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sws_4_visit - 12 Month Infancy Questionnaire
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sws_4_visit - 12 Month Infancy Questionnaire

12 Month Infancy Questionnaire

Collection Events

2000-01 - 2009-01

Collection Organization

Mode of Collection

Face-to-face paper and pencil interviewing.

Mode of Collection

Assessment of physical properties of living being, objects, materials, or natural phenomena. This includes medical and geographic data.

12 Month Infancy Questionnaire

closer:sourceFileName

sws_4_visit

Instrument Locations

- https://discovery.closer.ac.uk/files/instruments/sws_4_visit-02279e260b5f4ef2fd57f542f9de23a3.pdf

sws_4_visit

Label sws_4_visit	Location Sequence
Type Sequence	Order InOrderOfAppearance

s_intro_i

Name s_intro_i	Location Sequence › sws_4_visit
Type Statement	

Statement Text

12 MONTH INFANCY QUESTIONNAIRE

qi_intro_i - intro i

Name qi_intro_i	Label intro i	Location Sequence › sws_4_visit
Type Text	Minimum Length	Maximum Length 255

Question

Mother's forename only:

 qi_intro_ii - intro ii

Name	Label	Location
qi_intro_ii	intro ii	Sequence › sws_4_visit
Type	Minimum Length	Maximum Length
Text		255

Question

Infant's forename only:

 s_intro_ii

Name	Location
s_intro_ii	Sequence › sws_4_visit
Type	
Statement	

Statement Text


[Nurse to refer to salmon card to ensure child's name is correct, and record any changes thereon. Also to request additional telephone number, for tracing purposes if family move]

 qi_intro_iii - intro iii

Name	Label	Location
qi_intro_iii	intro iii	Sequence › sws_4_visit
Type		
Date		

Question

Infant's date of birth

 qi_intro_iv - intro iv

Name	Label	Location
qi_intro_iv	intro iv	Sequence › sws_4_visit
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

Question

Sex

Choices

M	Male
F	Female

 qi_intro_v - intro v

Name	Label	Location
qi_intro_v	intro v	Sequence › sws_4_visit
Type		
Date		

Question

Date of interview

 qi_intro_vi - intro vi

Name qi_intro_vi	Label intro vi	Location Sequence › sws_4_visit
Type Text	Minimum Length	Maximum Length 255

Question

Interviewer

 s_intro_iii


Name s_intro_iii	Location Sequence › sws_4_visit
Type Statement	

Statement Text

I would firstly like to ask you about your baby's feeding. I'll start with questions about the type of milk or formula he/she has had.

1 MILK OR FORMULA FEEDING

Label 1 MILK OR FORMULA FEEDING	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

 qi_s1_1 - s1 1


Name qi_s1_1	Label s1 1	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Was he/she breast fed after the age of 6 months?

Choices

0	No
1	Yes

 qi_s1_2 - s1 2

Name qi_s1_2	Label s1 2	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Multiple Choice	Selection Type SelectOne	Display Style

Condition

Question

Are you still breast feeding?

Choices

0	No
1	Yes

qi_s1_3 - s1 3

Name qi_s1_3	Label s1 3	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Multiple Choice	Selection Type SelectOne	Display Style

Condition
If Yes to question 1.2

Question

*What is the main reason for continuing to breast feed?

Choices

1	Enjoyment
2	Best for baby / prevention of allergies
3	Cheaper
4	Baby prefers it or refuses other feeds
5	Convenience
8	Any other / multiple reasons, e.g. help lose weight, so sleeps through night

s_s1q3

Name s_s1q3	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Statement	

Condition
If Yes to question 1.2

Statement Text

go to 1.5

qi_s1_4_i - s1 4(i)

Name qi_s1_4_i	Label s1 4(i)	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
-------------------	------------------	--

Type Integer, Integer, Integer	Low 0	High
Condition If No to question 1.2 go to 1.4		

Question

How old was your baby when he/she last had a breast feed? ... mths ... wks ... days

qi_s1_4_ii - s1 4(ii)		
Name qi_s1_4_ii	Label s1 4(ii)	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Date		
Condition If No to question 1.2 go to 1.4		

Question

or On what date did he/she last have a breast feed?

s_s1q4	
Name s_s1q4	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Statement	
Condition If No to question 1.2 go to 1.4	

Statement Text

If not breast fed in past 4 wks go to 1.9

qg_s1_5 - s1 5		
Name qg_s1_5	Label s1 5	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Question Grid		
Condition If Yes to question 1.2 or breast fed in past 4 wks to question 1.4		

Question

I am now going to ask you about the breast milk your baby has had in the past 4 weeks. Not including expressed breast milk, can you tell me how many days out of the past 4 weeks (28 days) he/she was breast fed? On average, how many feeds per day did he/she receive on these days? How long on average was he/she actively sucking per day on these days?

Rows

1	1
---	---

Columns

Days in 28 days	Numeric
How many l	Numeric
Hours in day	Numeric
Minutes in hour	Numeric
How many l	Numeric
Hours in day	Numeric
Minutes in hour	Numeric
Days in 28 days	Numeric
Hours in day	Numeric
How many l	Numeric
Minutes in hour	Numeric
Days in 28 days	Numeric
Minutes in hour	Numeric
How many l	Numeric
Days in 28 days	Numeric
Hours in day	Numeric

 qi_s1_6 - s1 6

Name qi_s1_6	Label s1 6	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Multiple Choice	Selection Type SelectOne	Display Style

Condition
If Yes to question 1.2 or breast fed in past 4 wks to question 1.4

Question

In the past 4 weeks did he/she have any expressed breast milk?

Choices

0	No
1	Yes

 qg_s1_7 - s1 7

Name qg_s1_7	Label s1 7	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Question Grid		

Condition

If Yes to question 1.2 or breast fed in past 4 wks to question 1.4

Question

How many days out of the past 4 weeks (28 days) did he/she have expressed breast milk? On average, how many times per day did he/she have expressed breast milk on these days? What was the average amount of milk per day on these days?

Rows

1	1
---	---

Columns

Days in 28 days	Numeric
How many l	Numeric
Ounces	Numeric
Millilitres	Numeric
How many l	Numeric
Ounces	Numeric
Millilitres	Numeric
Days in 28 days	Numeric
Ounces	Numeric
How many l	Numeric
Millilitres	Numeric
Days in 28 days	Numeric
Millilitres	Numeric
How many l	Numeric
Days in 28 days	Numeric
Ounces	Numeric

qi_s1_8 - s1 8

Name qi_s1_8	Label s1 8	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Multiple Choice	Selection Type SelectOne	Display Style

Condition

If Yes to question 1.2 or breast fed in past 4 wks to question 1.4

Question

Except for breast milk, has he/she had any other milk or formula in the past 6 months?

Choices

0	No
1	Yes

qi_s1_9_i - s1 9(i)

Name qi_s1_9_i	Label s1 9(i)	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Integer, Integer, Integer	Low 0	High
Condition If Yes to question 1.2 or breast fed in past 4 wks to question 1.4		

Question

How old was your baby when he/she started regularly having other milk or formula feeds from a bottle or cup, OR FOR MIXING WITH SOLIDS? ... mths ... wks ... days

qi_s1_9_ii - s1 9(ii)

Name qi_s1_9_ii	Label s1 9(ii)	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Date		
Condition If Yes to question 1.2 or breast fed in past 4 wks to question 1.4		

Question

or On what date did he/she start regularly having milk or formula feeds?

qg_s1_10 - s1 10

Name qg_s1_10	Label s1 10	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Question Grid		
Condition If No to question 1.1 or Yes to question 1.8		

Question

*Please tell me which types of milk or formula you have used between 6 months and now, and what age your baby was when it was started and stopped, or on what date it was started and stopped.

Rows

1	1
---	---

2	2
3	3
4	4
5	5

Columns

Months	Numeric
Generic date	DateTime
Generic date	DateTime
Generic text	Text
Weeks in month	Numeric
Months	Numeric
Generic text	Text
Days in week	Numeric
Weeks in month	Numeric
Days in week	Numeric
Days in week	Numeric
Days in week	Numeric
Months	Numeric
Generic date	DateTime
Weeks in month	Numeric
Generic date	DateTime
Months	Numeric
Generic text	Text
Weeks in month	Numeric
Generic text	Text
Weeks in month	Numeric
Months	Numeric
Days in week	Numeric
Months	Numeric
Weeks in month	Numeric

Days in week	Numeric
Generic text	Text
Generic text	Text
Generic date	DateTime
Generic date	DateTime
Weeks in month	Numeric
Days in week	Numeric
Days in week	Numeric
Months	Numeric
Generic date	DateTime
Weeks in month	Numeric
Generic date	DateTime
Generic text	Text
Generic text	Text
Months	Numeric
Weeks in month	Numeric
Weeks in month	Numeric
Months	Numeric
Generic text	Text
Days in week	Numeric
Days in week	Numeric
Generic date	DateTime
Generic text	Text
Months	Numeric
Generic date	DateTime
Generic text	Text
Months	Numeric
Weeks in month	Numeric
Weeks in month	Numeric
Generic date	DateTime

Days in week	Numeric
Generic text	Text
Months	Numeric
Generic date	DateTime
Days in week	Numeric
Generic text	Text
Months	Numeric
Days in week	Numeric
Weeks in month	Numeric
Weeks in month	Numeric
Days in week	Numeric
Generic text	Text
Months	Numeric
Generic date	DateTime
Generic date	DateTime
Generic date	DateTime
Months	Numeric
Generic text	Text
Days in week	Numeric
Generic date	DateTime
Weeks in month	Numeric
Generic text	Text
Days in week	Numeric
Months	Numeric
Weeks in month	Numeric
Weeks in month	Numeric
Generic date	DateTime
Days in week	Numeric
Months	Numeric
Generic text	Text

Weeks in month	Numeric
Generic text	Text
Generic date	DateTime
Days in week	Numeric
Months	Numeric
Days in week	Numeric
Months	Numeric
Weeks in month	Numeric
Generic text	Text
Generic text	Text
Months	Numeric
Generic date	DateTime
Generic date	DateTime
Days in week	Numeric
Weeks in month	Numeric

 qg_s1_11 - s1 11

Name qg_s1_11	Label s1 11	Location Sequence › sws_4_visit › 1 MILK OR FORMULA FEEDING
Type Question Grid		
Condition If No to question 1.1 or Yes to question 1.8		

Question

Can you tell me the types of milk or formula he/she has had in the past 4 weeks? How many days out of the past 4 weeks (28 days) was type of milk given? How many times per day was type of milk given? *What was the average amount of type of milk per day on these days?

Rows

1	1
2	2
3	3
4	4

Columns

Days in 28 days	Numeric
-----------------	---------

How many l	Numeric
Ounces	Numeric
Millilitres	Numeric
Generic text	Text
Generic text	Text
How many l	Numeric
Millilitres	Numeric
Generic text	Text
Days in 28 days	Numeric
Ounces	Numeric
Generic text	Text
Generic text	Text
Generic text	Text
Millilitres	Numeric
Ounces	Numeric
Days in 28 days	Numeric
How many l	Numeric
Millilitres	Numeric
How many l	Numeric
Ounces	Numeric
Generic text	Text
Generic text	Text
Days in 28 days	Numeric
Days in 28 days	Numeric
Generic text	Text
How many l	Numeric
Ounces	Numeric
Millilitres	Numeric
Generic text	Text
Millilitres	Numeric

Ounces	Numeric
Generic text	Text
Generic text	Text
How many l	Numeric
Days in 28 days	Numeric

2 FOOD FREQUENCY QUESTIONNAIRE

Label 2 FOOD FREQUENCY QUESTIONNAIRE	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

 s_s2_i

Name s_s2_i	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Statement	

Statement Text

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them. Explain the use of spoons, cups, bowl and diagrams.

 qi_s2_1 - s2 1

Name qi_s2_1	Label s2 1	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

*Did your baby eat any dried baby foods in the past 4 weeks?

Choices

0	No
1	Yes

 qg_s2_2 - s2 2

Name qg_s2_2	Label s2 2	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
-----------------	---------------	---

Type		
Question Grid		
Condition		

Question

*Did your baby eat any dried baby foods in the past 4 weeks?


Rows

1	Dried baby cereals 1
2	Dried baby cereals 2
3	Dried baby cereals 3
4	Dried meat or fish based meals 1
5	Dried meat or fish based meals 2
6	Dried meat or fish based meals 3
7	Dried vegetable, pasta or rice based meals 1
8	Dried vegetable, pasta or rice based meals 2
9	Dried vegetable, pasta or rice based meals 3
10	Dried desserts 1
11	Dried desserts 2
12	Dried desserts 3

Columns

Generic text	Text
How many l	Numeric
Tablespoons	Numeric
Tablespoons	Numeric
	Code
Tablespoons	Numeric
Generic text	Text
Tablespoons	Numeric
How many l	Numeric
	Code
Tablespoons	Numeric
	Code
How many l	Numeric

Generic text	Text
Tablespoons	Numeric
Generic text	Text
How many l	Numeric
	Code
Tablespoons	Numeric
Tablespoons	Numeric

 qi_s2_3 - s2 3


Name qi_s2_3	Label s2 3	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

*Did your baby eat any jars, tins or pots of baby foods in the past 4 weeks?

Choices

0	No
1	Yes

 qg_s2_4 - s2 4

Name qg_s2_4	Label s2 4	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Condition

Question

*Did your baby eat any jars, tins or pots of baby foods in the past 4 weeks?

Rows

1	Breakfast meals such as porridge 1
2	Breakfast meals such as porridge 2
3	Breakfast meals such as porridge 3
4	Meat or fish based meals 1
5	Meat or fish based meals 2
6	Meat or fish based meals 3

7	Vegetable, pasta or rice based savoury meals 1
8	Vegetable, pasta or rice based savoury meals 2
9	Vegetable, pasta or rice based savoury meals 3
10	Milk or cereal based desserts 1
11	Milk or cereal based desserts 2
12	Milk or cereal based desserts 3
13	Fruit based desserts, not including pure fruit puree 1
14	Fruit based desserts, not including pure fruit puree 2
15	Fruit based desserts, not including pure fruit puree 3
16	Pure fruit puree 1
17	Pure fruit puree 2
18	Pure fruit puree 3

Columns

Jars	Numeric
	Code
Generic text	Text
	Code
How many I	Numeric
Jars	Numeric
How many I	Numeric
	Code
Generic text	Text
	Code
How many I	Numeric
	Code
	Code
Jars	Numeric
Generic text	Text
Generic text	Text

	Code
Jars	Numeric
How many I	Numeric
	Code
How many I	Numeric
Jars	Numeric
	Code
Generic text	Text
	Code

 qg_s2_5_11-12 - s2 5(11-12)

Name qg_s2_5_11-12	Label s2 5(11-12)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

11	White bread
12	Brown and wholemeal bread

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_13 - s2 5(13)

Name qg_s2_5_13	Label s2 5(13)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

13	Crackers, cheese biscuits and breadsticks
----	---

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_14 - s2 5(14)

Name qg_s2_5_14	Label s2 5(14)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

14	Breakfast cereals and porridge
----	--------------------------------

Columns

How many l	Numeric
	Code
Tablespoons	Numeric
How many l	Numeric
	Code
Tablespoons	Numeric
	Code
Tablespoons	Numeric
How many l	Numeric

 qg_s2_5_14_i - s2 5(14)

Name qg_s2_5_14_i	Label s2 5(14)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

What are the main types of cereal used?

Rows

1	1
2	2
3	3

Columns

Generic text	Text
Generic text	Text
Generic text	Text
Generic text	Text

 qg_s2_5_15 - s2 5(15)

Name qg_s2_5_15	Label s2 5(15)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

1	Boiled and baked potatoes
---	---------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_16 - s2 5(16)

Name	Label	Location
qg_s2_5_16	s2 5(16)	Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type		
Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

16	Chips, potato shapes and roast potatoes
----	---

Columns

How many I	Numeric
	Code
How many F	Numeric

How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_17-18 - s2 5(17-18)

Name qg_s2_5_17-18	Label s2 5(17-18)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

1	Rice
2	Pasta

Columns

How many I	Numeric
	Code
Tablespoons	Numeric
How many I	Numeric
	Code
Tablespoons	Numeric
	Code
Tablespoons	Numeric
How many I	Numeric

 qg_s2_5_19 - s2 5(19)

Name qg_s2_5_19	Label s2 5(19)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
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Type Question Grid		
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Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

19	Chicken or turkey in batter or breadcrumbs
----	--

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_20 - s2 5(20)

Name qg_s2_5_20	Label s2 5(20)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

20	Beefburgers
----	-------------

Columns

How many I	Numeric
------------	---------

	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_21 - s2 5(21)

Name qg_s2_5_21	Label s2 5(21)	Location Sequence > sws_4_visit > 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

21	Bacon and gammon
----	------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_22 - s2 5(22)

Name qg_s2_5_22	Label s2 5(22)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

22	Sausages
----	----------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_23 - s2 5(23)

Name qg_s2_5_23	Label s2 5(23)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

23	Meat casseroles, stews, and curries
----	-------------------------------------

Columns

How many I	Numeric
	Code
Tablespoons	Numeric
How many I	Numeric
	Code
Tablespoons	Numeric
	Code
Tablespoons	Numeric
How many I	Numeric

 qg_s2_5_24 - s2 5(24)

Name qg_s2_5_24	Label s2 5(24)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

24	Roast, grilled or fried meat
----	------------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_25 - s2 5(25)

Name qg_s2_5_25	Label s2 5(25)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

25	Liver, kidney and faggots
----	---------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_26 - s2 5(26)

Name qg_s2_5_26	Label s2 5(26)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

26	Meat pies and sausage rolls
----	-----------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_27 - s2 5(27)		
Name qg_s2_5_27	Label s2 5(27)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

27	Ham and processed cold meats
----	------------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric

How many I	Numeric
------------	---------

 qg_s2_5_28 - s2 5(28)

Name qg_s2_5_28	Label s2 5(28)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

28	Fish in batter or breadcrumbs
----	-------------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_29 - s2 5(29)

Name qg_s2_5_29	Label s2 5(29)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

29	Other white fish
----	------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_30 - s2 5(30)

Name qg_s2_5_30	Label s2 5(30)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

30	Oily fish
----	-----------

Columns

How many I	Numeric
	Code
Tablespoons	Numeric
How many I	Numeric
	Code
Tablespoons	Numeric
	Code

Tablespoons	Numeric
How many I	Numeric

 qg_s2_5_31-36 - s2 5(31-36)

Name qg_s2_5_31-36	Label s2 5(31-36)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

31	Tinned peas, carrots, sweetcorn and mixed vegetables
32	Carrots
33	Peas and green beans
34	Sweetcorn
35	Broccoli, cabbage, spring greens and Brussels sprouts
36	Cauliflower

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_37 - s2 5(37)

Name qg_s2_5_37	Label s2 5(37)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

37	Tomatoes
----	----------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_38 - s2 5(38)

Name qg_s2_5_38	Label s2 5(38)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

38	Green salad
----	-------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_39 - s2 5(39)

Name qg_s2_5_39	Label s2 5(39)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

39	Beans and pulses
----	------------------

Columns

How many I	Numeric
	Code
Tablespoons	Numeric
How many I	Numeric
	Code
Tablespoons	Numeric
	Code
Tablespoons	Numeric
How many I	Numeric

 qg_s2_5_40 - s2 5(40)

Name qg_s2_5_40	Label s2 5(40)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

40	Vegetarian burgers, sausages and nuggets
----	--

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_41 - s2 5(41)

Name qg_s2_5_41	Label s2 5(41)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

41	Pizza
----	-------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_42 - s2 5(42)		
Name qg_s2_5_42	Label s2 5(42)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

42	Quiche and savoury flan
----	-------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric

How many I	Numeric
------------	---------

 qg_s2_5_43 - s2 5(43)

Name qg_s2_5_43	Label s2 5(43)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

43	Eggs
----	------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_44 - s2 5(44)

Name qg_s2_5_44	Label s2 5(44)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

44	Cheese
----	--------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_45 - s2 5(45)

Name qg_s2_5_45	Label s2 5(45)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

45	Savoury white sauce
----	---------------------

Columns

How many I	Numeric
	Code
Tablespoons	Numeric
How many I	Numeric
	Code
Tablespoons	Numeric
	Code

Tablespoons	Numeric
How many l	Numeric

 qg_s2_5_46 - s2 5(46)

Name qg_s2_5_46	Label s2 5(46)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

46	Tinned fruit
----	--------------

Columns

How many l	Numeric
	Code
Tablespoons	Numeric
How many l	Numeric
	Code
Tablespoons	Numeric
	Code
Tablespoons	Numeric
How many l	Numeric

 qg_s2_5_47 - s2 5(47)

Name qg_s2_5_47	Label s2 5(47)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models


to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

47	Apples and pears
----	------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_48 - s2 5(48)

Name qg_s2_5_48	Label s2 5(48)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

48	Bananas
----	---------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code

How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_49 - s2 5(49)

Name qg_s2_5_49	Label s2 5(49)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

49	Oranges and satsumas
----	----------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_50 - s2 5(50)

Name qg_s2_5_50	Label s2 5(50)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

50	Peaches, nectarines, melon
----	----------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_51 - s2 5(51)

Name	Label	Location
qg_s2_5_51	s2 5(51)	Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type		
Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

51	Strawberries, raspberries, mango and kiwi
----	---

Columns

How many I	Numeric
	Code
How many F	Numeric

How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_52 - s2 5(52)

Name qg_s2_5_52	Label s2 5(52)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

52	Plums, cherries and grapes
----	----------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_53 - s2 5(53)

Name qg_s2_5_53	Label s2 5(53)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
--------------------	-------------------	---

Type		
Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

53	Yoghurt and fromage frais
----	---------------------------

Columns

How many l	Numeric
	Code
Grams	Numeric
How many l	Numeric
	Code
Grams	Numeric
	Code
Grams	Numeric
How many l	Numeric

 qi_s2_5_53_i - s2 5(53)		
Name	Label	Location
qi_s2_5_53_i	s2 5(53)	Sequence > sws_4_visit > 2 FOOD FREQUENCY QUESTIONNAIRE
Type	Selection Type	Display Style
Multiple Choice, Text	SelectOne	

Question

Yoghurt and fromage frais

Choices

1	Ordinary wholemilk
2	Ordinary low fat
3	Danone baby fromage frais made with follow on milk
4	Onky Blok fromage frais with added vitamins
5	Tescos fromage frais with added vitamins
88	Other

77	multiple types
----	----------------

 qg_s2_5_54 - s2 5(54)

Name qg_s2_5_54	Label s2 5(54)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

54	Other ready made desserts in pots
----	-----------------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_55 - s2 5(55)

Name qg_s2_5_55	Label s2 5(55)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

55	Ice-cream
----	-----------

Columns

How many l	Numeric
	Code
Tablespoons	Numeric
How many l	Numeric
	Code
Tablespoons	Numeric
	Code
Tablespoons	Numeric
How many l	Numeric

 qg_s2_5_56-57 - s2 5(56-57)

Name qg_s2_5_56-57	Label s2 5(56-57)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

56	Custard and sweet white sauce
57	Other puddings

Columns

How many l	Numeric
	Code
Tablespoons	Numeric
How many l	Numeric
	Code
Tablespoons	Numeric

	Code
Tablespoons	Numeric
How many I	Numeric

 qg_s2_5_58 - s2 5(58)

Name qg_s2_5_58	Label s2 5(58)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

58	Cakes, buns and pastries
----	--------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_59 - s2 5(59)

Name qg_s2_5_59	Label s2 5(59)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually

eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

59	Chocolate and digestive biscuits
----	----------------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_60 - s2 5(60)

Name qg_s2_5_60	Label s2 5(60)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

60	Other biscuits
----	----------------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code

How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_61 - s2 5(61)

Name qg_s2_5_61	Label s2 5(61)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

61	Chocolate
----	-----------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_62 - s2 5(62)

Name qg_s2_5_62	Label s2 5(62)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

62	Sweets
----	--------

Columns

How many I	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_63 - s2 5(63)

Name	Label	Location
qg_s2_5_63	s2 5(63)	Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type		
Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.


Rows

63	Crisps and savoury snacks
----	---------------------------

Columns

How many I	Numeric
	Code
How many F	Numeric

How many I	Numeric
	Code
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric

 qg_s2_5_64 - s2 5(64)

Name qg_s2_5_64	Label s2 5(64)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

64	Marmite and Bovril
----	--------------------

Columns

How many I	Numeric
	Code
Teaspoons	Numeric
How many I	Numeric
	Code
Teaspoons	Numeric
	Code
Teaspoons	Numeric
How many I	Numeric

 qg_s2_5_65-66 - s2 5(65-66)

Name qg_s2_5_65-66	Label s2 5(65-66)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
-----------------------	----------------------	---

Type		
Question Grid		

Question


Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

65	Peanut butter
66	Jam and sweet spreads

Columns

How many l	Numeric
	Code
Teaspoons	Numeric
How many l	Numeric
	Code
Teaspoons	Numeric
	Code
Teaspoons	Numeric
How many l	Numeric

 qg_s2_5_67 - s2 5(67)		
Name	Label	Location
qg_s2_5_67	s2 5(67)	Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type		
Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

67	Butter and margarine
----	----------------------

Columns

How many l	Numeric
	Code
Teaspoons	Numeric
How many l	Numeric
	Code
Teaspoons	Numeric
	Code
Teaspoons	Numeric
How many l	Numeric

 qg_s2_5_68 - s2 5(68)

Name qg_s2_5_68	Label s2 5(68)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

68	Sugar
----	-------

Columns

How many l	Numeric
	Code
Teaspoons	Numeric
How many l	Numeric
	Code
Teaspoons	Numeric
	Code
Teaspoons	Numeric
How many l	Numeric

qg_s2_5_69-71 - s2 5(69-71)

Name qg_s2_5_69-71	Label s2 5(69-71)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

69	Baby juices
70	Pure fruit juice
71	Fruit drinks

Columns

	Code
How many I	Numeric
Ounces	Numeric
How many F	Numeric
How many I	Numeric
Ounces	Numeric
How many F	Numeric
	Code
Ounces	Numeric
How many I	Numeric
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
Ounces	Numeric

qg_s2_5_72 - s2 5(72)

Name qg_s2_5_72	Label s2 5(72)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

72	Ribena, C-vit and high juice blackcurrant squash (amt. diluted)
----	---

Columns

	Code
How many I	Numeric
Ounces	Numeric
How many F	Numeric
How many I	Numeric
Ounces	Numeric
How many F	Numeric
	Code
Ounces	Numeric
How many I	Numeric
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
Ounces	Numeric

qi_s2_5_72_i - s2 5(72)

Name qi_s2_5_72_i	Label s2 5(72)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Multiple Choice, Text	Selection Type SelectOne	Display Style

Question

What is the main type?

Choices

1	Ordinary Ribena, C-vit and hi juice blackcurrant
2	Ribena light
3	Really Light Ribena
4	Low sugar hi juice blackcurrant
5	Other

 qg_s2_5_73-78 - s2 5(73-78)

Name qg_s2_5_73-78	Label s2 5(73-78)	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Question

Now I am going to ask you about the foods your baby has eaten in the past 4 weeks. I will ask you how often he/she has eaten certain foods and also the amount of food eaten. You should only include food actually eaten, do not include food that was left over or spilled. For some foods, I will show you drawings and models to help you estimate the amount of food. Your baby may sometimes be fed by a relative, friend or someone else. If you know the type of food and approximate amount eaten at these times please include them.

Rows

73	Squash, not including low calorie (amount when diluted)
74	Low cal squash (amount when diluted)
75	Fizzy drinks, not including low calorie
76	Low calorie fizzy drinks
77	Tea (amount without milk)
78	Water

Columns

	Code
How many l	Numeric
Ounces	Numeric

How many F	Numeric
How many I	Numeric
Ounces	Numeric
How many F	Numeric
	Code
Ounces	Numeric
How many I	Numeric
How many F	Numeric
	Code
How many F	Numeric
How many I	Numeric
	Code
Ounces	Numeric

 qi_s2_6 - s2 6

Name qi_s2_6	Label s2 6	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Is there anything else he/she has had to eat or drink 4 or more times (that is, about once a week or more) in the past 4 weeks that we have not already included?

Choices

0	No
1	Yes

 qg_s2_7 - s2 7

Name qg_s2_7	Label s2 7	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		

Condition

Question

Is there anything else he/she has had to eat or drink 4 or more times (that is, about once a week or more) in the past 4 weeks that we have not already included?

Rows

1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10

Columns

	Code
How many I	Numeric
How many F	Numeric
Generic text	Text
Code	Text
Generic text	Text
How many I	Numeric
Generic text	Text
Generic text	Text
	Code
How many F	Numeric
Code	Text
Generic text	Text
Code	Text
Generic text	Text
How many F	Numeric
	Code
How many I	Numeric
Generic text	Text

How many I	Numeric
How many F	Numeric
Generic text	Text
Code	Text
	Code
	Code
Code	Text
How many I	Numeric
How many F	Numeric
Generic text	Text
Generic text	Text
Generic text	Text
How many F	Numeric
Code	Text
Generic text	Text
How many I	Numeric
	Code

 s_s2q7

Name s_s2q7	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Statement	
Condition	

Statement Text

[Note: Nurse to see Lynne Marriott if items exceed 10.]

 qi_s2_8 - s2 8

Name qi_s2_8	Label s2 8	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Integer	Low 0	High

Question

On average over the past 4 weeks, how many meals per week were given to your baby by someone other than yourself?

qi_s2_9 - s2 9

Name qi_s2_9	Label s2 9	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Multiple Choice	Selection Type SelectOne	Display Style
Condition		

Question

*How many of the meals given by others were you able to include in the previous questions?

Choices

0	None
1	Some
2	Most
3	All

qi_s2_10 - s2 10

Name qi_s2_10	Label s2 10	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

During the past 4 weeks have you given him/her any vitamins or minerals, including iron and fluoride drops?

Choices

0	No
1	Yes

qg_s2_11 - s2 11

Name qg_s2_11	Label s2 11	Location Sequence › sws_4_visit › 2 FOOD FREQUENCY QUESTIONNAIRE
Type Question Grid		
Condition If yes,		

Question

please state which:

Rows

1	1
---	---

2	2
3	3
4	4

Columns

How many I	Numeric
Generic text	Text
Other	Text
	Code
How many I	Numeric
Code	Text
How many I	Numeric
Other	Text
Generic text	Text
	Code
How many I	Numeric
Code	Text
How many I	Numeric
Other	Text
	Code
Generic text	Text
How many I	Numeric
Code	Text
Code	Text
Other	Text
	Code
Generic text	Text
How many I	Numeric
How many I	Numeric
Code	Text
Other	Text

	Code
How many I	Numeric
Generic text	Text
How many I	Numeric
How many I	Numeric
Other	Text
	Code
How many I	Numeric
Code	Text
Generic text	Text

3 INTRODUCTION OF FOODS

Label 3 INTRODUCTION OF FOODS	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

s_s3_i

Name s_s3_i	Location Sequence › sws_4_visit › 3 INTRODUCTION OF FOODS
Type Statement	

Statement Text

Now I'd like to ask you about when various foods were first introduced to your baby.

qi_s3_1 - s3 1

Name qi_s3_1	Label s3 1	Location Sequence › sws_4_visit › 3 INTRODUCTION OF FOODS
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Was he/she eating solid foods by 6 months of age?

Choices

0	No
1	Yes

qi_s3_2_i - s3 2(i)

Name qi_s3_2_i	Label s3 2(i)	Location Sequence › sws_4_visit › 3 INTRODUCTION OF FOODS
Type Integer, Integer, Integer	Low 0	High
Condition		

Question

How old was he/she when solids were first regularly introduced? ... mths .. wks ... days

? qi_s3_2_ii - s3 2(ii)		
Name qi_s3_2_ii	Label s3 2(ii)	Location Sequence › sws_4_visit › 3 INTRODUCTION OF FOODS
Type Date		
Condition		

Question

or On what date were solids first regularly introduced?

? qi_s3_3 - s3 3		
Name qi_s3_3	Label s3 3	Location Sequence › sws_4_visit › 3 INTRODUCTION OF FOODS
Type Text	Minimum Length	Maximum Length 4
Condition		

Question

What was the first solid food he/she regularly ate?

Instructions

Use separate coding sheet Use 88 for multiple foods

4 BOTTLE USE	
Label 4 BOTTLE USE	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

? qi_s4_1 - s4 1		
Name qi_s4_1	Label s4 1	Location Sequence › sws_4_visit › 4 BOTTLE USE
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Can he/she drink from an ordinary cup or glass, or have you never tried?

Choices

0	No
1	Yes
2	Never tried

 qg_s4_2 - s4 2

Name qg_s4_2	Label s4 2	Location Sequence › sws_4_visit › 4 BOTTLE USE
Type Question Grid		

Question

*Does he/she have the following drinks from a bottle, cup, both or never has it?

Rows

1	Milk or formula
2	Water
3	Fruit juice or other soft drinks

Columns

	Code
--	------

5 BABY'S ILLNESSES

Label 5 BABY'S ILLNESSES	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

 s_s5_i

Name s_s5_i	Location Sequence › sws_4_visit › 5 BABY'S ILLNESSES
Type Statement	

Statement Text

I would just like to ask a few questions about any illnesses the baby might have had since we last visited you when your baby was about six months old. (Give date of last visit) (Prolonged period with <1 week break between bouts - enter 88)

 qi_s5_1 - s5 1


Name qi_s5_1	Label s5 1	Location Sequence › sws_4_visit › 5 BABY'S ILLNESSES
Type Multiple Choice, Integer	Selection Type SelectUpToN (1)	Display Style

Question

Has he/she had any episodes of chestiness associated with wheezing or whistling in his/her chest? (includes wheezy bronchitis, asthma) Yes - number of times

Choices

0	No
---	----

 qi_s5_2 - s5 2

Name qi_s5_2	Label s5 2	Location Sequence › sws_4_visit › 5 BABY'S ILLNESSES
Type Integer, Integer, Integer	Low 0	High

Condition

Question

How old was he/she at the start of the first episode ? ... mths ... wks ... days

 qi_s5_3 - s5 3


Name qi_s5_3	Label s5 3	Location Sequence › sws_4_visit › 5 BABY'S ILLNESSES
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

In the past six months, other than during the first week of a cold, has he/she woken at night with coughing for 3 or more nights in a row?

Choices

0	No
1	Yes

 qi_s5_4 - s5 4


Name qi_s5_4	Label s5 4	Location Sequence › sws_4_visit › 5 BABY'S ILLNESSES
Type Multiple Choice, Integer	Selection Type SelectUpToN (1)	Display Style

Question

In the past six months has he/she ever been diagnosed by a doctor as having had pneumonia or bronchiolitis? (don't include bronchitis or "chest infection") Yes - number of times

Choices

0	No
---	----

 qi_s5_5 - s5 5


Name qi_s5_5	Label s5 5	Location Sequence › sws_4_visit › 5 BABY'S ILLNESSES
Type Multiple Choice, Integer	Selection Type SelectUpToN (1)	Display Style

Question

In the past six months, has he/she ever been diagnosed by a doctor as having had a chest infection or bronchitis ? (includes wheezy bronchitis) Yes - number of times

Choices

0	No
---	----

 qi_s5_6 - s5 6


Name qi_s5_6	Label s5 6	Location Sequence › sws_4_visit › 5 BABY'S ILLNESSES
Type Multiple Choice, Integer	Selection Type SelectUpToN (1)	Display Style

Question

In the past six months, has he/she had any episodes of croup or a croupy cough ? (i.e. a barking cough worse at night) Yes - number of episodes

Choices

0	No
---	----

 qi_s5_7 - s5 7


Name qi_s5_7	Label s5 7	Location Sequence › sws_4_visit › 5 BABY'S ILLNESSES
Type Multiple Choice, Integer	Selection Type SelectUpToN (1)	Display Style

Question

In the past six months, has he/she had any bouts of vomiting lasting 2 days or longer ? (do not include possetting or regurgitation) Yes - number of bouts

Choices

0	No
---	----

 qi_s5_8 - s5 8

Name qi_s5_8	Label s5 8	Location Sequence › sws_4_visit › 5 BABY'S ILLNESSES
Type Multiple Choice, Integer	Selection Type SelectUpToN (1)	Display Style

Question

In the past six months, has he/she had any bouts of diarrhoea lasting 2 days or longer ? Yes - number of bouts

Instructions

(probe; diarrhoea=frequent unformed stools)

Choices

0	No
---	----

 qi_s5_9 - s5 9

Name qi_s5_9	Label s5 9	Location Sequence › sws_4_visit › 5 BABY'S ILLNESSES
Type Multiple Choice, Integer	Selection Type SelectUpToN (1)	Display Style

Question

In the past six months, has he/she ever been diagnosed by a doctor as having an ear infection ? Yes - number of times

Choices

0	No
---	----

6 ANTIBIOTICS & ANTIHISTAMINES


Label 6 ANTIBIOTICS & ANTIHISTAMINES	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

 s_s6_i

Name s_s6_i	Location Sequence › sws_4_visit › 6 ANTIBIOTICS & ANTIHISTAMINES
Type Statement	

Statement Text

I'd now like to ask about your child's treatment with antibiotics and/or antihistamines prescribed by a doctor or hospital at any time since birth.

 qi_s6_1 - s6 1

Name qi_s6_1	Label s6 1	Location Sequence › sws_4_visit › 6 ANTIBIOTICS & ANTIHISTAMINES
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Has he/she ever been given antibiotics as a treatment?

Choices

0	No
1	Yes

 qi_s6_2_i - s6 2(i)

Name qi_s6_2_i	Label s6 2(i)	Location Sequence › sws_4_visit › 6 ANTIBIOTICS & ANTIHISTAMINES
Type Integer, Integer, Integer	Low 0	High

Condition

Question

How old was he/she when first given them? ... mths ... wks ... days


 qi_s6_2_ii - s6 2(ii)

Name qi_s6_2_ii	Label s6 2(ii)	Location Sequence › sws_4_visit › 6 ANTIBIOTICS & ANTIHISTAMINES
Type Date		

Condition

Question

or on what date was he/she first given them ?

 qi_s6_3 - s6 3

Name qi_s6_3	Label s6 3	Location Sequence › sws_4_visit › 6 ANTIBIOTICS & ANTIHISTAMINES
Type Integer	Low 0	High

Condition

Question

How many times have they been prescribed for him/her?

Instructions

(Prolonged period with <1 week break between bouts - enter 88)

qi_s6_4 - s6 4

Name qi_s6_4	Label s6 4	Location Sequence › sws_4_visit › 6 ANTIBIOTICS & ANTIHISTAMINES
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Has he/she had any antihistamine syrup in the last 7 days?

Choices

0	No
1	Yes

7 SKIN CONDITIONS

Label 7 SKIN CONDITIONS	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

qi_s7_1 - s7 1

Name qi_s7_1	Label s7 1	Location Sequence › sws_4_visit › 7 SKIN CONDITIONS
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Has he/she had an itchy skin condition at any time in the past six months - by itchy we mean scratching or rubbing the skin a lot ?

Instructions

(exclude chicken pox)

Choices

0	No
1	Yes

qi_s7_2 - s7 2

Name qi_s7_2	Label s7 2	Location Sequence › sws_4_visit › 7 SKIN CONDITIONS
Type Multiple Choice	Selection Type SelectOne	Display Style


Condition

Question

Has this skin condition affected the cheeks, the outer arms or legs, or the skin creases in the past - by skin creases we mean the folds of the elbows, behind the knees, the fronts of the ankles, or around the eyes ?

Choices

0	No
1	Yes

 qi_s7_3 - s7 3

Name qi_s7_3	Label s7 3	Location Sequence › sws_4_visit › 7 SKIN CONDITIONS
Type Integer, Integer, Integer	Low 0	High
Condition		

Question

How old was he/she when the rash first appeared ? ... mths ... wks ... days

 qi_s7_4 - s7 4


Name qi_s7_4	Label s7 4	Location Sequence › sws_4_visit › 7 SKIN CONDITIONS
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

In the past six months, has he/she suffered from a generally dry skin ?

Choices

0	No
1	Yes
8	To a minor degree

 qg_s7_5_a-h - s7 5(a-h)

Name qg_s7_5_a-h	Label s7 5(a-h)	Location Sequence › sws_4_visit › 7 SKIN CONDITIONS
Type Question Grid		

Question

*In the past six months, has he/she had a scaly, or red and weeping skin rash affecting any of the following areas:

Rows

1	the scalp or behind the ears (including "cradle cap")
2	around the neck
3	the cheeks or forehead
4	either the folds of the elbows or behind the knees
5	the forearms, wrists, shins or ankles
6	the shoulders, chest, tummy or back
7	in the armpits
8	the nappy area (including nappy rash)

Columns

	Code
--	------

 qi_s7_5_i - s7 5(i)

Name qi_s7_5_i	Label s7 5(i)	Location Sequence > sws_4_visit > 7 SKIN CONDITIONS
Type Multiple Choice	Selection Type SelectOne	Display Style

Condition
If yes to (C), (D), (E), (F) or (G),

Question

have you ever been able to clearly link a rash on his/her face, trunk or limbs with teething?

Choices

0	No
1	Yes

 qi_s7_5_ii - s7 5(ii)

Name qi_s7_5_ii	Label s7 5(ii)	Location Sequence > sws_4_visit > 7 SKIN CONDITIONS
Type Multiple Choice	Selection Type SelectOne	Display Style

Condition
If yes to (C), (D), (E), (F) or (G),

Question

or with specific foods

Choices

0	No
1	Yes

 qi_s7_6 - s7 6

Name qi_s7_6	Label s7 6	Location Sequence › sws_4_visit › 7 SKIN CONDITIONS
Type Text	Minimum Length	Maximum Length 255
Condition If yes, If yes to (C), (D), (E), (F) or (G),		

Question

which foods?

8 ALLERGIES


Label 8 ALLERGIES	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

 s_s8_i

Name s_s8_i	Location Sequence › sws_4_visit › 8 ALLERGIES
Type Statement	

Statement Text

One of the things we are trying to determine is why some children become allergic to cats & dogs whereas many others don't.

 qi_s8_1 - s8 1

Name qi_s8_1	Label s8 1	Location Sequence › sws_4_visit › 8 ALLERGIES
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

I would first like to ask whether you have kept a cat at home at any time in the past six months?

Choices

0	No
1	Yes

 qi_s8_2 - s8 2

Name qi_s8_2	Label s8 2	Location Sequence › sws_4_visit › 8 ALLERGIES
-----------------	---------------	--

Type	Selection Type	Display Style
Multiple Choice	SelectOne	

Condition
If yes, and offered,

Question

is the cat kept:

Choices

1	Only in a separate room
2	Only outside the house

 s_s8q2

Name	Location
s_s8q2	Sequence > sws_4_visit > 8 ALLERGIES
Type	
Statement	

Condition
If yes, and offered,

Statement Text

if yes & not offered, go to 8.5

 qi_s8_3 - s8 3

Name	Label	Location
qi_s8_3	s8 3	Sequence > sws_4_visit > 8 ALLERGIES
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

Condition
If No to question 8.1 go to 8.3

Question

*How often has he/she visited homes that keep a cat or cats in the past six months?.

Choices

0	Never
1	Infrequently (once a month or less)
2	Fairly frequently (several times a month)
3	Frequently (several times a week)
4	Every day or almost every day

 qi_s8_4 - s8 4

Name	Label	Location
qi_s8_4	s8 4	Sequence > sws_4_visit > 8 ALLERGIES

Type	Selection Type	Display Style
Multiple Choice	SelectOne	
Condition		
If yes, and offered, If No to question 8.1 go to 8.3		

Question

is the cat kept:

Choices

1	Only in a separate room
2	Only outside the house

 qi_s8_5 - s8 5

Name	Label	Location
qi_s8_5	s8 5	Sequence › sws_4_visit › 8 ALLERGIES
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

Question

And similarly, have you kept a dog at home at any time in the past six months?

Choices

0	No
1	Yes

 qi_s8_6 - s8 6

Name	Label	Location
qi_s8_6	s8 6	Sequence › sws_4_visit › 8 ALLERGIES
Type	Selection Type	Display Style
Multiple Choice	SelectOne	

Condition		
If yes, and offered,		

Question

is the dog kept:

Choices

1	Only in a separate room
2	Only outside the house

 s_s8q6

Name	Location
s_s8q6	Sequence › sws_4_visit › 8 ALLERGIES
Type	
Statement	

Condition

If yes, and offered,

Statement Text

if yes & not offered, go to section 9

qi_s8_7 - s8 7

Name qi_s8_7	Label s8 7	Location Sequence › sws_4_visit › 8 ALLERGIES
Type Multiple Choice	Selection Type SelectOne	Display Style

Condition

If No to question 8.5 go to 8.7

Question

*How often has he/she visited homes that keep a dog or dogs in the past six months?

Choices

0	Never
1	Infrequently (once a month or less)
2	Fairly frequently (several times month)
3	Frequently (several times a week)
4	Every day or almost every day

qi_s8_8 - s8 8

Name qi_s8_8	Label s8 8	Location Sequence › sws_4_visit › 8 ALLERGIES
Type Multiple Choice	Selection Type SelectOne	Display Style

Condition

If yes, and offered, [qc_s8_7 == 1 || qc_s8_7 == 2 || qc_s8_7 == 3 || qc_s8_7 == 4
If No to question 8.5 go to 8.7

Question


is the dog kept:

Choices

1	Only in a separate room
2	Only outside the house

9 SLEEPING ARRANGEMENTS

Label 9 SLEEPING ARRANGEMENTS	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

 qi_s9_1 - s9 1


Name qi_s9_1	Label s9 1	Location Sequence › sws_4_visit › 9 SLEEPING ARRANGEMENTS
Type Multiple Choice, Text	Selection Type SelectOne	Display Style

Question

*Does he/she sleep mainly

Choices

1	in the same bedroom as brothers or sisters
2	in the same bedroom as parents
3	in his/her own bedroom
8	other, specify

 qi_s9_2 - s9 2

Name qi_s9_2	Label s9 2	Location Sequence › sws_4_visit › 9 SLEEPING ARRANGEMENTS
Type Float	Low 0	High

Question

How many times per night (between midnight and 6am) does he/she generally wake for feeding or any other reason? Please answer this in relation to the last 2 weeks? ... per night

10 MOTHER'S EMPLOYMENT

Label 10 MOTHER'S EMPLOYMENT	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

 qi_s10_1 - s10 1

Name qi_s10_1	Label s10 1	Location Sequence › sws_4_visit › 10 MOTHER'S EMPLOYMENT
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Are you currently employed in paid work ?

Choices

0	No
1	Yes

 qi_s10_2_i - s10 2(i)

Name qi_s10_2_i	Label s10 2(i)	Location Sequence › sws_4_visit › 10 MOTHER'S EMPLOYMENT
Type Text	Minimum Length	Maximum Length 255
Condition		

Question

What is your current job? Job Position

 qi_s10_2_ii - s10 2(ii)


Name qi_s10_2_ii	Label s10 2(ii)	Location Sequence › sws_4_visit › 10 MOTHER'S EMPLOYMENT
Type Multiple Choice	Selection Type SelectOne	Display Style
Condition		

Question

What is your current job?

Choices

1	Self-employed
2	manager
3	foreman
4	employee

 qi_s10_2_iii - s10 2(iii)

Name qi_s10_2_iii	Label s10 2(iii)	Location Sequence › sws_4_visit › 10 MOTHER'S EMPLOYMENT
Type Text	Minimum Length	Maximum Length 255
Condition		

Question

What is your current job? Industry

 qi_s10_3_i - s10 3(i)

Name qi_s10_3_i	Label s10 3(i)	Location Sequence › sws_4_visit › 10 MOTHER'S EMPLOYMENT
--------------------	-------------------	--

Type Integer, Integer, Integer	Low 0	High
Condition		


Question

How old was the baby when you went back to work? ... mths ... wks ... days

 qi_s10_3_ii - s10 3(ii)		
Name qi_s10_3_ii	Label s10 3(ii)	Location Sequence › sws_4_visit › 10 MOTHER'S EMPLOYMENT
Type Date		
Condition		

Question

or on what date did you go back to work ?

 qi_s10_4 - s10 4		
Name qi_s10_4	Label s10 4	Location Sequence › sws_4_visit › 10 MOTHER'S EMPLOYMENT
Type Integer, Integer	Low 0	High 168
Condition		

Question

How many hours did you work over the last week ? ... hrs ... mins

11 INFANT EXAMINATION

Label 11 INFANT EXAMINATION	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

 qi_s11_1 - s11 1		
Name qi_s11_1	Label s11 1	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Date		

Question

Measurement Date

 qi_s11_2 - s11 2		
--	--	--

Name qi_s11_2	Label s11 2	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Time		

Question

Time (24 hr clock)

 qi_s11_3 - s11 3

Name qi_s11_3	Label s11 3	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Text	Minimum Length	Maximum Length 255

Question

Measurer

 qi_s11_4 - s11 4

Name qi_s11_4	Label s11 4	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Text, Text	Minimum Length	Maximum Length 255

Question

Helpers (Parent 90)

 qg_s11_5 - s11 5

Name qg_s11_5	Label s11 5	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Question Grid		

Question

Occipito-frontal circumference

Rows

1	1
2	2
3	3

Columns

Centimetres	Numeric
-------------	---------

 qi_s11_5_i - s11 5(i)

Name qi_s11_5_i	Label s11 5(i)	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Occipito-frontal circumference: Crying

Choices

0	No
1	Yes

 qg_s11_6 - s11 6

Name qg_s11_6	Label s11 6	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Question Grid		

Question

Left mid-upper arm circumference (arm straight)

Rows

1	1
2	2
3	3

Columns

Centimetres	Numeric
-------------	---------

 qi_s11_6_i - s11 6(i)

Name qi_s11_6_i	Label s11 6(i)	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Left mid-upper arm circumference (arm straight): Crying

Choices

0	No
1	Yes

 qg_s11_7 - s11 7

Name qg_s11_7	Label s11 7	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Question Grid		

Question

Chest circumference

Rows

1	1
2	2
3	3

Columns

Centimetres	Numeric
-------------	---------

 qi_s11_7_i - s11 7(i)

Name qi_s11_7_i	Label s11 7(i)	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Chest circumference: Crying

Choices

0	No
1	Yes

 qg_s11_8 - s11 8

Name qg_s11_8	Label s11 8	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Question Grid		

Question

Abdominal circumference

Rows

1	1
2	2
3	3

Columns

Centimetres	Numeric
-------------	---------

 qi_s11_8_i - s11 8(i)


Name qi_s11_8_i	Label s11 8(i)	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Abdominal circumference: Crying

Choices

0	No
1	Yes

 s_s11q9

Name s_s11q9	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Statement	

Statement Text

Skinfold thicknesses

 qg_s11_9 - s11 9

Name qg_s11_9	Label s11 9	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Question Grid		

Question

Triceps skinfold

Rows

1	1
2	2
3	3

Columns

Millimetres F	Numeric
---------------	---------

 qi_s11_9_i - s11 9(i)

Name qi_s11_9_i	Label s11 9(i)	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
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Type Multiple Choice	Selection Type SelectOne	Display Style
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Question

Triceps skinfold: Crying

Choices

0	No
1	Yes

 qg_s11_10 - s11 10

Name qg_s11_10	Label s11 10	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Question Grid		

Question

Subscapular skinfold

Rows

1	1
2	2
3	3

Columns

Millimetres F	Numeric
---------------	---------

 qi_s11_10_i - s11 10(i)

Name qi_s11_10_i	Label s11 10(i)	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Subscapular skinfold: Crying

Choices

0	No
1	Yes

 qi_s11_11 - s11 11

Name qi_s11_11	Label s11 11	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
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Type Text	Minimum Length	Maximum Length 255
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Question

Skinfold calipers used

 qg_s11_12 - s11 12		
Name qg_s11_12	Label s11 12	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Question Grid		

Question


Crown-rump length (infantometer)

Rows

1	1
2	2
3	3

Columns

Centimetres	Numeric
-------------	---------

 qi_s11_12_i - s11 12(i)		
Name qi_s11_12_i	Label s11 12(i)	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Crown-rump length (infantometer): Crying

Choices

0	No
1	Yes

 qg_s11_13 - s11 13		
Name qg_s11_13	Label s11 13	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Question Grid		

Question


Crown-heel length (left leg) (infantometer)

Rows

1	1
2	2
3	3

Columns

Centimetres	Numeric
-------------	---------

 qi_s11_13_i - s11 13(i)

Name qi_s11_13_i	Label s11 13(i)	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Crown-heel length (left leg) (infantometer): Crying

Choices

0	No
1	Yes

 qi_s11_14 - s11 14

Name qi_s11_14	Label s11 14	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Integer	Low 0	High

Question

Minimum carriage reading ... mm

 qi_s11_15 - s11 15

Name qi_s11_15	Label s11 15	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Text	Minimum Length	Maximum Length 255

Question


Anthropometer used

 qi_s11_16 - s11 16

Name qi_s11_16	Label s11 16	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Float	Low 0	High

Question

Baby weight (preferably nude) ... kg

 qi_s11_17 - s11 17


Name qi_s11_17	Label s11 17	Location Sequence › sws_4_visit › 11 INFANT EXAMINATION
Type Float	Low 0	High

Question

Weight of any clothes / nappy ... kg

12 TEETH


Label 12 TEETH	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

 qi_s12_1 - s12 1

Name qi_s12_1	Label s12 1	Location Sequence › sws_4_visit › 12 TEETH
Type Integer	Low 0	High

Question

Number of teeth

 qi_s12_2 - s12 2

Name qi_s12_2	Label s12 2	Location Sequence › sws_4_visit › 12 TEETH
Type		

Question

Position of teeth

Instructions

(Mark with a cross for each tooth present)

External Aids

image

- https://discovery.closer.ac.uk/external_aids/sws_4_visit/qc_s12_2.PNG

 qi_s12_3_i - s12 3(i)

Name qi_s12_3_i	Label s12 3(i)	Location Sequence › sws_4_visit › 12 TEETH
Type Integer, Integer, Integer	Low 0	High

Question

How old was your baby when he/she cut his/her first tooth? ... mths ... wks ... days

? qi_s12_3_ii - s12 3(ii)		
Name qi_s12_3_ii	Label s12 3(ii)	Location Sequence › sws_4_visit › 12 TEETH
Type Date		

Question

or on what date did he/she cut his/her first tooth ?

13 SKIN EXAMINATION

Label 13 SKIN EXAMINATION	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

i s_s13_i	
Name s_s13_i	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Statement	

Statement Text

*Eczema = poorly defined redness with scaling, crusting, vesicles or accentuated skin markings (lichenification)

? qi_s13_1_i - s13 1(i)		
Name qi_s13_1_i	Label s13 1(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Is/are there any? Eczema*

Choices

0	No
1	Yes

? qi_s13_1_ii - s13 1(ii)		
---------------------------	--	--

Name qi_s13_1_ii	Label s13 1(ii)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Is/are there any? Birthmarks

Choices

0	No
1	Yes

 qi_s13_2_i - s13 2(i)


Name qi_s13_2_i	Label s13 2(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Scalp / Behind ears Eczema*

Choices

0	No
1	Yes

 qi_s13_2_ii - s13 2(ii)

Name qi_s13_2_ii	Label s13 2(ii)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Scalp / Behind ears Birthmarks

Instructions

see codes below

Choices

1	Strawberry Naevus
2	Port Wine Stain
3	Stork Mark
4	Café au lait
5	Mongolian blue spot

6	Nevus sebaceous
7	Nevus pilus
8	Other birthmark, unclassified

 qi_s13_3_i - s13 3(i)

Name qi_s13_3_i	Label s13 3(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Face - cheeks & forehead Eczema*

Choices

0	No
1	Yes

 qi_s13_3_ii - s13 3(ii)

Name qi_s13_3_ii	Label s13 3(ii)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Face - cheeks & forehead Face - around the mouth Birthmarks

Instructions

see codes below

Choices

1	Strawberry Naevus
2	Port Wine Stain
3	Stork Mark
4	Café au lait
5	Mongolian blue spot
6	Nevus sebaceous
7	Nevus pilus
8	Other birthmark, unclassified

 qi_s13_4_i - s13 4(i)

Name qi_s13_4_i	Label s13 4(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Face - around the mouth Eczema*

Choices

0	No
1	Yes

 qi_s13_5_i - s13 5(i)

Name qi_s13_5_i	Label s13 5(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Neck Eczema*

Choices

0	No
1	Yes

 qi_s13_5_ii - s13 5(ii)

Name qi_s13_5_ii	Label s13 5(ii)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Neck Birthmarks

Instructions

see codes below

Choices

1	Strawberry Naevus
2	Port Wine Stain
3	Stork Mark
4	Café au lait
5	Mongolian blue spot

6	Nevus sebaceous
7	Nevus spilus
8	Other birthmark, unclassified

 qi_s13_6_i - s13 6(i)

Name qi_s13_6_i	Label s13 6(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Arms - palms of the hands Eczema*

Choices

0	No
1	Yes

 qi_s13_6_ii - s13 6(ii)

Name qi_s13_6_ii	Label s13 6(ii)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Arms - palms of the hands Birthmarks

Instructions

see codes below

Choices

1	Strawberry Naevus
2	Port Wine Stain
3	Stork Mark
4	Café au lait
5	Mongolian blue spot
6	Nevus sebaceous
7	Nevus spilus
8	Other birthmark, unclassified

 qi_s13_7_i - s13 7(i)

Name qi_s13_7_i	Label s13 7(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Arms - antecubital fossae Eczema*

Choices

0	No
1	Yes

 qi_s13_7_ii - s13 7(ii)

Name qi_s13_7_ii	Label s13 7(ii)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Arms - antecubital fossae Arms - remainder (backs of hands, forearms, upper arms) Arms - axillae Birthmarks

Instructions

see codes below

Choices

1	Strawberry Naevus
2	Port Wine Stain
3	Stork Mark
4	Café au lait
5	Mongolian blue spot
6	Nevus sebaceous
7	Nevus spilus
8	Other birthmark, unclassified

 qi_s13_8_i - s13 8(i)

Name qi_s13_8_i	Label s13 8(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Arms - remainder (backs of hands, forearms, upper arms) Eczema*

Choices

0	No
1	Yes

 qi_s13_9_i - s13 9(i)


Name qi_s13_9_i	Label s13 9(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Arms - axillae Eczema*

Choices

0	No
1	Yes

 qi_s13_10_i - s13 10(i)


Name qi_s13_10_i	Label s13 10(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Trunk - back Eczema*

Choices

0	No
1	Yes

 qi_s13_10_ii - s13 10(ii)

Name qi_s13_10_ii	Label s13 10(ii)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Trunk - back Birthmarks

Instructions

see codes below

Choices

1	Strawberry Naevus
2	Port Wine Stain

3	Stork Mark
4	Café au lait
5	Mongolian blue spot
6	Nevus sebaceous
7	Nevus spilus
8	Other birthmark, unclassified

 qi_s13_11_i - s13 11(i)

Name qi_s13_11_i	Label s13 11(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Trunk - front (chest & abdomen) Eczema*

Choices

0	No
1	Yes

 qi_s13_11_ii - s13 11(ii)

Name qi_s13_11_ii	Label s13 11(ii)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Trunk - front (chest & abdomen) Birthmarks

Instructions

see codes below

Choices

1	Strawberry Naevus
2	Port Wine Stain
3	Stork Mark
4	Café au lait
5	Mongolian blue spot
6	Nevus sebaceous
7	Nevus spilus
8	Other birthmark, unclassified

 qi_s13_12_i - s13 12(i)

Name qi_s13_12_i	Label s13 12(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Legs - soles of feet Eczema*

Choices

0	No
1	Yes

 qi_s13_12_ii - s13 12(ii)

Name qi_s13_12_ii	Label s13 12(ii)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Legs - soles of feet Birthmarks

Instructions

see codes below

Choices

1	Strawberry Naevus
2	Port Wine Stain
3	Stork Mark
4	Café au lait
5	Mongolian blue spot
6	Nevus sebaceous
7	Nevus spilus
8	Other birthmark, unclassified

 qi_s13_13_i - s13 13(i)

Name qi_s13_13_i	Label s13 13(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Legs - popliteal fossae (behind knees) Eczema*

Choices

0	No
1	Yes

 qi_s13_13_ii - s13 13(ii)

Name qi_s13_13_ii	Label s13 13(ii)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Legs - popliteal fossae (behind knees) Legs - remainder of (ie. thighs, lower leg, dorsa feet) Birthmarks

Instructions

see codes below

Choices

1	Strawberry Naevus
2	Port Wine Stain
3	Stork Mark
4	Café au lait
5	Mongolian blue spot
6	Nevus sebaceous
7	Nevus pilus
8	Other birthmark, unclassified

 qi_s13_14_i - s13 14(i)

Name qi_s13_14_i	Label s13 14(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Legs - remainder of (ie. thighs, lower leg, dorsa feet) Eczema*

Choices

0	No
1	Yes

 qi_s13_15_i - s13 15(i)

Name qi_s13_15_i	Label s13 15(i)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Nappy area (incl. nappy rash) Eczema*

Choices

0	No
1	Yes

 qi_s13_15_ii - s13 15(ii)

Name qi_s13_15_ii	Label s13 15(ii)	Location Sequence › sws_4_visit › 13 SKIN EXAMINATION
Type Multiple Choice	Selection Type SelectOne	Display Style

Question

Nappy area (incl. nappy rash) Birthmarks

Instructions


see codes below

Choices

1	Strawberry Naevus
2	Port Wine Stain
3	Stork Mark
4	Café au lait
5	Mongolian blue spot
6	Nevus sebaceous
7	Nevus spilus
8	Other birthmark, unclassified

14 SKIN PRICK TESTING

Label 14 SKIN PRICK TESTING	Location Sequence › sws_4_visit
Type Sequence	Order InOrderOfAppearance

 qg_s14_1 - s14 1

Name qg_s14_1	Label s14 1	Location Sequence › sws_4_visit › 14 SKIN PRICK TESTING
Type Question Grid		

Question

Mother's skin prick testing is done on her forearm and the child's on his/her back.

Rows

1	Cat
2	Dog
3	Egg
4	Saline (neg control)
5	Grass Pollens
6	House dust mite (D. pteronyss.)
7	Milk
8	Histamine (pos control)

Columns

Millimetres I	Numeric
Millimetres I	Numeric
Millimetres I	Numeric
Millimetres I	Numeric

 qi_s14_2 - s14 2		
Name qi_s14_2	Label s14 2	Location Sequence › sws_4_visit › 14 SKIN PRICK TESTING
Type Text	Minimum Length	Maximum Length 255

Question

Skin prick tester