED IN TWO COLUMNS, WITH CS08_01, CS08_02, CS08_03, CS08_04 IN THE FIRST COLUMN AND CS08_05, CS08_06, CS08_07, AND CS08_08 IN THE SECOND COLUMN

THE SECOND SCREEN (CS08B) WILL CONTAIN THE FOLLOWING PARTS OF THE QUESTION AS SPECIFIED BELOW:

- THE SHOW CARD LINE
- THE PROBE
- THE INTERVIEWER INSTRUCTION: 'CODE 99...'
- CS08_09 (i.) THROUGH CS08_13 (m.) DISPLAYED IN TWO COLUMNS, WITH CS08_09 AND CS08_10 IN THE FIRST COLUMN AND CS08_11, CS08_12, AND CS08_13 IN THE SECOND COLUMN

CS09
=====

OMITTED.

CS10
=====

OMITTED.

CS11
=====

OMITTED.

CS09A
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

The following questions are about the health care (PERSON)
received in the last 12 months.

In the last 12 months, did (PERSON) have an illness, injury or
condition that **needed care right away** in a clinic, emergency
room, or doctor's office?

YES	.....	1	
NO	.....	2	{CS11A}
REF	.....	-7	{CS11A}
DK	.....	-8	{CS11A}

CS12
=====

OMITTED.

CS10A
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

SHOW CARD CS-3.

In the last 12 months, when (PERSON) **needed care right away** for an illness, injury or condition, how often did (PERSON) get care as soon as you wanted?

NEVER	1
SOMETIMES	2
USUALLY	3
ALWAYS	4
REF	-7
DK	-8

[Code One]

CS11A
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

A **health provider** could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse, or anyone else (PERSON) would see for health care.

In the last 12 months, not counting the times (PERSON) needed health care right away, did you make any **appointments** for (PERSON) with a doctor or other health provider for health care?

YES	1
NO	2 {CS13}
REF	-7 {CS13}
DK	-8 {CS13}

CS12A
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

SHOW CARD CS-3.

In the last 12 months, not counting times (PERSON) needed health care right away, how often did (PERSON) get an appointment for health care as soon as you wanted?

NEVER	1
SOMETIMES	2
USUALLY	3
ALWAYS	4
REF	-7
DK	-8

[Code One]

CS13
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

SHOW CARD CS-3A.

In the last 12 months, not counting times (PERSON) went to an emergency room, how many times did (PERSON) go to a **doctor's office or clinic**?

NONE	0	{CS20}
1	1	
2	2	
3	3	
4	4	
5 TO 9	5	
10 OR MORE	6	
REF	-7	{CS20}
DK	-8	{CS20}

[Code One]

CS14A
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

In the last 12 months, did you or a doctor believe (PERSON)
needed any care, tests, or treatment?

YES 1
NO 2 {CS15}
REF -7 {CS15}
DK -8 {CS15}

CS14
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

SHOW CARD CS-4.

In the last 12 months, how much of a problem, if any, was it
to get the care, tests, or treatments you or a doctor believed
necessary?

A BIG PROBLEM 1
A SMALL PROBLEM 2
NOT A PROBLEM 3
REF -7
DK -8

[Code One]

CS15

====

{PERSON'S FIRST MIDDLE AND LAST NAME}

SHOW CARD CS-3.

In the last 12 months, how often did (PERSON)'s doctors or other health providers **listen carefully to you**?

NEVER	1
SOMETIMES	2
USUALLY	3
ALWAYS	4
REF	-7
DK	-8

[Code One]

CS16

====

{PERSON'S FIRST MIDDLE AND LAST NAME}

SHOW CARD CS-3.

In the last 12 months, how often did (PERSON)'s doctors or other health providers **explain things** in a way you could understand?

NEVER	1
SOMETIMES	2
USUALLY	3
ALWAYS	4
REF	-7
DK	-8

[Code One]

CS17
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

SHOW CARD CS-3.

In the last 12 months, how often did (PERSON)'s doctors or other health providers show **respect for what you had to say**?

NEVER	1
SOMETIMES	2
USUALLY	3
ALWAYS	4
REF	-7
DK	-8

[Code One]

CS18
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

SHOW CARD CS-3.

In the last 12 months, how often did doctors or other health providers **spend enough time with (PERSON)**?

NEVER	1
SOMETIMES	2
USUALLY	3
ALWAYS	4
REF	-7
DK	-8

[Code One]

CS19
====

{PERSON'S FIRST MIDDLE AND LAST NAME}

SHOW CARD CS-5.

Using **any number from 0 to 10** where 0 is the worst health care possible, and 10 is the best health care possible, what number would you use to rate all (PERSON)'s health care in the last 12 months?

ENTER RATING FROM 0-10:

[Enter Small Number]
REF -7
DK -8

RANGE CHECK: 0-10

CS20
====

{PERSON'S FIRST MIDDLE AND LAST NAME}

When you answer the next questions, **do not** include dental visits.

Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care.

In the last 12 months, did you or a doctor think (PERSON) needed to see a specialist?

YES 1
NO 2 {CS22}
REF -7 {CS22}
DK -8 {CS22}

CS21
====

{PERSON'S FIRST MIDDLE AND LAST NAME}

SHOW CARD CS-4.

In the last 12 months, how much of a problem, if any, was it to see a specialist that (PERSON) needed to see?

A BIG PROBLEM	1
A SMALL PROBLEM	2
NOT A PROBLEM	3
REF	-7
DK	-8

[Code One]

CS22
====

{PERSON'S FIRST MIDDLE AND LAST NAME}

The following questions are about amounts and types of preventive care (PERSON) may receive when (he/she) goes to see a doctor or other health provider.

Has a doctor or other health provider ever measured (PERSON)'s height?

YES	1
NO	2 {CS23}
REF	-7 {CS23}
DK	-8 {CS23}

CS220V
=====

When was that?

WITHIN PAST YEAR	1
WITHIN PAST 2 YEARS	2
MORE THAN 2 YEARS	3
REF	-7
DK	-8

[Code One]

CS23
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

About how tall is (PERSON) without shoes?

PROBE FOR INCHES IF NOT REPORTED.

CS23_01
=====

ENTER FEET:

[Enter Feet]
REF -7 {CS24}
DK -8 {CS24}

SOFT RANGE CHECK: 0 TO 7

CS23_02
=====

ENTER INCHES:

[Enter Inches]
REF -7
DK -8

SOFT RANGE CHECK: 0-12

| EDIT: IF FEET (CS23_01) = 0, INCHES (CS23_02) |
| MUST BE 1-30. IF FEET (CS23_01) > 0, INCHES |
(CS23_02) MUST BE 0-12.

CS24
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Has a doctor or other health provider ever measured (PERSON)'s weight?

YES	.....	1	
NO	.....	2	{CS25}
REF	.....	-7	{CS25}
DK	.....	-8	{CS25}

CS240V
=====

When was that?

WITHIN PAST YEAR	.....	1	
WITHIN PAST 2 YEARS	.....	2	
MORE THAN 2 YEARS	.....	3	
REF	.....	-7	
DK	.....	-8	

[Code One]

CS25
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

About how much does (PERSON) weigh without shoes?

{PROBE FOR OUNCES IF NOT REPORTED.}

CS25_01
=====

ENTER POUNDS:

[Enter Pounds]
REF -7 {BOX_03}
DK -8 {BOX_03}

SOFT RANGE CHECK: 1 TO 300

| IF CS25_01 IS < OR = 20 POUNDS, CONTINUE WITH |
| CS25_02 AND DISPLAY 'PROBE FOR...REPORTED.' |
IF CS25_01 IS > 20 POUNDS, GO TO BOX_03

CS25_02
=====

ENTER OUNCES:

[Enter Ounces]
REF -7
DK -8

SOFT RANGE CHECK: 0-15

| EDIT: IF POUNDS (CS25_01) = 0, THEN OUNCES MUST |
BE 1-16.

BOX_03
=====

| IF RU MEMBER BEING ASKED ABOUT IS AGED 3-6 YEARS, |
| INCLUSIVE, OR IN AGE CATEGORIES 2 OR 3, CONTINUE |
WITH CS26

OTHERWISE, GO TO BOX_04

CS26
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Has a doctor or other health provider ever checked (PERSON)'s
vision?

CODE '3' IF RESPONDENT VOLUNTEERS THAT DOCTOR TRIED TO CHECK
VISION, BUT (PERSON) WAS UNCOOPERATIVE.

YES	1
NO	2
TRIED, BUT (PERSON) WAS UNCOOPERATIVE ..	3
REF	-7
DK	-8

BOX_04
=====

| IF RU MEMBER BEING ASKED ABOUT IS > OR = 2 YEARS |
| OF AGE OR IN AGE CATEGORIES 2 THROUGH 4, CONTINUE |
WITH CS27

OTHERWISE, GO TO BOX_05

CS27

====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Has a doctor or other health provider ever measured (PERSON)'s
blood pressure?

CODE '3' IF RESPONDENT VOLUNTEERS THAT DOCTOR TRIED TO MEASURE
BLOOD PRESSURE, BUT (PERSON) WAS UNCOOPERATIVE.

YES	1	
NO	2	{CS28}
TRIED, BUT (PERSON) WAS UNCOOPERATIVE ..	3	
REF	-7	{CS28}
DK	-8	{CS28}

CS270V

=====

When was that?

WITHIN PAST YEAR	1
WITHIN PAST 2 YEARS	2
MORE THAN 2 YEARS	3
REF	-7
DK	-8

[Code One]

CS28
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Has a doctor or other health provider ever given you or (PERSON)
advice about (PERSON) having regular dental check-ups?

YES	.....	1
NO	.....	2 {CS29}
REF	.....	-7 {CS29}
DK	.....	-8 {CS29}

PRESS F1 FOR DEFINITION OF "ADVICE TO YOU."

CS280V
=====

When was that?

WITHIN PAST YEAR	.....	1
WITHIN PAST 2 YEARS	.....	2
MORE THAN 2 YEARS	.....	3
REF	.....	-7
DK	.....	-8

[Code One]

CS29

====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Has a doctor or other health provider ever given you or (PERSON)
advice about (PERSON) eating healthy?

YES	.....	1	
NO	.....	2	{CS30}
REF	.....	-7	{CS30}
DK	.....	-8	{CS30}

PRESS F1 FOR DEFINITION OF "ADVICE TO YOU."

CS290V

=====

When was that?

WITHIN PAST YEAR	.....	1	
WITHIN PAST 2 YEARS	.....	2	
MORE THAN 2 YEARS	.....	3	
REF	.....	-7	
DK	.....	-8	

[Code One]

CS30
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Has a doctor or other health provider ever given you or (PERSON)
advice about the amount and kind of exercise, sports, or
physically active hobbies (PERSON) should have?

YES	.....	1
NO	.....	2 {BOX_05}
REF	.....	-7 {BOX_05}
DK	.....	-8 {BOX_05}

PRESS F1 FOR DEFINITION OF "ADVICE TO YOU."

CS300V
=====

When was that?

WITHIN PAST YEAR	.....	1
WITHIN PAST 2 YEARS	.....	2
MORE THAN 2 YEARS	.....	3
REF	.....	-7
DK	.....	-8

[Code One]

BOX_05

=====

IF RU MEMBER BEING ASKED ABOUT:
- HAS A WEIGHT AT CS25 < OR = 40 POUNDS,
OR
- IF CS25 IS CODED 'REF' OR 'DK'
AND
- PERSON < OR = 4 YEARS OF AGE (OR IN AGE
CATEGORIES 1 OR 2),
CONTINUE WITH CS31

IF RU MEMBER BEING ASKED ABOUT:
- HAS A WEIGHT AT CS25 > 40 AND < OR = 80 POUNDS
OR
- IF CS25 IS CODED 'REF' OR 'DK'
AND
- PERSON > 4 AND < OR = 9 YEARS OF AGE (OR IN AGE
CATEGORY 3),
GO TO CS32

IF RU MEMBER BEING ASKED ABOUT:
- HAS A WEIGHT AT CS25 > 80 POUNDS,
OR
- IF CS25 IS CODED 'REF' OR 'DK'
AND
- PERSON > 9 YEARS OF AGE (OR IN AGE CATEGORY 4),
GO TO CS33

CS31
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Has a doctor or other health provider ever given you or (PERSON)
advice about (PERSON) using a child safety seat while riding in
the car?

YES	1
NO	2 {BOX_06}
REF	-7 {BOX_06}
DK	-8 {BOX_06}

PRESS F1 FOR DEFINITION OF "ADVICE TO YOU."

CS310V
=====

When was that?

WITHIN PAST YEAR	1 {BOX_06}
WITHIN PAST 2 YEARS	2 {BOX_06}
MORE THAN 2 YEARS	3 {BOX_06}
REF	-7 {BOX_06}
DK	-8 {BOX_06}

[Code One]

CS32

====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Has a doctor or other health provider ever given you or (PERSON)
advice about (PERSON) using a booster seat when riding in the car?

YES	.....	1
NO	.....	2 {BOX_05A}
REF	.....	-7 {BOX_05A}
DK	.....	-8 {BOX_05A}

PRESS F1 FOR DEFINITION OF "ADVICE TO YOU."

CS320V

=====

When was that?

WITHIN PAST YEAR	.....	1
WITHIN PAST 2 YEARS	.....	2
MORE THAN 2 YEARS	.....	3
REF	.....	-7
DK	.....	-8

[Code One]

BOX_05A

=====

| IF CS25 IS CODED 'REF' OR 'DK' FOR RU MEMBER BEING |
| ASKED ABOUT AND PERSON IS IN AGE CATEGORY 3, |
CONTINUE WITH CS33

OTHERWISE, GO TO BOX_06

CS33
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Has a doctor or other health provider ever given you or (PERSON)
advice about (PERSON) using lap and shoulder belts when driving
or riding in a car?

YES 1
NO 2 {BOX_06}
REF -7 {BOX_06}
DK -8 {BOX_06}

PRESS F1 FOR DEFINITION OF "ADVICE TO YOU."

CS330V
=====

When was that?

WITHIN PAST YEAR 1
WITHIN PAST 2 YEARS 2
MORE THAN 2 YEARS 3
REF -7
DK -8

[Code One]

BOX_06
=====

| IF RU MEMBER BEING ASKED ABOUT IS > OR = 2 YEARS |
| OF AGE OR IN AGE CATEGORIES 2 THROUGH 4, CONTINUE |
WITH CS34

OTHERWISE, GO TO CS35

CS34
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Has a doctor or other health provider ever given you or (PERSON)
advice about (PERSON) using a helmet when riding a bicycle or
motorcycle?

YES	.....	1
NO	.....	2 {CS35}
REF	.....	-7 {CS35}
DK	.....	-8 {CS35}

PRESS F1 FOR DEFINITION OF "ADVICE TO YOU (ABOUT HELMETS)."

CS340V
=====

When was that?

WITHIN PAST YEAR	.....	1
WITHIN PAST 2 YEARS	.....	2
MORE THAN 2 YEARS	.....	3
REF	.....	-7
DK	.....	-8

[Code One]

CS35
=====

{PERSON'S FIRST MIDDLE AND LAST NAME}

Has a doctor or other health provider ever given you advice about
how smoking in the house can be bad for (PERSON)'s health?

YES 1
NO 2 {BOX_07}
REF -7 {BOX_07}
DK -8 {BOX_07}

PRESS F1 FOR DEFINITION OF "ADVICE TO YOU."

CS350V
=====

When was that?

WITHIN PAST YEAR 1
WITHIN PAST 2 YEARS 2
MORE THAN 2 YEARS 3
REF -7
DK -8

[Code One]

BOX_07
=====

| IF RU MEMBER BEING ASKED ABOUT IS > OR = 12 YEARS |
OF AGE OR IN AGE CATEGORY 4, CONTINUE WITH CS36

OTHERWISE, GO TO END_LP01

CS36

====

{PERSON'S FIRST MIDDLE AND LAST NAME}

The last time (PERSON) had a health care visit, did a doctor
or other health provider spend any time alone with (PERSON)
without a parent, relative or guardian in the room?

YES	1
NO	2
REF	-7
DK	-8

END_LP01

=====

| CYCLE ON NEXT PERSON IN THE RU-MEMBERS-ROSTER WHO |
MEETS THE CONDITIONS STATED IN THE LOOP DEFINITION

| IF NO OTHER PERSONS MEET THE STATED CONDITIONS, |
END LOOP_01 AND CONTINUE WITH BOX_08

BOX_08

=====

GO TO NEXT QUESTIONNAIRE SECTION