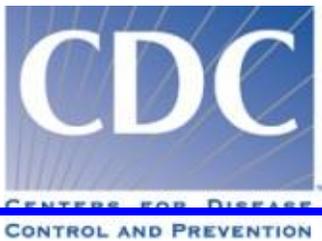# United States

2012 Land Line And Cell Phone Codebook Report

CHILD Asthma Call-Back Survey

March 11, 2014

STATE FIPS CODE
  Survey: CHILD Asthma Call-Back   **Type:** NUM
  Column: 1-2   **SAS Variable Name:** _STATE
  Prologue:
Description: STATE FIPS CODE .

Value	Value Label	Frequency	Percentage	Weighted Percentage
6	California	81	7.36	35.89
15	Hawaii	82	7.45	1.51
26	Michigan	147	13.36	8.65
28	Mississippi	86	7.82	2.80
31	Nebraska	170	15.45	1.23
35	New Mexico	79	7.18	1.71
39	Ohio	90	8.18	8.77
42	Pennsylvania	185	16.82	10.83
48	Texas	92	8.36	23.64
53	Washington	88	8.00	4.96

MONTH NAME OF SOURCE FILE ASTHMA CALL-BACK

Survey: CHILD Asthma Call-Back
Column: 3-4
Prologue:
Description: FILE MONTH

Type: NUM
SAS Variable Name: FMONTH_F

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	January	134	12.18	15.93
2	February	103	9.36	10.16
3	March	91	8.27	3.78
4	April	135	12.27	15.53
5	May	74	6.73	3.66
6	June	83	7.55	5.19
7	July	115	10.45	12.97
8	August	85	7.73	5.43
9	September	69	6.27	5.49
10	October	114	10.36	14.75
11	November	49	4.45	3.27
12	December	48	4.36	3.83

MONTH OF ASTHMA CALL-BACK INTERVIEW

Survey: CHILD Asthma Call-Back
Column: 13-14
Prologue:
Description: MONTH OF ASTHMA CALL-BACK INTERVIEW

Type: NUM
SAS Variable Name: IMONTH_F

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	January	46	4.18	5.73
2	February	89	8.09	14.18
3	March	123	11.18	11.33
4	April	97	8.82	6.26
5	May	112	10.18	4.84
6	June	116	10.55	11.54
7	July	88	8.00	6.28
8	August	72	6.55	4.41
9	September	101	9.18	7.18
10	October	89	8.09	12.20
11	November	74	6.73	6.96
12	December	93	8.45	9.11

DAY OF ASTHMA CALL-BACK INTERVIEW

Survey: CHILD Asthma Call-Back
Column: 15-16
Prologue:
Description: DAY OF ASTHMA CALL-BACK INTERVIEW

Type: NUM
SAS Variable Name: IDAY_F

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN		1,100	100.00	100.00

YEAR OF ASTHMA CALL-BACK INTERVIEW

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 17-20   **SAS Variable Name:** IYEAR_F
Prologue:
Description: YEAR OF ASTHMA CALL-BACK INTERVIEW

Value	Value Label	Frequency	Percentage	Weighted Percentage
2012	Interview year	1,053	95.73	94.24
2013	Interview year	47	4.27	5.76

INTERVIEWER ID OF ASTHMA CALL-BACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 21-23   **SAS Variable Name:** INTVID_F
Prologue:
Description: INTERVIEWER ID OF ASTHMA CALL-BACK

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN		1,100	100.00	100.00

DISPOSITION OF ASTHMA CALL-BACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 24-26   **SAS Variable Name:** DISPCODE_F
Prologue:
Description: DISPOSITION OF ASTHMA CALL-BACK

Value	Value Label	Frequency	Percentage	Weighted Percentage
1100	Complete	1,099	99.91	99.91
1200	Partial complete	1	0.09	0.09

ANNUAL SEQUENCE NUMBER

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 27-36   **SAS Variable Name:** SEQNO
Prologue:
Description: ANNUAL SEQUENCE NUMBER

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN		1,100	100.00	100.00

NUMBER OF ATTEMPTS OF ASTHMA CALL-BACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 37-38   **SAS Variable Name:** NATTMPTS_F
Prologue:
Description: NUMBER OF ATTEMPTS OF ASTHMA CALL-BACK

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN		1,100	100.00	100.00

PERMIT TO CALL BACK FROM BRFSS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 39   **SAS Variable Name:** CALLBACK
Prologue:
Description: PERMIT TO CALL BACK FROM BRFSS

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,100	100.00	100.00

ARE YOU SAMPLE PERSON

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 40   **SAS Variable Name:** MKP_NAME
Prologue:
Description: Q1.1   Are you [sample person's first name or initials]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,026	93.27	95.60
2	No	74	6.73	4.40

MAY I SPEAK WITH PERSON

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 41   **SAS Variable Name:** MKP_PERS
Prologue:
Description: Q1.2   May I speak with [sample person's first name or initials]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	74	100.00	100.00
BLANK	Not asked or missing	1,026		

INTRODUCTION TO CORRECT RESPONDENT

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 42   **SAS Variable Name:** MKP_STATUS
Prologue: If parent or guardian requests to transfer to another person who is more knowledgeable about the child's asthma, then mark the transfer.
Description: Q1.2a   Tracking of MKP survey respondent.

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	BRFSS respondent is the MKP and will continue	22	34.92	10.79
2	Alternate respondent is the MKP and will continue	41	65.08	89.21
BLANK	Not asked or missing	1,037		

CHECK CORRECT PERSON ON PHONE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 43   **SAS Variable Name:** REPEAT
Prologue: FOR THOSE WHO DISAGREE WITH BRFSS ASTHMA STATUS: Check if correct person from core survey is on phone.
Description: Q2.0   Is this [sample person's name] and are you [sample person's age] years old? (IF YES, CONTINUE WITH Q2.1)

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	128	100.00	100.00
BLANK	Not asked or missing	972		

EVER HAVE ASTHMA INCONSISTENT WITH BRFSS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 44   **SAS Variable Name:** EVER_ASTH
Prologue: FOR THOSE WHO DISAGREE WITH BRFSS ASTHMA STATUS: I would like to repeat the questions from the previous survey now to make sure [child's name] qualifies for this study.
Description: Q2.1   Have you ever been told by a doctor or other health professional that [child's name] had asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	128	100.00	100.00
BLANK	Not asked or missing	972		

STILL HAVE ASTHMA INCONSISTENT WITH BRFSS

Survey: CHILD Asthma Call-Back **Type:** NUM

Column: 45 **SAS Variable Name:** CUR_ASTH

Prologue: FOR THOSE WHO DISAGREE WITH BRFSS ASTHMA STATUS: I would like to repeat the questions from the previous survey now to make sure [child's name] qualifies for this study.

Description: Q2.2   Does [he/she] still have asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	84	65.63	78.48
2	No	40	31.25	20.95
7	Don´t know/Not sure	4	3.13	0.57
BLANK	Not asked or missing	972		

RELATIONSHIP TO CHILD FROM QUESTION

Survey: CHILD Asthma Call-Back **Type:** NUM

Column: 46 **SAS Variable Name:** RELATION

Prologue:

Description: Q2.3   What is your relationship to the child?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Mother (Birth/Adoptive/Step)	262	74.43	76.52
2	Father (Birth/Adoptive/Step)	76	21.59	21.42
3	Brother/Sister (Step/Foster/Half/Adoptive)	2	0.57	0.33
4	Grandparent (Father/Mother)	3	0.85	0.87
5	Other relative	1	0.28	0.04
6	Unrelated	8	2.27	0.81
BLANK	Not asked or missing	748		

LEGAL GUARDIAN

Survey: CHILD Asthma Call-Back **Type:** NUM

Column: 47 **SAS Variable Name:** GUARDIAN

Prologue:

Description: Q2.4   Are you the legal guardian for [child's name]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	13	92.86	99.17
2	No	1	7.14	0.83
BLANK	Not asked or missing	1,086		

PERMISSION TO COMBINE THE ANSWER WITH BRFSS

Survey: CHILD Asthma Call-Back **Type:** NUM

Column: 48 **SAS Variable Name:** PERMISS

Prologue:

Description: Q2.5   May we combine your answers to this survey with your answers from the survey you did a few weeks ago?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	536	48.73	84.09
7	Don´t know/Not sure	564	51.27	15.91

AGE AT ASTHMA DIAGNOSIS

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 49-51   **SAS Variable Name:** AGEDX

Prologue:

Description: Q3.1   How old was [child's name] when a doctor or other health professional first said [he/she] had asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 17	Age in years	905	82.27	79.24
777	Don´t know	20	1.82	2.54
888	Less than 1 year old	175	15.91	18.22

TIME SINCE DIAGNOSIS

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 52   **SAS Variable Name:** INCIDNT

Prologue:

Description: Q3.2   How long ago was that?   Was it . . .   [READ CATEGORIES]

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Within the past 12 months	50	4.55	3.47
2	One to five years ago	351	31.91	39.48
3	More than 5 years ago	699	63.55	57.05

LAST TALKED TO A DOCTOR

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 53-54   **SAS Variable Name:** LAST_MD

Prologue:

Description: Q3.3   How long has it been since you last talked to a doctor or other health professional about [child's name]'s asthma? This could have been in a doctor's office, the hospital, an emergency room or urgent care center.

Value	Value Label	Frequency	Percentage	Weighted Percentage
4	Within the past year	700	63.64	67.01
5	One year to less than 3 years ago	204	18.55	18.21
6	Three years to five years ago	90	8.18	9.60
7	More than five years ago	98	8.91	4.84
77	Don´t know	2	0.18	0.03
88	Never	6	0.55	0.31

LAST TOOK ASTHMA MEDICATION

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 55-56   **SAS Variable Name:** LAST_MED

Prologue:

Description: Q3.4   How long has it been since [he/she] last took asthma medication?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 1 day ago	237	21.55	21.05
2	1-6 days ago	87	7.91	7.94
3	1 week to less than 3 months ago	210	19.09	21.78
4	3 months to less than 1 year ago	168	15.27	16.82
5	1 year to less than 3 years ago	159	14.45	14.15
6	3 years to 5 years ago	105	9.55	8.95
7	More than 5 years ago	116	10.55	8.14
77	Don´t know	6	0.55	0.14
88	Never	12	1.09	1.03

LAST HAD ANY SYMPTOMS OF ASTHMA

Survey: CHILD Asthma Call-Back
Column: 57-58
Prologue:

Type: NUM
SAS Variable Name: LASTSYMP

Description: Q3.5　How long has it been since [he/she] last had any symptoms of asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 1 day ago	75	6.82	5.51
2	1-6 days ago	88	8.00	8.68
3	1 week to less than 3 months ago	296	26.91	30.11
4	3 months to less than 1 year ago	224	20.36	22.74
5	1 year to less than 3 years ago	160	14.55	13.13
6	3 years to 5 years ago	104	9.45	8.69
7	More than 5 years ago	132	12.00	9.33
77	Don´t know	9	0.82	0.56
88	Never	12	1.09	1.26

SYMPTOM DAYS

Survey: CHILD Asthma Call-Back
Column: 59-61
Prologue:

Type: NUM
SAS Variable Name: SYMP_30D

Description: Q4.1　During the past 30 days, on how many days did [child's name] have any symptoms of asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 29	Days	318	28.91	29.73
30	Every day	35	3.18	3.47
66	No symptoms past one year, skip filled	408	37.09	32.41
77	Don't know	12	1.09	0.91
88	No symptoms in the past 30 days	103	9.36	10.74
100	Symptoms 3 months to 1 year ago, skip filled	224	20.36	22.74

CONSTANT SYMPTOMS

Survey: CHILD Asthma Call-Back
Column: 62-63
Prologue:

Type: NUM
SAS Variable Name: DUR_30D

Description: Q4.2　Does [he/she] have symptoms all the time? "All the time" means symptoms that continue throughout the day.　It does not mean symptoms for a little while each day.

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	17	1.55	1.25
2	No	18	1.64	2.22
6	Last symptoms one+ years ago, skip filled	408	37.09	32.41
10	Last symptoms 3 months - 1 year ago, skip filled	224	20.36	22.74
11	No symptoms 'SYMP_30D' skip filled	103	9.36	10.74
12	1-29 'SYMP_30D' skip filled	318	28.91	29.73
77	Don't know 'SYMP_30D' skip filled	12	1.09	0.91

NIGHT SYMPTOMS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 64-66   **SAS Variable Name:** ASLEEP30
Prologue:
Description: Q4.3   During the past 30 days, on how many days did symptoms of asthma make it difficult for [him/her] to stay asleep?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 30	Days/Nights	157	14.27	15.57
66	No symptoms past one year, skip filled	408	37.09	32.41
77	Don't know	11	1.00	1.46
88	None	197	17.91	17.07
100	Symptoms 3 months to 1 year ago, skip filled	224	20.36	22.74
111	No symptoms in the past 30 days, skip filled	103	9.36	10.74

SYMPTOM FREE DAYS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 67-68   **SAS Variable Name:** SYMPFREE
Prologue:
Description: Q4.4   During the past two weeks, on how many days was [child's name] completely symptom-free, that is no coughing, wheezing, or other symptoms of asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 14	Days/Nights	1,006	91.45	92.17
77	Don´t know	13	1.18	0.57
88	None	81	7.36	7.25

ASTHMA EPISODE OR ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 69   **SAS Variable Name:** EPIS_12M
Prologue:
Description: Q4.5   During the past 12 months, has [he/she] had an episode of asthma or an asthma attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	399	36.27	38.25
2	No	291	26.45	29.25
6	No symptoms past 1 year, skip filled	408	37.09	32.41
7	Don't know	2	0.18	0.09

NUMBER OF EPISODES/ATTACKS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 70-73   **SAS Variable Name:** EPIS_TP
Prologue:
Description: Q4.6   During the past three months, how many asthma episodes or attacks has [he/she] had?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 100	Episodes	277	25.18	26.69
666	No symptoms past 1 year, skip filled	408	37.09	32.41
777	Don't know	4	0.36	0.30
888	None	118	10.73	11.26
1111	No episode/asthma attack past year, skip filled	293	26.64	29.34

DURATION OF ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 74-77   **SAS Variable Name:** DUR_ASTH
Prologue:
Description: Q4.7   How long did [his/her] most recent asthma episode or attack last?

Value	Value Label	Frequency	Percentage	Weighted Percentage
101 – 199	Minutes	169	15.36	15.61
201 – 299	Hours	76	6.91	7.87
301 – 399	Days	101	9.18	11.03
401 – 499	Weeks	34	3.09	2.05
555	Never	1	0.09	0.00
666	No symptoms past 1 year, skip filled	408	37.09	32.41
777	Don't know	18	1.64	1.70
1111	No episode/asthma attack past year, skip filled	293	26.64	29.34

TYPICAL ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 78-79   **SAS Variable Name:** COMPASTH
Prologue:
Description: Q4.8   Compared with other episodes or attacks, was this most recent attack shorter, longer, or about the same?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Shorter	106	9.64	10.62
2	Longer	41	3.73	4.17
3	About the same	246	22.36	23.19
4	The most recent attack was actually the first attack	2	0.18	0.02
6	No symptoms past year, skip filled	408	37.09	32.41
7	Don't know	4	0.36	0.26
11	No episode/asthma attack past year, skip filled	293	26.64	29.34

INSURANCE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 80   **SAS Variable Name:** INS1
Prologue:
Description: Q5.1   Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare or Medicaid?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,057	96.09	92.12
2	No	43	3.91	7.88

TYPE OF INSURANCE COVERAGE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 81   **SAS Variable Name:** INS_TYP
Prologue:
Description: Q5.2   What kind of health care coverage does [child's name] have?   Is it paid through the parent's employer, or is it Medicaid, Medicare, Children's Health Insurance Program (CHIP), or some other type of insurance?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Parent's employer	641	58.27	53.36
2	Medicaid/Medicare	260	23.64	24.65
3	CHIP replace with state specific name	70	6.36	7.08
4	Other	84	7.64	7.00
5	No insurance at time of interview, skip filled	43	3.91	7.88
7	Don't know	1	0.09	0.01
9	Refused	1	0.09	0.01

INSURANCE OR COVERAGE GAP

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 82   **SAS Variable Name:** INS2
Prologue:
Description: Q5.3   During the past 12 months, was there any time that [he/she] did not have any health insurance or coverage?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	66	6.00	4.97
2	No	990	90.00	87.10
5	No insurance at time of interview, skip filled	43	3.91	7.88
7	Don't know	1	0.09	0.05

HAD A FLU SHOT

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 83   **SAS Variable Name:** FLU_SHOT
Prologue: A flu shot is an influenza vaccine injected in your arm.
Description: Q5.4   During the past 12 months, did [child's name] have a flu shot?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	561	51.00	53.99
2	No	513	46.64	44.61
7	Don't know/Not sure	26	2.36	1.40

HAD A FLU VACCINE SPRAY

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 84   **SAS Variable Name:** FLU_SPRAY
Prologue: A flu vaccine that is sprayed in the nose is called FluMist™.
Description: Q5.5   During the past 12 months, did [he/she] have a flu vaccine that was sprayed in [his/her] nose?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	100	9.09	8.83
2	No	986	89.64	90.43
7	Don't know/Not sure	14	1.27	0.74

ACTIVITY LIMITATION

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 85   **SAS Variable Name:** ACT_DAYS30
Prologue:
Description: Q5.6   During just the past 30days, would you say [child's name] limited [his/her] usual activities due to asthma not at all, a little, a moderate amount, or a lot?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Not at all	557	50.64	56.36
2	A little	211	19.18	19.28
3	A moderate amount	65	5.91	7.29
4	A lot	27	2.45	1.85
5	No current asthma, nothing happened past year, skip filled	238	21.64	15.20
7	Don't know	2	0.18	0.02

NUMBER OF ROUTINE CHECKUPS PAST 12 MONTHS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 86-88   **SAS Variable Name:** NER_TIME
Prologue:
Description: Q5.7   During the past 12 months how many times did [he/she] see a doctor or other health professional for a routine checkup for [his/her] asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 365	Number	570	51.82	53.47
555	No current asthma, nothing happened past year, skip filled	238	21.64	15.20
666	No MD visit past year, skip filled	161	14.64	17.76
777	Don't know	6	0.55	1.23
888	None	125	11.36	12.34

EMERGENCY ROOM VISIT

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 89   **SAS Variable Name:** ER_VISIT
Prologue: An urgent care center treats people with illnesses or injuries that must be addressed immediately and cannot wait for a regular medical appointment.
Description: Q5.8   During the past 12 months, has [child's name] had to visit an emergency room or urgent care center because of [his/her] asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	125	11.36	10.98
2	No	575	52.27	56.03
5	No current asthma, nothing happened past year, skip filled	238	21.64	15.20
6	No MD visit past year, skip filled	161	14.64	17.76
7	Don't know	1	0.09	0.03

NUMBER OF EMERGENCY ROOM VISITS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 90-92   **SAS Variable Name:** ER_TIMES
Prologue:
Description: Q5.9   During the past 12 months, how many times did [he/she] visit an emergency room or urgent care center because of [his/her] asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 365	Number	125	11.36	10.98
555	No current asthma, nothing happened past year, skip filled	238	21.64	15.20
666	No MD visit past year, skip filled	161	14.64	17.76
677	MD visit, no ER visit past year, skip filled	575	52.27	56.03
777	Don't know	1	0.09	0.03

NUMBER OF URGENT VISITS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 93-95   **SAS Variable Name:** URG_TIME
Prologue:
Description: Q5.10   During the past 12 months, how many times did [child's name] see a doctor or other health professional for urgent treatment of worsening asthma symptoms or for an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 365	Number	233	21.18	22.51
555	No current asthma, nothing happened past year, skip filled	238	21.64	15.20
666	No MD visit past year, skip filled	161	14.64	17.76
777	Don't know	4	0.36	0.22
888	None	463	42.09	44.27
999	Refused	1	0.09	0.04

HOSPITAL VISIT

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 96 **SAS Variable Name:** HOSP_VST
Prologue:
Description: Q5.11 During the past 12 months, that is since [one year ago today], has [child's name] had to stay overnight in a hospital because of [his/her] asthma?   Do not include an overnight stay in the emergency room.

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	18	1.64	2.63
2	No	568	51.64	51.54
4	MD visit, no symptoms past year, skip filled	115	10.45	12.87
5	No current asthma, nothing happened past year, skip filled	238	21.64	15.20
6	No MD visit past year, skip filled	161	14.64	17.76

NUMBER OF HOSPITAL VISITS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 97-99 **SAS Variable Name:** HOSPTIME
Prologue:
Description: Q5.12 During the past 12 months, how many different times did [he/she] stay in any hospital overnight or longer because of [his/her] asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 365	Times	18	1.64	2.63
444	MD visit, no symptoms past year, skip filled	115	10.45	12.87
455	MD visit, symptoms, no hospital visit past year, skip filled	568	51.64	51.54
555	No current asthma, nothing happened past year, skip filled	238	21.64	15.20
666	No MD visit past year, skip filled	161	14.64	17.76

HOSPITAL FOLLOW-UP

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 100-101 **SAS Variable Name:** HOSPPLAN
Prologue:
Description: Q5.13 The last time [he/she] left the hospital, did a health professional talk with you or [child's name] about how to prevent serious attacks in the future?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	17	1.55	2.62
2	No	1	0.09	0.01
4	MD visit, no symptoms past year, skip filled	115	10.45	12.87
5	No current asthma, nothing happened past year, skip filled	238	21.64	15.20
6	No MD visit past year, skip filled	161	14.64	17.76
45	MD visit, symptoms, no hospital visit past year, skip filled	568	51.64	51.54

EVER TAUGHT RECOGNIZE EARLY SIGN OR SYMPTOMS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 102 **SAS Variable Name:** TCH_SIGN
Prologue: Has a doctor or other health professional ever taught you or [child's name] . . .
Description: Q6.1   . . . how to recognize early signs or symptoms of an asthma episode?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	881	80.09	77.29
2	No	210	19.09	21.93
7	Don´t know/Not sure	9	0.82	0.78

EVER TAUGHT WHAT TO DO DURING ASTHMA EPISODE OR ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 103   **SAS Variable Name:** TCH_RESP
   Prologue: Has a doctor or other health professional ever taught you or [child's name] . . .
Description: Q6.2   . . . what to do during an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	921	83.73	80.97
2	No	168	15.27	17.72
7	Don´t know/Not sure	11	1.00	1.30

EVER TAUGHT HOW TO USE A PEAK FLOW

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 104   **SAS Variable Name:** TCH_MON
   Prologue: A peak flow meter is a hand held device that measures how quickly [child's name] can blow air out of [his/her] lungs. Has a doctor or other health professional ever taught you or [child's name] . . .
Description: Q6.3   . . . how to use a peak flow meter to adjust [his/her] daily medications?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	447	40.64	40.97
2	No	644	58.55	58.65
7	Don´t know/Not sure	8	0.73	0.34
9	Refused	1	0.09	0.04

EVER GIVEN AN ASTHMA ACTION PLAN

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 105   **SAS Variable Name:** MGT_PLAN
   Prologue: An asthma action plan, or asthma management plan, is a form with instructions about when to change the amount or type of medicine, when to call the doctor for advice, and when to go to the emergency room.
Description: Q6.4   Has a doctor or other health professional EVER given you or [child's name] an asthma action plan?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	500	45.45	47.91
2	No	581	52.82	51.44
7	Don´t know/Not sure	19	1.73	0.65

EVER TAKEN A COURSE TO MANAGE ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 106   **SAS Variable Name:** MGT_CLAS
   Prologue:
Description: Q6.5   Have you or [child's name] ever taken a course or class on how to manage [his/her] asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	140	12.73	14.27
2	No	959	87.18	85.67
7	Don´t know/Not sure	1	0.09	0.06

AIR CLEANER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 107   **SAS Variable Name:** AIRCLEANER
Prologue: An air cleaner or purifier can filter out pollutants like dust, pollen, mold and chemicals. It can be attached to the furnace or free standing.   It is not, however, the same as a normal furnace filter.
Description: Q7.1   Is an air cleaner or purifier regularly used inside [child's name]'s home?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	324	29.45	28.82
2	No	772	70.18	70.57
7	Don´t know/Not sure	3	0.27	0.56
9	Refused	1	0.09	0.05

DEHUMIDIFIER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 108   **SAS Variable Name:** DEHUMID
Prologue:
Description: Q7.2   Is a dehumidifier regularly used to reduce moisture inside [his/her] home?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	301	27.36	18.76
2	No	799	72.64	81.24

EXHAUST FAN USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 109   **SAS Variable Name:** KITC_FAN
Prologue:
Description: Q7.3   Is an exhaust fan that vents to the outside used regularly when cooking in the kitchen in [his/her] home?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	743	67.55	74.30
2	No	354	32.18	25.65
7	Don´t know/Not sure	3	0.27	0.05

GAS USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 110   **SAS Variable Name:** COOK_GAS
Prologue:
Description: Q7.4   Is gas used for cooking in [his/her] home?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	461	41.91	54.12
2	No	638	58.00	45.85
7	Don´t know/Not sure	1	0.09	0.03

SAW OR SMELLED MOLD PAST 30 DAYS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 111   **SAS Variable Name:** ENV_MOLD
Prologue:
Description: Q7.5   In the past 30 days, has anyone seen or smelled mold or a musty odor inside [his/her] home? Do not include mold on food.

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	82	7.45	8.03
2	No	1,016	92.36	91.92
7	Don´t know/Not sure	2	0.18	0.05

INDOOR PETS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 112   **SAS Variable Name:** ENV_PETS
Prologue:
Description: Q7.6   Does [child's name]'s home have pets such as dogs, cats, hamsters, birds, or other feathered or furry pets that spend time indoors?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	693	63.00	53.07
2	No	406	36.91	46.85
7	Don´t know/Not sure	1	0.09	0.08

PETS ALLOWED IN BEDROOM

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 113   **SAS Variable Name:** PETBEDRM
Prologue:
Description: Q7.7   Is the pet allowed in [his/her] bedroom?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	453	41.18	33.30
2	No	230	20.91	19.43
3	Some are/some aren't	8	0.73	0.26
6	No pets, skip coded	407	37.00	46.93
7	Don't know	2	0.18	0.09

SAW COCKROACH INSIDE CHILD'S HOME PAST 30 DAYS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 114   **SAS Variable Name:** C_ROACH
Prologue:
Description: Q7.8   In the past 30 days, has anyone seen a cockroach inside [child's name]'s home?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	100	9.09	10.72
2	No	1,000	90.91	89.28

SAW MICE OR RATS INSIDE CHILD'S HOME PAST 30 DAYS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 115   **SAS Variable Name:** C_RODENT
Prologue:
Description: Q7.9   In the past 30 days, has anyone seen mice or rats inside [his/her] home? Do not include mice or rats kept as pets.

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	52	4.73	3.10
2	No	1,048	95.27	96.90

FIREPLACE OR WOOD STOVE USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 116   **SAS Variable Name:** WOOD_STOVE
Prologue:
Description: Q7.10   Is a wood burning fireplace or wood burning stove used in [child's name]'s home?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	181	16.45	20.07
2	No	919	83.55	79.93

GAS APPLIANCE USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 117   **SAS Variable Name:** GAS_STOVE
Prologue:
Description: Q7.11   Are unvented gas logs, unvented gas fireplace, or unvented gas stoves used in [his/her] home?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	59	5.36	6.05
2	No	1,040	94.55	93.84
7	Don´t know/Not sure	1	0.09	0.11

ANYONE SMOKED INSIDE CHILD'S HOME

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 118   **SAS Variable Name:** S_INSIDE
Prologue:
Description: Q7.12   In the past week, has anyone smoked inside [his/her] home?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	83	7.55	5.32
2	No	1,017	92.45	94.68

EVER ADVISED CHANGE THINGS IN CHILD'S HOME

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 119   **SAS Variable Name:** MOD_ENV
Prologue:
Description: Q7.13   Has a health professional ever advised you to change things in [his/her] home, school, or work to improve [his/her] asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	393	35.73	36.28
2	No	704	64.00	63.64
7	Don´t know/Not sure	3	0.27	0.09

USE A MATTRESS COVER

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 120   **SAS Variable Name:** MATTRESS
Prologue:
Description: Q7.14   Does [he/she] use a mattress cover that is made especially for controlling dust mites?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	398	36.18	35.07
2	No	680	61.82	64.04
7	Don´t know/Not sure	22	2.00	0.89

USE A PILLOW COVER

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 121   **SAS Variable Name:** E_PILLOW
Prologue:
Description: Q7.15   Does [he/she] use a pillow cover that is made especially for controlling dust mites?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	356	32.36	28.32
2	No	734	66.73	71.37
7	Don´t know/Not sure	10	0.91	0.31

CARPETING OR RUGS IN CHILD'S BEDROOM

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 122   **SAS Variable Name:** CARPET

Prologue:

Description: Q7.16   Does [he/she] have carpeting or rugs in [his/her] bedroom? This does not include throw rugs small enough to be laundered.

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	707	64.27	61.77
2	No	393	35.73	38.23

WASH WATER TEMPERATURE

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 123   **SAS Variable Name:** HOTWATER

Prologue:

Description: Q7.17   Are [his/her] sheets and pillowcases washed in cold, warm, or hot water?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Cold	242	22.00	23.56
2	Warm	332	30.18	28.43
3	Hot	479	43.55	43.51
4	Varies	41	3.73	2.96
7	Don´t know/Not sure	6	0.55	1.54

USE AN EXHAUST FAN IN CHILD'S BATHROOM

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 124   **SAS Variable Name:** BATH_FAN

Prologue:

Description: Q7.18   In [child's name]'s bathroom, does [he/she] regularly use an exhaust fan that vents to the outside?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	638	58.00	59.42
2	No or "No fan"	449	40.82	39.88
7	Don´t know/Not sure	13	1.18	0.70

EVER USED OVER-THE-COUNTER MEDICATION

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 125   **SAS Variable Name:** OTC

Prologue: The next set of questions is about medications for asthma. The first few questions are very general, but later questions are very specific to [child's name]'s medication use.

Description: Q8.1   Over-the-counter medication can be bought without a doctor's order. Has [child's name] ever used over-the-counter medication for [his/her] asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	187	17.00	17.15
2	No	895	81.36	81.33
5	Never took asthma medication, skip filled	12	1.09	1.03
7	Don't know	6	0.55	0.49

EVER USED PRESCRIPTION INHALER

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 126   **SAS Variable Name:** INHALERE
Prologue:
Description: Q8.2   Has [he/she] ever used a prescription inhaler?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	967	87.91	86.24
2	No	119	10.82	12.71
5	Never took asthma medication, skip filled	12	1.09	1.03
7	Don't know	2	0.18	0.03

PROFESSIONAL INHALER INSTRUCTION

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 127   **SAS Variable Name:** INHALERH
Prologue:
Description: Q8.3   Did a health professional show [him/her] how to use the inhaler?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	912	82.91	80.08
2	No	52	4.73	6.03
5	Never took asthma medication, skip filled	12	1.09	1.03
6	Never used prescription inhaler, skip filled	121	11.00	12.73
7	Don't know	3	0.27	0.14

INHALER USE WATCHED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 128   **SAS Variable Name:** INHALERW
Prologue:
Description: Q8.4   Did a doctor or other health professional watch [him/her] use the inhaler?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	796	72.36	69.21
2	No	144	13.09	15.84
5	Never took asthma medication, skip filled	12	1.09	1.03
6	Never used prescription inhaler, skip filled	121	11.00	12.73
7	Don't know	27	2.45	1.18

MEDICATION IN HAND

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 129   **SAS Variable Name:** SCR_MED1
Prologue: Now I am going to ask questions about specific prescription medications [child's name] may have taken for asthma in the past 3 months.   I will be asking for the name, amount, and how often [he/she] takes each medicine.
Description: Q8.5   It will help to get [child's name]'s medicines so you can read the labels.   Can you please go get the asthma medicines while I wait on the phone?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	331	30.09	31.53
2	No	56	5.09	8.18
3	Respondent knows the meds	140	12.73	10.53
4	No asthma med. past 3 months, skip filled	554	50.36	48.20
5	Never took asthma medication, skip filled	12	1.09	1.03
7	Don't know	6	0.55	0.52
9	Refused	1	0.09	0.02

HAVE ALL THE MEDICATIONS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 130-131   **SAS Variable Name:** SCR_MED3
Prologue:
Description: Q8.7   Do you have all the medications?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes, I have all the medications	311	28.27	29.72
2	Yes, I have some of the medications but not all	15	1.36	1.44
3	No	5	0.45	0.37
4	No asthma med. past 3 months, skip filled	554	50.36	48.20
5	Never took asthma medication, skip filled	12	1.09	1.03
10	Know or no handy asthma medicines, skip filled	203	18.45	19.24

TAKEN PRESCRIPTION INHALER PAST 3 MONTHS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 132   **SAS Variable Name:** INH_SCR
Prologue:
Description: Q8.8   In the past 3 months has [child's name] taken prescription asthma medicine using an inhaler?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes, inhaler in past 3 months	437	39.73	38.99
2	No inhaler in past 3 months	53	4.82	6.59
4	No asthma med. past 3 months, skip filled	554	50.36	48.20
5	Never took asthma medication, skip filled	12	1.09	1.03
6	Asthma med. past 3 months, never used inhaler, skip filled	43	3.91	5.09
7	Don't know	1	0.09	0.09

TAKEN MEDICATION IN PILL PAST 3 MONTHS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 133   **SAS Variable Name:** PILLS
Prologue:
Description: Q8.20   In the past 3 months, has [he/she] taken any prescription medicine in pill form for [his/her] asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	140	12.73	10.15
2	No	374	34.00	38.62
4	No asthma med. past 3 months, skip filled	554	50.36	48.20
5	Never took asthma medication, skip filled	12	1.09	1.03
7	Don't know	20	1.82	1.99

TAKEN MEDICATION IN SYRUP PAST 3 MONTHS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 134   **SAS Variable Name:** SYRUP
Prologue:
Description: Q8.23   In the past 3 months, has [he/she] taken prescription asthma medication in syrup form?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	15	1.36	2.38
2	No	491	44.64	45.60
4	No asthma med. past 3 months, skip filled	554	50.36	48.20
5	Never took asthma medication, skip filled	12	1.09	1.03
7	Don't know	28	2.55	2.79

TAKEN MEDICATION WITH A NEBULIZER PAST 3 MONTHS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 135 **SAS Variable Name:** NEB_SCR
Prologue: A nebulizer is a small machine with a tube and facemask or mouthpiece that [child's name] breathes through continuously.
Description: Q8.25 In the past 3 months, were any of [child's name]'s prescription asthma medicines used with a nebulizer?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	201	18.27	18.53
2	No	312	28.36	30.59
4	No asthma med. past 3 months, skip filled	554	50.36	48.20
5	Never took asthma medication, skip filled	12	1.09	1.03
7	Don't know	20	1.82	1.64
9	Refused	1	0.09	0.01

NEBULIZER AT HOME

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 136 **SAS Variable Name:** NEB_PLCA
Prologue: I am going to read a list of places where [child's name] might have used a nebulizer. Please answer "yes" if [he/she] used a nebulizer in the place I mention; otherwise answer "no." In the past 3 months, did [child's name] use a nebulizer . . .
Description: Q8.26a . . . at home ?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	197	17.91	18.30
2	No	4	0.36	0.23
4	No asthma med. past 3 months, skip filled	554	50.36	48.20
5	Never took asthma medication, skip filled	12	1.09	1.03
8	No neb. in past 3 months, skip filled	333	30.27	32.24

NEBULIZER AT DOCTOR'S OFFICE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 137 **SAS Variable Name:** NEB_PLCB
Prologue: In the past 3 months, did [child's name] use a nebulizer . . .
Description: Q8.26b . . . at a doctor's office ?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	54	4.91	3.80
2	No	147	13.36	14.73
4	No asthma med. past 3 months, skip filled	554	50.36	48.20
5	Never took asthma medication, skip filled	12	1.09	1.03
8	No neb. in past 3 months, skip filled	333	30.27	32.24

NEBULIZER IN EMERGENCY ROOM

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 138 **SAS Variable Name:** NEB_PLCC
Prologue: In the past 3 months, did [child's name] use a nebulizer . . .
Description: Q8.26c . . . in an emergency room?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	37	3.36	2.74
2	No	164	14.91	15.79
4	No asthma med. past 3 months, skip filled	554	50.36	48.20
5	Never took asthma medication, skip filled	12	1.09	1.03
8	No neb. in past 3 months, skip filled	333	30.27	32.24

NEBULIZER AT WORK OR SCHOOL

Survey: CHILD Asthma Call-Back

Type: NUM

Column: 139

SAS Variable Name: NEB_PLCD

Prologue: In the past 3 months, did [child's name] use a nebulizer . . .

Description: Q8.26d . . . at work (or a school)?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	26	2.36	2.46
2	No	175	15.91	16.07
4	No asthma med. past 3 months, skip filled	554	50.36	48.20
5	Never took asthma medication, skip filled	12	1.09	1.03
8	No neb. in past 3 months, skip filled	333	30.27	32.24

NEBULIZER AT ANY OTHER PLACE

Survey: CHILD Asthma Call-Back

Type: NUM

Column: 140

SAS Variable Name: NEB_PLCE

Prologue: In the past 3 months, did [child's name] use a nebulizer . . .

Description: Q8.26e . . . at any other place?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	34	3.09	1.89
2	No	167	15.18	16.64
4	No asthma med. past 3 months, skip filled	554	50.36	48.20
5	Never took asthma medication, skip filled	12	1.09	1.03
8	No neb. in past 3 months, skip filled	333	30.27	32.24

COST BARRIER: PRIMARY CARE DOCTOR

Survey: CHILD Asthma Call-Back

Type: NUM

Column: 141

SAS Variable Name: ASMDCOST

Prologue:

Description: Q9.1   Was there a time in the past 12 months when [child's name] needed to see [his/her] primary care doctor for asthma but could not because of the cost?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	29	2.64	2.11
2	No	833	75.73	82.69
5	No current asthma, skip filled	238	21.64	15.20

COST BARRIER: SPECIALIST

Survey: CHILD Asthma Call-Back

Type: NUM

Column: 142

SAS Variable Name: ASSPCOST

Prologue:

Description: Q9.2   Was there a time in the past 12 months when [child's name] was referred to a specialist for [his/her] asthma care but could not go because of the cost?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	19	1.73	3.00
2	No	843	76.64	81.80
5	No current asthma, skip filled	238	21.64	15.20

COST BARRIER: MEDICATION

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 143   **SAS Variable Name:** ASRXCOST
Prologue:
Description: Q9.3   Was there a time in the past 12 months when [he/she] needed medication for [his/her] asthma, but you could not buy it because of the cost?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	52	4.73	5.81
2	No	809	73.55	78.86
5	No current asthma, skip filled	238	21.64	15.20
7	Don't know	1	0.09	0.13

CURRENT GO TO SCHOOL OUTSIDE HOME

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 144   **SAS Variable Name:** SCH_STAT
Prologue: Next, we are interested in things that might affect [child's name]'s asthma when [he/she] is not at home.
Description: Q10.1   Does [child's name] currently go to school or preschool outside the home?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,005	91.36	90.11
2	No	95	8.64	9.89

REASON NOT IN SCHOOL NOW

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 145   **SAS Variable Name:** NO_SCHL
Prologue:
Description: Q10.2   What is the main reason [he/she] is not now in school? [READ RESPONSE CATEGORIES]

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Not old enough	40	3.64	3.28
2	Home schooled	21	1.91	1.74
3	Unable to attend for health reason	4	0.36	1.31
4	On vacation or break	15	1.36	1.64
5	Other	14	1.27	1.88
6	Now goes to outside school, skip filled	1,005	91.36	90.11
9	Refused	1	0.09	0.04

GONE TO SCHOOL OUTSIDE HOME PAST 12 MONTHS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 146   **SAS Variable Name:** SCHL_12
Prologue:
Description: Q10.3   Has [child's name] gone to school in the past 12 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	26	2.36	4.01
2	No	8	0.73	0.86
3	Home school, skip filled	21	1.91	1.74
5	Not old enough for school, skip filled	40	3.64	3.28
6	Now goes to outside school, skip filled	1,005	91.36	90.11

WHAT GRADE WAS CHILD IN LAST TIME

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 147-148   **SAS Variable Name:** SCHGRADE
Prologue:
Description: Q10.4   What grade was [he/she] in the last time [he/she] was in school?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 12	Grade	951	86.45	83.55
44	No school past year, skip filled	8	0.73	0.86
55	Not old enough for school, skip filled	40	3.64	3.28
66	Kindergarten	42	3.82	4.68
77	Don't know	8	0.73	1.28
88	Preschool	46	4.18	5.43
99	Refused	5	0.45	0.91

HOW MANY DAYS MISSED SCHOOL

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 149-151   **SAS Variable Name:** MISS_SCHL
Prologue:
Description: Q10.5   During the past 12 months, about how many days of school did [he/she] miss because of [his/her] asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 365	Days	283	25.73	31.30
444	No school past year, skip filled	8	0.73	0.86
555	Not old enough for school, skip filled	40	3.64	3.28
666	No current asthma, skip filled	236	21.45	15.06
777	Don't know	12	1.09	1.65
888	None	521	47.36	47.84

WRITTEN ASTHMA ACTION PLAN IN SCHOOL

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 152   **SAS Variable Name:** SCH_APL
Prologue: An asthma action plan, or asthma management plan, is a form with instructions about when to change the amount or type of medicine, when to call the doctor for advice, and when to go to the emergency room.
Description: Q10.6   Does [child's name] have a written asthma action plan or asthma management plan on file at school?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	338	30.73	32.37
2	No	443	40.27	45.18
3	Home school, skip filled	21	1.91	1.74
4	No school past year, skip filled	8	0.73	0.86
5	Not old enough for school, skip filled	40	3.64	3.28
6	No current asthma, skip filled	232	21.09	14.45
7	Don't know	18	1.64	2.12

ASTHMA MEDICATION ALLOWED WITH CHILD IN SCHOOL

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 153 **SAS Variable Name:** SCH_MED
Prologue:
Description: Q10.7 Does the school [he/she] goes to allow children with asthma to carry their medication with them while at school?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	418	38.00	39.87
2	No	297	27.00	31.22
3	Home school, skip filled	21	1.91	1.74
4	No school past year, skip filled	8	0.73	0.86
5	Not old enough for school, skip filled	40	3.64	3.28
6	No current asthma, skip filled	232	21.09	14.45
7	Don't know	84	7.64	8.58

PETS IN CLASSROOM

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 154 **SAS Variable Name:** SCH_ANML
Prologue:
Description: Q10.8 Are there any pets such as dogs, cats, hamsters, birds or other feathered or furry pets in [his/her] classroom?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	45	4.09	4.06
2	No	937	85.18	86.76
3	Home school, skip filled	21	1.91	1.74
4	No school past year, skip filled	8	0.73	0.86
5	Not old enough for school, skip filled	40	3.64	3.28
7	Don't know	49	4.45	3.28

AWARE OF MOLD PROBLEM IN SCHOOL

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 155 **SAS Variable Name:** SCH_MOLD
Prologue:
Description: Q10.9 Are you aware of any mold problems in [child's name]'s school?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	17	1.55	1.54
2	No	993	90.27	88.02
3	Home school, skip filled	21	1.91	1.74
4	No school past year, skip filled	8	0.73	0.86
5	Not old enough for school, skip filled	40	3.64	3.28
7	Don't know	21	1.91	4.56

GO TO DAYCARE OUTSIDE HOME

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 156 **SAS Variable Name:** DAYCARE
Prologue:
Description: Q10.10 Does [child's name] go to day care outside [his/her] home?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	91	8.27	7.46
2	No	317	28.82	40.02
3	Home school, skip filled	21	1.91	1.74
6	Over age ten, skip filled	650	59.09	46.55
7	Don't know	21	1.91	4.24

WENT TO DAYCARE PAST 12 MONTHS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 157   **SAS Variable Name:** DAYCARE1
Prologue:
Description: Q10.11 Has [he/she] gone to daycare in the past 12 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	34	3.09	2.84
2	No	281	25.55	37.17
3	Home school, skip filled	21	1.91	1.74
5	Goes to daycare now, skip filled	91	8.27	7.46
6	Over age ten, skip filled	650	59.09	46.55
7	Don't know	23	2.09	4.26

DAYS MISSED DAYCARE BECAUSE OF ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 158-161   **SAS Variable Name:** MISS_DCAR
Prologue:
Description: Q10.12 During the past 12 months, about how many days of daycare did [he/she] miss because of [his/her] asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 365	Days	38	3.45	2.62
444	No current asthma, skip filled	24	2.18	1.96
555	No daycare past year, skip filled	281	25.55	37.17
666	Over age ten, skip filled	650	59.09	46.55
777	Don't know	23	2.09	4.25
888	Zero	67	6.09	6.34
3333	Home school, skip filled	17	1.55	1.12

WRITTEN ASTHMA ACTION PLAN IN DAYCARE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 162   **SAS Variable Name:** DCARE_APL
Prologue:
Description: Q10.13 Does [child's name] have a written asthma action plan or asthma management plan on file at the daycare [he/she] went to last?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	38	3.45	3.19
2	No	65	5.91	5.14
3	Home school, skip filled	17	1.55	1.12
4	No current asthma, skip filled	24	2.18	1.96
5	No daycare past year, skip filled	281	25.55	37.17
6	Over age ten, skip filled	650	59.09	46.55
7	Don't know	25	2.27	4.88

PETS IN DAYCARE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 163 **SAS Variable Name:** DCARE_ANML
Prologue:
Description: Q10.14   Are there any pets such as dogs, cats, hamsters, birds, or other feathered or furry pets in [his/her] room at daycare?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	17	1.55	1.12
2	No	106	9.64	8.82
3	Home school, skip filled	21	1.91	1.74
5	No daycare past year, skip filled	281	25.55	37.17
6	Over age ten, skip filled	650	59.09	46.55
7	Don't know	25	2.27	4.61

AWARE OF MOLD PROBLEM IN DAYCARE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 164 **SAS Variable Name:** DCARE_MLD
Prologue:
Description: Q10.15   Are you aware of any mold problems in [his/her] daycare?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	124	11.27	10.25
3	Home school, skip filled	21	1.91	1.74
5	No daycare past year, skip filled	281	25.55	37.17
6	Over age ten, skip filled	650	59.09	46.55
7	Don't know	24	2.18	4.30

SMOKING ALLOWED IN DAYCARE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 165 **SAS Variable Name:** DCARE_SMK
Prologue:
Description: Q10.16   Is smoking allowed at [his/her] daycare?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.14
2	No	124	11.27	10.15
3	Home school, skip filled	21	1.91	1.74
5	No daycare past year, skip filled	281	25.55	37.17
6	Over age ten, skip filled	650	59.09	46.55
7	Don't know	23	2.09	4.26

USED HERBS TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 166 **SAS Variable Name:** CAM_HERB
Prologue: Sometimes people use methods other than prescription medications to help treat or control their asthma. These methods are called non-traditional, complementary, or alternative healthcare.   In the past 12 months, has [he/she] used . . . to control asthma?
Description: Q11.1   . . . herbs . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	21	1.91	2.63
2	No	839	76.34	82.12
5	No current asthma, skip filled	238	21.66	15.21
7	Don't know	1	0.09	0.04
BLANK	Partial complete	1		

USED VITAMINS TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 167   **SAS Variable Name:** CAM_VITA

Prologue:

Description: Q11.2   . . . vitamins . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	45	4.09	8.53
2	No	814	74.07	76.03
5	No current asthma, skip filled	238	21.66	15.21
7	Don't know	2	0.18	0.23
BLANK	Partial complete	1		

USED ACUPUNCTURE TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 168   **SAS Variable Name:** CAM_PUNC

Prologue:

Description: Q11.3   . . . acupuncture . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	0.36	1.42
2	No	857	77.98	83.37
5	No current asthma, skip filled	238	21.66	15.21
BLANK	Partial complete	1		

USED ACUPRESSURE TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 169   **SAS Variable Name:** CAM_PRES

Prologue:

Description: Q11.4   . . . acupressure . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	0.36	1.29
2	No	857	77.98	83.50
5	No current asthma, skip filled	238	21.66	15.21
BLANK	Partial complete	1		

USED AROMATHERAPY TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 170   **SAS Variable Name:** CAM_AROM

Prologue:

Description: Q11.5   . . . aromatherapy . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	19	1.73	1.72
2	No	842	76.62	83.07
5	No current asthma, skip filled	238	21.66	15.21
BLANK	Partial complete	1		

USED HOMEOPATHY TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 171   **SAS Variable Name:** CAM_HOME

Prologue:

Description: Q11.6 . . . homeopathy . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	8	0.73	0.42
2	No	849	77.25	84.08
5	No current asthma, skip filled	238	21.66	15.21
7	Don't know	4	0.36	0.28
BLANK	Partial complete	1		

USED REFLEXOLOGY TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 172   **SAS Variable Name:** CAM_REFL

Prologue:

Description: Q11.7 . . . reflexology . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	0.36	0.18
2	No	855	77.80	84.49
5	No current asthma, skip filled	238	21.66	15.21
7	Don't know	2	0.18	0.12
BLANK	Partial complete	1		

USED YOGA TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 173   **SAS Variable Name:** CAM_YOGA

Prologue:

Description: Q11.8 . . . yoga . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	7	0.64	0.96
2	No	854	77.71	83.83
5	No current asthma, skip filled	238	21.66	15.21
BLANK	Partial complete	1		

USED BREATHING TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 174   **SAS Variable Name:** CAM_BR

Prologue:

Description: Q11.9 . . . breathing techniques . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	125	11.37	10.11
2	No	733	66.70	74.62
5	No current asthma, skip filled	238	21.66	15.21
7	Don't know	3	0.27	0.06
BLANK	Partial complete	1		

USED NATUROPATHY TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back
Column: 175
Prologue:
Description: Q11.10 . . . naturopathy . . .

Type: NUM
SAS Variable Name: CAM_NATR

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	7	0.64	0.65
2	No	854	77.71	84.14
5	No current asthma, skip filled	238	21.66	15.21
BLANK	Partial complete	1		

OTHER ALTERNATIVE CARE TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back
Column: 176
Prologue:
Description: Q11.11   Besides the types I have just asked about, has [child's name] used any other type of alternative care for [his/her] asthma in the past 12 months?

Type: NUM
SAS Variable Name: CAM_OTHR

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	66	6.01	3.48
2	No	794	72.25	81.29
5	No current asthma, skip filled	238	21.66	15.21
7	Don't know	1	0.09	0.02
BLANK	Partial complete	1		

TEXT FOR OTHER TYPE CARE

Survey: CHILD Asthma Call-Back
Column: 177-276
Prologue:
Description: Q11.12   What else has [child's name] used?

Type: CHAR
SAS Variable Name: CAM_TEXT

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK		1,034		
HIDDEN	Text field - up to 100 characters	66	100.00	100.00

HEIGHT OF CHILD

Survey: CHILD Asthma Call-Back
Column: 277-280
Prologue:
Description: Q12.1   How tall is [child's name]?

Type: CHAR
SAS Variable Name: HEIGHT1

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Partial complete	1		
HIDDEN		1,099	100.00	100.00

WEIGHT OF CHILD

Survey: CHILD Asthma Call-Back
Column: 281-284
Prologue:
Description: Q12.2   How much does [he/she] weigh?

Type: CHAR
SAS Variable Name: WEIGHT1

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Partial complete	1		
HIDDEN		1,099	100.00	100.00

BIRTH WEIGHT

Survey: CHILD Asthma Call-Back   **Type:** CHAR
Column: 285-290   **SAS Variable Name:** BIRTHW1
Prologue:
Description: Q12.3   How much did [he/she] weigh at birth (in pounds)?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Partial complete	1		
HIDDEN		1,099	100.00	100.00

WHETHER BIRTH WEIGHT LESS THAN 5.5 POUNDS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 291   **SAS Variable Name:** BIRTHRF
Prologue:
Description: Q12.4   At birth, did [child's name] weigh less than 5 ½ pounds?

Value	Value Label	Frequency	Percentage	Weighted Percentage
0	Partial complete	1	1.37	1.38
1	Yes	5	6.85	7.63
2	No	44	60.27	70.96
7	Don't know	20	27.40	17.03
9	Refused	3	4.11	2.99
BLANK	Have reported birth weight	1,027		

LANGUAGE IDENTIFIER

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 382-383   **SAS Variable Name:** QSTLANG_F
Prologue:
Description: Language identifier: Language in which the interview was conducted.

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	English	1,057	96.09	84.68
2	Spanish	43	3.91	15.32

PERSON SELECTED TO CALL BACK FROM BRFSS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 384   **SAS Variable Name:** ADLTCHLD
Prologue:
Description: Which person in the household was selected as the focus of the call-back?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	Children	1,100	100.00	100.00

ASTHMA CALL-BACK SCRIPT TEST

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 385   **SAS Variable Name:** CALLBACK_VER
Prologue:
Description: ASTHMA CALL-BACK SCRIPT TEST

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Callback using Protocol (2 weeks)	795	100.00	100.00
BLANK	Not asked or missing	305		

END OF THE RAW CALL BACK DATA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 386   **SAS Variable Name:** END_OF_FILE
Prologue:
Description: END OF THE RAW CALL BACK DATA

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,100	100.00	100.00

EVER HAVE ASTHMA COMBINED BRFSS AND CALL BACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 387   **SAS Variable Name:** _EVER_ASTH_C
Prologue:
Description: EVER HAVE ASTHMA COMBINED BRFSS (ASTHMA2) AND CALL BACK (EVER_ASTH)

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,100	100.00	100.00

STILL HAVE ASTHMA COMBINED BRFSS AND CALL BACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 388   **SAS Variable Name:** _CUR_ASTH_C
Prologue:
Description: STILL HAVE ASTHMA COMBINED BRFSS (ASTHNOW) AND CALL BACK (CUR_ASTH)

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	728	66.18	71.07
2	No	352	32.00	27.90
7	Don´t know/Not sure	20	1.82	1.03

RELATIONSHIP TO CHILD COMBINED BRFSS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 389   **SAS Variable Name:** RELATED
Prologue:
Description: RELATIONSHIP TO CHILD COMBINED BRFSS

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Parents	1,059	96.27	96.50
2	Guardian	23	2.09	2.36
3	Other relative	18	1.64	1.14

FLAG FOR AGE, AGEDX, INCIDNT INCONSISTENCY

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 390   **SAS Variable Name:** FLAG1
Prologue:
Description: FLAG FOR AGE, AGEDX, INCIDNT INCONSISTENCY

Value	Value Label	Frequency	Percentage	Weighted Percentage
0	AGE, AGEDX, and INCIDNT are consistent	1,065	96.82	95.62
1	AGEDX is greater than AGE	2	0.18	0.23
2	AGE, AGEDX, and INCIDNT are inconsistent	33	3.00	4.15

ADVAIR (+ A. DISKUS)

Survey: CHILD Asthma Call-Back

Column: 391

Prologue:

Description: ADVAIR (+ A. DISKUS)

Type: NUM

SAS Variable Name: INHALER_ID_1

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	46	4.18	4.39
2	No	1,054	95.82	95.61

AEROBID

Survey: CHILD Asthma Call-Back

Column: 392

Prologue:

Description: AEROBID

Type: NUM

SAS Variable Name: INHALER_ID_2

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.04
2	No	1,099	99.91	99.96

ALBUTEROL (+ A. SULFATE OR SALBUTAMOL)

Survey: CHILD Asthma Call-Back

Column: 393

Prologue:

Description: ALBUTEROL (+ A. SULFATE OR SALBUTAMOL)

Type: NUM

SAS Variable Name: INHALER_ID_3

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	163	14.82	15.32
2	No	937	85.18	84.68

ALUPENT

Survey: CHILD Asthma Call-Back

Column: 394

Prologue:

Description: ALUPENT

Type: NUM

SAS Variable Name: INHALER_ID_4

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

ATROVENT

Survey: CHILD Asthma Call-Back

Column: 395

Prologue:

Description: ATROVENT

Type: NUM

SAS Variable Name: INHALER_ID_5

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.02
2	No	1,099	99.91	99.98

AZMACORT

Survey: CHILD Asthma Call-Back
Column: 396
Prologue:
Description: AZMACORT

Type: NUM
SAS Variable Name: INHALER_ID_6

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

BECLOMETHASONE DIPROPIONATE

Survey: CHILD Asthma Call-Back
Column: 397
Prologue:
Description: BECLOMETHASONE DIPROPIONATE

Type: NUM
SAS Variable Name: INHALER_ID_7

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.18	0.03
2	No	1,098	99.82	99.97

BECLOVENT

Survey: CHILD Asthma Call-Back
Column: 398
Prologue:
Description: BECLOVENT

Type: NUM
SAS Variable Name: INHALER_ID_8

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

BITOLTEROL

Survey: CHILD Asthma Call-Back
Column: 399
Prologue:
Description: BITOLTEROL

Type: NUM
SAS Variable Name: INHALER_ID_9

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.18	0.03
2	No	1,098	99.82	99.97

BRETHAIRE

Survey: CHILD Asthma Call-Back
Column: 400
Prologue:
Description: BRETHAIRE

Type: NUM
SAS Variable Name: INHALER_ID_10

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

BUDESONIDE
    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 401   **SAS Variable Name:** INHALER_ID_11
    Prologue:
Description: BUDESONIDE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.18	0.04
2	No	1,098	99.82	99.96

COMBIVENT
    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 402   **SAS Variable Name:** INHALER_ID_12
    Prologue:
Description: COMBIVENT

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.18	0.09
2	No	1,098	99.82	99.91

CROMOLYN
    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 403   **SAS Variable Name:** INHALER_ID_13
    Prologue:
Description: CROMOLYN

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

FLOVENT
    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 404   **SAS Variable Name:** INHALER_ID_14
    Prologue:
Description: FLOVENT

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	83	7.55	8.89
2	No	1,017	92.45	91.11

FLOVENT ROTADISK
    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 405   **SAS Variable Name:** INHALER_ID_15
    Prologue:
Description: FLOVENT ROTADISK

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	0.36	0.10
2	No	1,096	99.64	99.90

FLUNISOLIDE

Survey: CHILD Asthma Call-Back
Column: 406
Prologue:
Description: FLUNISOLIDE

Type: NUM
SAS Variable Name: INHALER_ID_16

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

FLUTICASONE

Survey: CHILD Asthma Call-Back
Column: 407
Prologue:
Description: FLUTICASONE

Type: NUM
SAS Variable Name: INHALER_ID_17

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.27	0.07
2	No	1,097	99.73	99.93

INTAL

Survey: CHILD Asthma Call-Back
Column: 408
Prologue:
Description: INTAL

Type: NUM
SAS Variable Name: INHALER_ID_18

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

IPRATROPIUM BROMIDE

Survey: CHILD Asthma Call-Back
Column: 409
Prologue:
Description: IPRATROPIUM BROMIDE

Type: NUM
SAS Variable Name: INHALER_ID_19

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.01
2	No	1,099	99.91	99.99

MAXAIR

Survey: CHILD Asthma Call-Back
Column: 410
Prologue:
Description: MAXAIR

Type: NUM
SAS Variable Name: INHALER_ID_20

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	5	0.45	0.18
2	No	1,095	99.55	99.82

METAPROTERONOL

Survey: CHILD Asthma Call-Back

Column: 411

Prologue:

Description: METAPROTERONOL

Type: NUM

SAS Variable Name: INHALER_ID_21

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

NEDOCROMIL

Survey: CHILD Asthma Call-Back

Column: 412

Prologue:

Description: NEDOCROMIL

Type: NUM

SAS Variable Name: INHALER_ID_22

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PIRBUTEROL

Survey: CHILD Asthma Call-Back

Column: 413

Prologue:

Description: PIRBUTEROL

Type: NUM

SAS Variable Name: INHALER_ID_23

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.04
2	No	1,099	99.91	99.96

PROVENTIL

Survey: CHILD Asthma Call-Back

Column: 414

Prologue:

Description: PROVENTIL

Type: NUM

SAS Variable Name: INHALER_ID_24

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	20	1.82	1.27
2	No	1,080	98.18	98.73

PULMICORT FLEXHALER

Survey: CHILD Asthma Call-Back

Column: 415

Prologue:

Description: PULMICORT FLEXHALER

Type: NUM

SAS Variable Name: INHALER_ID_25

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	12	1.09	0.81
2	No	1,088	98.91	99.19

SALMETEROL

Survey: CHILD Asthma Call-Back
Column: 416
Prologue:
Description: SALMETEROL

Type: NUM
SAS Variable Name: INHALER_ID_26

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

SEREVENT

Survey: CHILD Asthma Call-Back
Column: 417
Prologue:
Description: SEREVENT

Type: NUM
SAS Variable Name: INHALER_ID_27

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.03
2	No	1,099	99.91	99.97

TERBUTALINE (+ T. SULFATE)

Survey: CHILD Asthma Call-Back
Column: 418
Prologue:
Description: TERBUTALINE (+ T. SULFATE)

Type: NUM
SAS Variable Name: INHALER_ID_28

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

TILADE

Survey: CHILD Asthma Call-Back
Column: 419
Prologue:
Description: TILADE

Type: NUM
SAS Variable Name: INHALER_ID_29

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

TORNALATE

Survey: CHILD Asthma Call-Back
Column: 420
Prologue:
Description: TORNALATE

Type: NUM
SAS Variable Name: INHALER_ID_30

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

TRIAMCINOLONE ACETONIDE

Survey: CHILD Asthma Call-Back
Column: 421
Prologue:
Description: TRIAMCINOLONE ACETONIDE

Type: NUM
SAS Variable Name: INHALER_ID_31

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

VANCERIL

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 422   **SAS Variable Name:** INHALER_ID_32
Prologue:
Description: VANCERIL

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.03
2	No	1,099	99.91	99.97

VENTOLIN

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 423   **SAS Variable Name:** INHALER_ID_33
Prologue:
Description: VENTOLIN

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	82	7.45	6.87
2	No	1,018	92.55	93.13

FORADIL

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 424   **SAS Variable Name:** INHALER_ID_34
Prologue:
Description: FORADIL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

FORMOTEROL

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 425   **SAS Variable Name:** INHALER_ID_35
Prologue:
Description: FORMOTEROL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

QVAR

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 426   **SAS Variable Name:** INHALER_ID_36
Prologue:
Description: QVAR

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	19	1.73	1.89
2	No	1,081	98.27	98.11

LEVALBUTEROL TARTRATE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 427   **SAS Variable Name:** INHALER_ID_37
Prologue:
Description: LEVALBUTEROL TARTRATE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

XOPENEX HFA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 428   **SAS Variable Name:** INHALER_ID_38
Prologue:
Description: XOPENEX HFA

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	19	1.73	3.48
2	No	1,081	98.27	96.52

MOMETASONE FUROATE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 429   **SAS Variable Name:** INHALER_ID_39
Prologue:
Description: MOMETASONE FUROATE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.44
2	No	1,099	99.91	99.56

ASMANEX (TWISTHALER)

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 430   **SAS Variable Name:** INHALER_ID_40
Prologue:
Description: ASMANEX (TWISTHALER)

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	11	1.00	2.50
2	No	1,089	99.00	97.50

PRO-AIR HFA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 431   **SAS Variable Name:** INHALER_ID_41
Prologue:
Description: PRO-AIR HFA

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	86	7.82	6.08
2	No	1,014	92.18	93.92

SYMBICORT

Survey: CHILD Asthma Call-Back
Column: 432
Prologue:
Description: SYMBICORT

Type: NUM
SAS Variable Name: INHALER_ID_42

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	16	1.45	1.04
2	No	1,084	98.55	98.96

DON´T KNOW/REFUSED

Survey: CHILD Asthma Call-Back
Column: 433
Prologue:
Description: DON´T KNOW/REFUSED

Type: NUM
SAS Variable Name: INHALER_ID_7799

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	23	2.09	1.68
2	No	1,077	97.91	98.32

OTHER INHALER

Survey: CHILD Asthma Call-Back
Column: 434
Prologue:
Description: NEW OTHER PRESCRIPTION INHALER

Type: NUM
SAS Variable Name: OTHER_INHALER

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.27	0.23
2	No	1,097	99.73	99.77

PILL ACCOLATE

Survey: CHILD Asthma Call-Back
Column: 435
Prologue:
Description: PILL ACCOLATE

Type: NUM
SAS Variable Name: PILLS_ID_1

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL AEROLATE

Survey: CHILD Asthma Call-Back
Column: 436
Prologue:
Description: PILL AEROLATE

Type: NUM
SAS Variable Name: PILLS_ID_2

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL ALBUTEROL

    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 437   **SAS Variable Name:** PILLS_ID_3
    Prologue:
Description: PILL ALBUTEROL

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.00
2	No	1,099	99.91	100.00

PILL ALUPENT

    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 438   **SAS Variable Name:** PILLS_ID_4
    Prologue:
Description: PILL ALUPENT

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL CHOLEDYL (OXTRIPHYLLINE)

    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 439   **SAS Variable Name:** PILLS_ID_5
    Prologue:
Description: PILL CHOLEDYL (OXTRIPHYLLINE)

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL DELTASONE

    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 440   **SAS Variable Name:** PILLS_ID_7
    Prologue:
Description: PILL DELTASONE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL ELIXOPHYLLIN

    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 441   **SAS Variable Name:** PILLS_ID_8
    Prologue:
Description: PILL ELIXOPHYLLIN

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL MEDROL

    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 442   **SAS Variable Name:** PILLS_ID_11
    Prologue:
Description: PILL MEDROL

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.07
2	No	1,099	99.91	99.93

PILL METAPREL
Survey: CHILD Asthma Call-Back
Column: 443
Prologue:
Description: PILL METAPREL

Type: NUM
SAS Variable Name: PILLS_ID_12

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL METAPROTERONOL
Survey: CHILD Asthma Call-Back
Column: 444
Prologue:
Description: PILL METAPROTERONOL

Type: NUM
SAS Variable Name: PILLS_ID_13

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL METHYLPREDNISOLONE
Survey: CHILD Asthma Call-Back
Column: 445
Prologue:
Description: PILL METHYLPREDNISOLONE

Type: NUM
SAS Variable Name: PILLS_ID_14

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL MONTELUKAST
Survey: CHILD Asthma Call-Back
Column: 446
Prologue:
Description: PILL MONTELUKAST

Type: NUM
SAS Variable Name: PILLS_ID_15

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.18	0.53
2	No	1,098	99.82	99.47

PILL PEDIAPRED
Survey: CHILD Asthma Call-Back
Column: 447
Prologue:
Description: PILL PEDIAPRED

Type: NUM
SAS Variable Name: PILLS_ID_17

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL PREDNISOLONE
Survey: CHILD Asthma Call-Back
Column: 448
Prologue:
Description: PILL PREDNISOLONE

Type: NUM
SAS Variable Name: PILLS_ID_18

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL PREDNISONE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 449   **SAS Variable Name:** PILLS_ID_19
Prologue:
Description: PILL PREDNISONE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	12	1.09	1.49
2	No	1,088	98.91	98.51

PILL PROVENTIL

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 450   **SAS Variable Name:** PILLS_ID_21
Prologue:
Description: PILL PROVENTIL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL RESPID

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 451   **SAS Variable Name:** PILLS_ID_23
Prologue:
Description: PILL RESPID

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL SINGULAIR

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 452   **SAS Variable Name:** PILLS_ID_24
Prologue:
Description: PILL SINGULAIR

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	127	11.55	8.88
2	No	973	88.45	91.12

PILL SLO-PHYLLIN

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 453   **SAS Variable Name:** PILLS_ID_25
Prologue:
Description: PILL SLO-PHYLLIN

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL SLO-BID

Survey: CHILD Asthma Call-Back

Column: 454

Prologue:

Description: PILL SLO-BID

Type: NUM

SAS Variable Name: PILLS_ID_26

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL THEO-24

Survey: CHILD Asthma Call-Back

Column: 455

Prologue:

Description: PILL THEO-24

Type: NUM

SAS Variable Name: PILLS_ID_28

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL THEOCHRON

Survey: CHILD Asthma Call-Back

Column: 456

Prologue:

Description: PILL THEOCHRON

Type: NUM

SAS Variable Name: PILLS_ID_30

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL THEOCLEAR

Survey: CHILD Asthma Call-Back

Column: 457

Prologue:

Description: PILL THEOCLEAR

Type: NUM

SAS Variable Name: PILLS_ID_31

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL THEODUR

Survey: CHILD Asthma Call-Back

Column: 458

Prologue:

Description: PILL THEODUR

Type: NUM

SAS Variable Name: PILLS_ID_32

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL THEO-DUR

Survey: CHILD Asthma Call-Back

Column: 459

Prologue:

Description: PILL THEO-DUR

Type: NUM

SAS Variable Name: PILLS_ID_33

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL THEOPHYLLINE

Survey: CHILD Asthma Call-Back
Column: 460
Prologue:
Description: PILL THEOPHYLLINE

Type: NUM
SAS Variable Name: PILLS_ID_35

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL THEOSPAN

Survey: CHILD Asthma Call-Back
Column: 461
Prologue:
Description: PILL THEOSPAN

Type: NUM
SAS Variable Name: PILLS_ID_37

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL T-PHYL

Survey: CHILD Asthma Call-Back
Column: 462
Prologue:
Description: PILL T-PHYL

Type: NUM
SAS Variable Name: PILLS_ID_40

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL UNIPHYL

Survey: CHILD Asthma Call-Back
Column: 463
Prologue:
Description: PILL UNIPHYL

Type: NUM
SAS Variable Name: PILLS_ID_42

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL VENTOLIN

Survey: CHILD Asthma Call-Back
Column: 464
Prologue:
Description: PILL VENTOLIN

Type: NUM
SAS Variable Name: PILLS_ID_43

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL VOLMAX

Survey: CHILD Asthma Call-Back
Column: 465
Prologue:
Description: PILL VOLMAX

Type: NUM
SAS Variable Name: PILLS_ID_44

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL ZAFIRLUKAST

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 466   **SAS Variable Name:** PILLS_ID_45
Prologue:
Description: PILL ZAFIRLUKAST

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL ZILEUTON

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 467   **SAS Variable Name:** PILLS_ID_46
Prologue:
Description: PILL ZILEUTON

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL ZYFLO FILMTAB

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 468   **SAS Variable Name:** PILLS_ID_47
Prologue:
Description: PILL ZYFLO FILMTAB

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL TERBUTALINE (+ T. SULFATE)

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 469   **SAS Variable Name:** PILLS_ID_48
Prologue:
Description: PILL TERBUTALINE (+ T. SULFATE)

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

PILL BRETHINE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 470   **SAS Variable Name:** PILLS_ID_49
Prologue:
Description: PILL BRETHINE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

DON´T KNOW/REFUSED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 471   **SAS Variable Name:** PILLS_ID_7799
Prologue:
Description: DON´T KNOW/REFUSED

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

OTHER PILLS

Survey: CHILD Asthma Call-Back

Column: 472

Prologue:

Description: NEW OTHER PRESCRIPTION PILLS

Type: NUM

SAS Variable Name: OTHER_PILLS

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

SYRUP AEROLATE

Survey: CHILD Asthma Call-Back

Column: 473

Prologue:

Description: SYRUP AEROLATE

Type: NUM

SAS Variable Name: SYRUP_ID_1

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

SYRUP ALBUTEROL

Survey: CHILD Asthma Call-Back

Column: 474

Prologue:

Description: SYRUP ALBUTEROL

Type: NUM

SAS Variable Name: SYRUP_ID_2

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	5	0.45	0.81
2	No	1,095	99.55	99.19

SYRUP ALUPENT

Survey: CHILD Asthma Call-Back

Column: 475

Prologue:

Description: SYRUP ALUPENT

Type: NUM

SAS Variable Name: SYRUP_ID_3

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

SYRUP METAPROTERONOL

Survey: CHILD Asthma Call-Back

Column: 476

Prologue:

Description: SYRUP METAPROTERONOL

Type: NUM

SAS Variable Name: SYRUP_ID_4

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

SYRUP PREDNISOLONE

Survey: CHILD Asthma Call-Back

Column: 477

Prologue:

Description: SYRUP PREDNISOLONE

Type: NUM

SAS Variable Name: SYRUP_ID_5

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	11	1.00	2.03
2	No	1,089	99.00	97.97

SYRUP PRELONE
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 478 **SAS Variable Name:** SYRUP_ID_6
Prologue:
Description: SYRUP PRELONE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

SYRUP PROVENTIL
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 479 **SAS Variable Name:** SYRUP_ID_7
Prologue:
Description: SYRUP PROVENTIL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

SYRUP SLO-PHYLLIN
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 480 **SAS Variable Name:** SYRUP_ID_8
Prologue:
Description: SYRUP SLO-PHYLLIN

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

SYRUP THEOPHYLLINE
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 481 **SAS Variable Name:** SYRUP_ID_9
Prologue:
Description: SYRUP THEOPHYLLINE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.09
2	No	1,099	99.91	99.91

SYRUP VENTOLIN
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 482 **SAS Variable Name:** SYRUP_ID_10
Prologue:
Description: SYRUP VENTOLIN

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

DON´T KNOW/REFUSED
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 483 **SAS Variable Name:** SYRUP_ID_7799
Prologue:
Description: DON´T KNOW/REFUSED

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

OTHER SYRUP

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 484 **SAS Variable Name:** OTHER_SYRUP
Prologue:
Description: NEW OTHER PRESCRIPTION SYRUP

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

NEB ALBUTEROL

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 485 **SAS Variable Name:** NEB_ID_1
Prologue:
Description: NEB ALBUTEROL

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	173	15.73	14.82
2	No	927	84.27	85.18

NEB ALUPENT

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 486 **SAS Variable Name:** NEB_ID_2
Prologue:
Description: NEB ALUPENT

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

NEB ATROVENT

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 487 **SAS Variable Name:** NEB_ID_3
Prologue:
Description: NEB ATROVENT

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	6	0.55	1.17
2	No	1,094	99.45	98.83

NEB BITOLTEROL

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 488 **SAS Variable Name:** NEB_ID_4
Prologue:
Description: NEB BITOLTEROL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

NEB BUDESONIDE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 489 **SAS Variable Name:** NEB_ID_5
Prologue:
Description: NEB BUDESONIDE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	19	1.73	2.60
2	No	1,081	98.27	97.40

NEB CROMOLYN

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 490 **SAS Variable Name:** NEB_ID_6
Prologue:
Description: NEB CROMOLYN

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.03
2	No	1,099	99.91	99.97

NEB DUONEB

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 491 **SAS Variable Name:** NEB_ID_7
Prologue:
Description: NEB DUONEB

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.18	0.05
2	No	1,098	99.82	99.95

NEB INTAL

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 492 **SAS Variable Name:** NEB_ID_8
Prologue:
Description: NEB INTAL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

NEB IPRATROPRIUM BROMIDE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 493 **SAS Variable Name:** NEB_ID_9
Prologue:
Description: NEB IPRATROPRIUM BROMIDE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.27	0.02
2	No	1,097	99.73	99.98

NEB LEVALBUTEROL
Survey: CHILD Asthma Call-Back
Column: 494
Prologue:
Description: NEB LEVALBUTEROL

Type: NUM
SAS Variable Name: NEB_ID_10

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

NEB METAPROTERONOL
Survey: CHILD Asthma Call-Back
Column: 495
Prologue:
Description: NEB METAPROTERONOL

Type: NUM
SAS Variable Name: NEB_ID_11

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

NEB PROVENTIL
Survey: CHILD Asthma Call-Back
Column: 496
Prologue:
Description: NEB PROVENTIL

Type: NUM
SAS Variable Name: NEB_ID_12

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

NEB PULMICORT
Survey: CHILD Asthma Call-Back
Column: 497
Prologue:
Description: NEB PULMICORT

Type: NUM
SAS Variable Name: NEB_ID_13

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	27	2.45	3.76
2	No	1,073	97.55	96.24

NEB TORNALATE
Survey: CHILD Asthma Call-Back
Column: 498
Prologue:
Description: NEB TORNALATE

Type: NUM
SAS Variable Name: NEB_ID_14

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

NEB VENTOLIN
Survey: CHILD Asthma Call-Back
Column: 499
Prologue:
Description: NEB VENTOLIN

Type: NUM
SAS Variable Name: NEB_ID_15

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.27	0.97
2	No	1,097	99.73	99.03

NEB XOPENEX

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 500   **SAS Variable Name:** NEB_ID_16
Prologue:
Description: NEB XOPENEX

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	20	1.82	3.74
2	No	1,080	98.18	96.26

DON´T KNOW/REFUSED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 501   **SAS Variable Name:** NEB_ID_7799
Prologue:
Description: DON´T KNOW/REFUSED

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

OTHER NEBULIZER

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 502   **SAS Variable Name:** OTHER_NEB
Prologue:
Description: NEW OTHER PRESCRIPTION   NEBULIZER

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,100	100.00	100.00

OTHER INHALER TEXT

Survey: CHILD Asthma Call-Back   **Type:** CHAR
Column: 503-602   **SAS Variable Name:** OTH_I1R
Prologue:
Description: New other prescription inhaler name

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No other new asthma medication	1,097		
HIDDEN		3	100.00	100.00

OTHER PILLS TEXT

Survey: CHILD Asthma Call-Back   **Type:** CHAR
Column: 603-702   **SAS Variable Name:** OTH_P1R
Prologue:
Description: New other prescription pills name

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No other new asthma medication	1,100		

OTHER SYRUP TEXT

Survey: CHILD Asthma Call-Back
Column: 703-802
Prologue:
Description: New other prescription syrup name

Type: CHAR
SAS Variable Name: OTH_S1R

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No other new asthma medication	1,100		

OTHER NEBULIZER TEXT

Survey: CHILD Asthma Call-Back
Column: 803-902
Prologue:
Description: New other prescription nebulizer name

Type: CHAR
SAS Variable Name: OTH_N1R

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No other new asthma medication	1,100		

INHALER_TEXT: COUGH/COLD MED.

Survey: CHILD Asthma Call-Back
Column: 903
Prologue:
Description: Flag variables for the verbatim other responses to prescription inhaler

Type: NUM
SAS Variable Name: INHALER_TEXT1

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	10	0.91	0.34
3	No other medication text filled	1,090	99.09	99.66

INHALER_TEXT: ALLERGY MED.

Survey: CHILD Asthma Call-Back
Column: 904
Prologue:
Description: Flag variables for the verbatim other responses to prescription inhaler

Type: NUM
SAS Variable Name: INHALER_TEXT2

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.00
2	No	9	0.82	0.34
3	No other medication text filled	1,090	99.09	99.66

INHALER_TEXT: OTHER MED. (NOT COLD/COUGH/ALLERGY)

Survey: CHILD Asthma Call-Back
Column: 905
Prologue:
Description: Flag variables for the verbatim other responses to prescription inhaler

Type: NUM
SAS Variable Name: INHALER_TEXT3

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	10	0.91	0.34
3	No other medication text filled	1,090	99.09	99.66

INHALER_TEXT: ASTHMA MED., BUT NOT INHALER

Survey: CHILD Asthma Call-Back

Column: 906

Prologue:

Type: NUM

SAS Variable Name: INHALER_TEXT4

Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.00
2	No	9	0.82	0.34
3	No other medication text filled	1,090	99.09	99.66

INHALER_TEXT: UNIDENTIFIABLE WORD OR NOT A MED.

Survey: CHILD Asthma Call-Back

Column: 907

Prologue:

Type: NUM

SAS Variable Name: INHALER_TEXT5

Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.01
2	No	9	0.82	0.33
3	No other medication text filled	1,090	99.09	99.66

INHALER_TEXT: WAS BACK CODED TO EXISTING INHALER

Survey: CHILD Asthma Call-Back

Column: 908

Prologue:

Type: NUM

SAS Variable Name: INHALER_TEXT6

Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.27	0.09
2	No	7	0.64	0.25
3	No other medication text filled	1,090	99.09	99.66

INHALER_TEXT: OTC INHALER, PILL, OR SYRUP

Survey: CHILD Asthma Call-Back

Column: 909

Prologue:

Type: NUM

SAS Variable Name: INHALER_TEXT7

Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	10	0.91	0.34
3	No other medication text filled	1,090	99.09	99.66

INHALER_TEXT: TRUE ASTHMA MED., NO AVAILABLE BACK CODE

Survey: CHILD Asthma Call-Back

Column: 910

Prologue:

Type: NUM

SAS Variable Name: INHALER_TEXT8

Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.27	0.23
2	No	7	0.64	0.11
3	No other medication text filled	1,090	99.09	99.66

INHALER_TEXT: DON'T KNOW

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 911   **SAS Variable Name:** INHALER_TEXT96
Prologue:
Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.00
2	No	9	0.82	0.34
3	No other medication text filled	1,090	99.09	99.66

PILLS_TEXT: COUGH/COLD MED.

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 912   **SAS Variable Name:** PILLS_TEXT1
Prologue:
Description: Flag variables for the verbatim other responses to prescription pills

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	11	1.00	0.28
3	No other medication text filled	1,089	99.00	99.72

PILLS_TEXT: ALLERGY MED.

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 913   **SAS Variable Name:** PILLS_TEXT2
Prologue:
Description: Flag variables for the verbatim other responses to prescription pills

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	11	1.00	0.28
3	No other medication text filled	1,089	99.00	99.72

PILLS_TEXT: OTHER MED. (NOT COLD/COUGH/ALLERGY)

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 914   **SAS Variable Name:** PILLS_TEXT3
Prologue:
Description: Flag variables for the verbatim other responses to prescription pills

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	11	1.00	0.28
3	No other medication text filled	1,089	99.00	99.72

PILLS_TEXT: ASTHMA MED., BUT NOT PILLS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 915   **SAS Variable Name:** PILLS_TEXT4
Prologue:
Description: Flag variables for the verbatim other responses to prescription pills

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	11	1.00	0.28
3	No other medication text filled	1,089	99.00	99.72

PILLS_TEXT: UNIDENTIFIABLE WORD OR NOT A MED.

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 916   **SAS Variable Name:** PILLS_TEXT5

Prologue:

Description: Flag variables for the verbatim other responses to prescription pills

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	11	1.00	0.28
3	No other medication text filled	1,089	99.00	99.72

PILLS_TEXT: WAS BACK CODED TO EXISTING PILLS

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 917   **SAS Variable Name:** PILLS_TEXT6

Prologue:

Description: Flag variables for the verbatim other responses to prescription pills

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	11	1.00	0.28
3	No other medication text filled	1,089	99.00	99.72

PILLS_TEXT: OTC INHALER, PILL, OR SYRUP

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 918   **SAS Variable Name:** PILLS_TEXT7

Prologue:

Description: Flag variables for the verbatim other responses to prescription pills

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	11	1.00	0.28
3	No other medication text filled	1,089	99.00	99.72

PILLS_TEXT: TRUE ASTHMA MED., NO AVAILABLE BACK CODE

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 919   **SAS Variable Name:** PILLS_TEXT8

Prologue:

Description: Flag variables for the verbatim other responses to prescription pills

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	11	1.00	0.28
3	No other medication text filled	1,089	99.00	99.72

PILLS_TEXT: DON'T KNOW

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 920   **SAS Variable Name:** PILLS_TEXT96

Prologue:

Description: Flag variables for the verbatim other responses to prescription pills

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	11	1.00	0.28
3	No other medication text filled	1,089	99.00	99.72

SYRUP_TEXT: COUGH/COLD MED.

Survey: CHILD Asthma Call-Back
Column: 921
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Type: NUM
SAS Variable Name: SYRUP_TEXT1

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	0.09	0.09
3	No other medication text filled	1,099	99.91	99.91

SYRUP_TEXT: ALLERGY MED.

Survey: CHILD Asthma Call-Back
Column: 922
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Type: NUM
SAS Variable Name: SYRUP_TEXT2

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.09
3	No other medication text filled	1,099	99.91	99.91

SYRUP_TEXT: OTHER MED. (NOT COLD/COUGH/ALLERGY)

Survey: CHILD Asthma Call-Back
Column: 923
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Type: NUM
SAS Variable Name: SYRUP_TEXT3

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	0.09	0.09
3	No other medication text filled	1,099	99.91	99.91

SYRUP_TEXT: ASTHMA MED., BUT NOT SYRUP

Survey: CHILD Asthma Call-Back
Column: 924
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Type: NUM
SAS Variable Name: SYRUP_TEXT4

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	0.09	0.09
3	No other medication text filled	1,099	99.91	99.91

SYRUP_TEXT: UNIDENTIFIABLE WORD OR NOT A MED.

Survey: CHILD Asthma Call-Back
Column: 925
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Type: NUM
SAS Variable Name: SYRUP_TEXT5

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	0.09	0.09
3	No other medication text filled	1,099	99.91	99.91

SYRUP_TEXT: WAS BACK CODED TO EXISTING SYRUP

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 926　　　　　　　　　　　　　　　　**SAS Variable Name:** SYRUP_TEXT6
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	0.09	0.09
3	No other medication text filled	1,099	99.91	99.91

SYRUP_TEXT: OTC INHALER, PILL, OR SYRUP

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 927　　　　　　　　　　　　　　　　**SAS Variable Name:** SYRUP_TEXT7
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	0.09	0.09
3	No other medication text filled	1,099	99.91	99.91

SYRUP_TEXT: TRUE ASTHMA MED., NO AVAILABLE BACK CODE

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 928　　　　　　　　　　　　　　　　**SAS Variable Name:** SYRUP_TEXT8
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	0.09	0.09
3	No other medication text filled	1,099	99.91	99.91

SYRUP_TEXT: DON'T KNOW

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 929　　　　　　　　　　　　　　　　**SAS Variable Name:** SYRUP_TEXT96
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	0.09	0.09
3	No other medication text filled	1,099	99.91	99.91

NEB_TEXT: COUGH/COLD MED.

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 930　　　　　　　　　　　　　　　　**SAS Variable Name:** NEB_TEXT1
Prologue:
Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	4	0.36	0.23
3	No other medication text filled	1,096	99.64	99.77

NEB_TEXT: ALLERGY MED.

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 931 **SAS Variable Name:** NEB_TEXT2
Prologue:
Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	4	0.36	0.23
3	No other medication text filled	1,096	99.64	99.77

NEB_TEXT: OTHER MED. (NOT COLD/COUGH/ALLERGY)

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 932 **SAS Variable Name:** NEB_TEXT3
Prologue:
Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.03
2	No	3	0.27	0.20
3	No other medication text filled	1,096	99.64	99.77

NEB_TEXT: ASTHMA MED., BUT NOT NEB

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 933 **SAS Variable Name:** NEB_TEXT4
Prologue:
Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.18	0.12
2	No	2	0.18	0.11
3	No other medication text filled	1,096	99.64	99.77

NEB_TEXT: UNIDENTIFIABLE WORD OR NOT A MED.

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 934 **SAS Variable Name:** NEB_TEXT5
Prologue:
Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	4	0.36	0.23
3	No other medication text filled	1,096	99.64	99.77

NEB_TEXT: WAS BACK CODED TO EXISTING NEB

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 935 **SAS Variable Name:** NEB_TEXT6
Prologue:
Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	4	0.36	0.23
3	No other medication text filled	1,096	99.64	99.77

NEB_TEXT: OTC INHALER, PILL, OR SYRUP

Survey: CHILD Asthma Call-Back

Column: 936

Prologue:

Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	4	0.36	0.23
3	No other medication text filled	1,096	99.64	99.77

Type: NUM

SAS Variable Name: NEB_TEXT7

NEB_TEXT: TRUE ASTHMA MED., NO AVAILABLE BACK CODE

Survey: CHILD Asthma Call-Back

Column: 937

Prologue:

Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	4	0.36	0.23
3	No other medication text filled	1,096	99.64	99.77

Type: NUM

SAS Variable Name: NEB_TEXT8

NEB_TEXT: DON'T KNOW

Survey: CHILD Asthma Call-Back

Column: 938

Prologue:

Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.08
2	No	3	0.27	0.15
3	No other medication text filled	1,096	99.64	99.77

Type: NUM

SAS Variable Name: NEB_TEXT96

INHALED CORTICOSTEROIDS

Survey: CHILD Asthma Call-Back

Column: 939-940

Prologue:

Description: INHALED CORTICOSTEROIDS

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 14	Count	1,093	99.36	99.77
99	Missing	7	0.64	0.23

Type: NUM

SAS Variable Name: INH_CS

INHALED ANTI-INFLAMMATORY

Survey: CHILD Asthma Call-Back

Column: 941-942

Prologue:

Description: INHALED ANTI-INFLAMMATORY

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 4	Count	1,093	99.36	99.77
99	Missing	7	0.64	0.23

Type: NUM

SAS Variable Name: INH_AI

INHALED ANTI-CHOLINERGIC

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 943-944   **SAS Variable Name:** INH_AC
Prologue:
Description: INHALED ANTI-CHOLINERGIC

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 3	Count	1,093	99.36	99.77
99	Missing	7	0.64	0.23

INHALED BETA 2 AGONIST SHORT ACTING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 945-946   **SAS Variable Name:** INH_B2AS
Prologue:
Description: INHALED BETA 2 AGONIST SHORT ACTING

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 12	Count	1,093	99.36	99.77
99	Missing	7	0.64	0.23

INHALED BETA 2 AGONIST LONG ACTING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 947-948   **SAS Variable Name:** INH_B2AL
Prologue:
Description: INHALED BETA 2 AGONIST LONG ACTING

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 5	Count	1,093	99.36	99.77
99	Missing	7	0.64	0.23

PILL CORTICOSTEROIDS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 949-950   **SAS Variable Name:** PILL_CS
Prologue:
Description: PILL CORTICOSTEROIDS

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 7	Count	1,074	97.64	97.86
99	Missing	26	2.36	2.14

PILL LEUKOTRIENE MODIFIERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 951-952   **SAS Variable Name:** PILL_LM
Prologue:
Description: PILL LEUKOTRIENE MODIFIERS

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 6	Count	1,074	97.64	97.86
99	Missing	26	2.36	2.14

NEBULIZER ANTI-INFLAMMATORY

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 963-964 **SAS Variable Name:** NEB_AI
Prologue:
Description: NEBULIZER ANTI-INFLAMMATORY

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 - 2	Count	1,073	97.55	98.22
99	Missing	27	2.45	1.78

NEBULIZER CORTICOSTEROID

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 965-966 **SAS Variable Name:** NEB_CS
Prologue:
Description: NEBULIZER CORTICOSTEROID

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 - 2	Count	1,073	97.55	98.22
99	Missing	27	2.45	1.78

NEBULIZER ANTICHOLINERGIC

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 967-968 **SAS Variable Name:** NEB_AC
Prologue:
Description: NEBULIZER ANTICHOLINERGIC

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 - 3	Count	1,073	97.55	98.22
99	Missing	27	2.45	1.78

NEBULIZER BETA 2 AGONIST

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 969-970 **SAS Variable Name:** NEB_B2A
Prologue:
Description: NEBULIZER BETA 2 AGONIST

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 - 8	Count	1,073	97.55	98.22
99	Missing	27	2.45	1.78

ADVAIR (+ A. DISKUS): WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 971 **SAS Variable Name:** ILP03_1
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ADVAIR (+ A. DISKUS): WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 972   **SAS Variable Name:** ILP04_1

Prologue:

Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	17	36.96	25.83
2	No	24	52.17	66.47
3	No attack in past 3 months	4	8.70	6.70
7	Don´t know	1	2.17	1.00
BLANK	Skip filled	1,054		

ADVAIR (+ A. DISKUS): BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 973   **SAS Variable Name:** ILP05_1

Prologue:

Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	12	26.09	24.96
2	No	32	69.57	73.05
7	Don´t know	2	4.35	1.99
BLANK	Skip filled	1,054		

ADVAIR (+ A. DISKUS): REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 974   **SAS Variable Name:** ILP06_1

Prologue:

Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	42	91.30	93.12
2	No	4	8.70	6.88
BLANK	Skip filled	1,054		

ADVAIR (+ A. DISKUS): TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 975-977   **SAS Variable Name:** ILP08_1

Prologue:

Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	42	91.30	94.49
401 – 499	Weeks	1	2.17	0.19
555	Never	2	4.35	4.15
666	Less often than once a week	1	2.17	1.17
BLANK	Skip filled	1,054		

ADVAIR (+ A. DISKUS): NUMBER OF CANISTERS
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 978-979   **SAS Variable Name:** ILP10_1
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

AEROBID: WHETHER SPACER USED
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 980   **SAS Variable Name:** ILP03_2
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

AEROBID: WHEN ATTACK
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 981   **SAS Variable Name:** ILP04_2
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	No attack in past 3 months	1	100.00	100.00
BLANK	Skip filled	1,099		

AEROBID: BEFORE EXERCISING
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 982   **SAS Variable Name:** ILP05_2
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

AEROBID: REGULAR SCHEDULE
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 983   **SAS Variable Name:** ILP06_2
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

AEROBID: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 984-986   **SAS Variable Name:** ILP08_2
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
401 – 499	Weeks	1	100.00	100.00
BLANK	Skip filled	1,099		

AEROBID: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 987-988   **SAS Variable Name:** ILP10_2
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ALBUTEROL (+ A. SULFATE OR SALBUTAMOL): WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 989   **SAS Variable Name:** ILP03_3
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	83	50.92	43.76
2	No	75	46.01	52.49
7	Don´t know	4	2.45	2.30
9	Refused	1	0.61	1.45
BLANK	Skip filled	937		

ALBUTEROL (+ A. SULFATE OR SALBUTAMOL): WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 990   **SAS Variable Name:** ILP04_3
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	135	82.82	80.46
2	No	17	10.43	11.74
3	No attack in past 3 months	9	5.52	6.91
7	Don´t know	1	0.61	0.13
9	Refused	1	0.61	0.77
BLANK	Skip filled	937		

ALBUTEROL (+ A. SULFATE OR SALBUTAMOL): BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 991 **SAS Variable Name:** ILP05_3
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	66	40.49	39.96
2	No	89	54.60	57.31
3	Didn´t exercise in past 3 months	4	2.45	1.07
7	Don´t know	3	1.84	0.88
9	Refused	1	0.61	0.77
BLANK	Skip filled	937		

ALBUTEROL (+ A. SULFATE OR SALBUTAMOL): REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 992 **SAS Variable Name:** ILP06_3
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	42	25.77	31.84
2	No	119	73.01	67.26
7	Don´t know	1	0.61	0.13
9	Refused	1	0.61	0.77
BLANK	Skip filled	937		

ALBUTEROL (+ A. SULFATE OR SALBUTAMOL): TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 993-995 **SAS Variable Name:** ILP08_3
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	44	26.99	36.72
401 – 499	Weeks	59	36.20	28.52
555	Never	9	5.52	13.01
666	Less often than once a week	45	27.61	20.18
777	Don´t know/Not sure	4	2.45	0.67
999	Refused	2	1.23	0.90
BLANK	Skip filled	937		

ALBUTEROL (+ A. SULFATE OR SALBUTAMOL): NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 996-997 **SAS Variable Name:** ILP10_3
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 canisters	106	65.03	75.55
77	Don´t know	6	3.68	5.25
88	None	51	31.29	19.20
BLANK	Skip filled	937		

ALUPENT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 998　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP03_4
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13　　Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ALUPENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 999　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP04_4
Prologue:
Description: Q8.14　　In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ALUPENT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1000　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP05_4
Prologue:
Description: Q8.15　　In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ALUPENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1001　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP06_4
Prologue:
Description: Q8.16　　In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ALUPENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1002-1004　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP08_4
Prologue:
Description: Q8.18　　How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ALUPENT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1005-1006　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP10_4
Prologue:
Description: Q8.19　　How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ATROVENT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1007   **SAS Variable Name:** ILP03_5
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

ATROVENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1008   **SAS Variable Name:** ILP04_5
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

ATROVENT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1009   **SAS Variable Name:** ILP05_5
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

ATROVENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1010   **SAS Variable Name:** ILP06_5
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

ATROVENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1011-1013   **SAS Variable Name:** ILP08_5
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	1	100.00	100.00
BLANK	Skip filled	1,099		

ATROVENT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1014-1015 **SAS Variable Name:** ILP10_5
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

AZMACORT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1016 **SAS Variable Name:** ILP03_6
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

AZMACORT: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1017 **SAS Variable Name:** ILP04_6
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

AZMACORT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1018 **SAS Variable Name:** ILP05_6
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

AZMACORT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1019 **SAS Variable Name:** ILP06_6
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

AZMACORT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1020-1022 **SAS Variable Name:** ILP08_6
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

AZMACORT: NUMBER OF CANISTERS
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1023-1024 **SAS Variable Name:** ILP10_6
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BECLOMETHASONE DIPROPIONATE: WHETHER SPACER USED
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1025 **SAS Variable Name:** ILP03_7
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2	100.00	100.00
BLANK	Skip filled	1,098		

BECLOMETHASONE DIPROPIONATE: WHEN ATTACK
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1026 **SAS Variable Name:** ILP04_7
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	50.00	45.65
2	No	1	50.00	54.35
BLANK	Skip filled	1,098		

BECLOMETHASONE DIPROPIONATE: BEFORE EXERCISING
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1027 **SAS Variable Name:** ILP05_7
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2	100.00	100.00
BLANK	Skip filled	1,098		

BECLOMETHASONE DIPROPIONATE: REGULAR SCHEDULE
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1028 **SAS Variable Name:** ILP06_7
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	100.00	100.00
BLANK	Skip filled	1,098		

BECLOMETHASONE DIPROPIONATE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1029-1031   **SAS Variable Name:** ILP08_7
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	2	100.00	100.00
BLANK	Skip filled	1,098		

BECLOMETHASONE DIPROPIONATE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1032-1033   **SAS Variable Name:** ILP10_7
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BECLOVENT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1034   **SAS Variable Name:** ILP03_8
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BECLOVENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1035   **SAS Variable Name:** ILP04_8
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BECLOVENT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1036   **SAS Variable Name:** ILP05_8
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BECLOVENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1037   **SAS Variable Name:** ILP06_8
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BECLOVENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1038-1040　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP08_8
Prologue:
Description: Q8.18　　How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BECLOVENT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1041-1042　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP10_8
Prologue:
Description: Q8.19　　How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BITOLTEROL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1043　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP03_9
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13　　Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2	100.00	100.00
BLANK	Skip filled	1,098		

BITOLTEROL: WHEN ATTACK

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1044　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP04_9
Prologue:
Description: Q8.14　　In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	100.00	100.00
BLANK	Skip filled	1,098		

BITOLTEROL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1045　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP05_9
Prologue:
Description: Q8.15　　In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	50.00	39.41
2	No	1	50.00	60.59
BLANK	Skip filled	1,098		

BITOLTEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1046   **SAS Variable Name:** ILP06_9
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	50.00	39.41
2	No	1	50.00	60.59
BLANK	Skip filled	1,098		

BITOLTEROL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1047-1049   **SAS Variable Name:** ILP08_9
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
401 – 499	Weeks	2	100.00	100.00
BLANK	Skip filled	1,098		

BITOLTEROL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1050-1051   **SAS Variable Name:** ILP10_9
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 canisters	2	100.00	100.00
BLANK	Skip filled	1,098		

BRETHAIRE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1052   **SAS Variable Name:** ILP03_10
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BRETHAIRE: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1053   **SAS Variable Name:** ILP04_10
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BRETHAIRE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1054　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP05_10
Prologue:
Description: Q8.15　　In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BRETHAIRE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1055　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP06_10
Prologue:
Description: Q8.16　　In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BRETHAIRE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1056-1058　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP08_10
Prologue:
Description: Q8.18　　How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BRETHAIRE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1059-1060　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP10_10
Prologue:
Description: Q8.19　　How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BUDESONIDE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1061　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP03_11
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13　　Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

BUDESONIDE: WHEN ATTACK

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1062
SAS Variable Name: ILP04_11
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

BUDESONIDE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1063
SAS Variable Name: ILP05_11
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

BUDESONIDE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1064
SAS Variable Name: ILP06_11
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

BUDESONIDE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1065-1067
SAS Variable Name: ILP08_11
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
401 – 499	Weeks	1	100.00	100.00
BLANK	Skip filled	1,099		

BUDESONIDE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1068-1069
SAS Variable Name: ILP10_11
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

COMBIVENT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1070   **SAS Variable Name:** ILP03_12
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	50.00	96.98
2	No	1	50.00	3.02
BLANK	Skip filled	1,098		

COMBIVENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1071   **SAS Variable Name:** ILP04_12
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	100.00	100.00
BLANK	Skip filled	1,098		

COMBIVENT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1072   **SAS Variable Name:** ILP05_12
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	50.00	3.02
2	No	1	50.00	96.98
BLANK	Skip filled	1,098		

COMBIVENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1073   **SAS Variable Name:** ILP06_12
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	50.00	3.02
2	No	1	50.00	96.98
BLANK	Skip filled	1,098		

COMBIVENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1074-1076   **SAS Variable Name:** ILP08_12
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	2	100.00	100.00
BLANK	Skip filled	1,098		

COMBIVENT: NUMBER OF CANISTERS
  Survey: CHILD Asthma Call-Back   **Type:** NUM
  Column: 1077-1078   **SAS Variable Name:** ILP10_12
  Prologue:
Description: Q8.19 How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

CROMOLYN: WHETHER SPACER USED
  Survey: CHILD Asthma Call-Back   **Type:** NUM
  Column: 1079   **SAS Variable Name:** ILP03_13
  Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13 Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

CROMOLYN: WHEN ATTACK
  Survey: CHILD Asthma Call-Back   **Type:** NUM
  Column: 1080   **SAS Variable Name:** ILP04_13
  Prologue:
Description: Q8.14 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

CROMOLYN: BEFORE EXERCISING
  Survey: CHILD Asthma Call-Back   **Type:** NUM
  Column: 1081   **SAS Variable Name:** ILP05_13
  Prologue:
Description: Q8.15 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

CROMOLYN: REGULAR SCHEDULE
  Survey: CHILD Asthma Call-Back   **Type:** NUM
  Column: 1082   **SAS Variable Name:** ILP06_13
  Prologue:
Description: Q8.16 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

CROMOLYN: TIMES PER DAY/WEEK
  Survey: CHILD Asthma Call-Back   **Type:** NUM
  Column: 1083-1085   **SAS Variable Name:** ILP08_13
  Prologue:
Description: Q8.18 How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

CROMOLYN: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back

Column: 1086-1087

Prologue:

Type: NUM

SAS Variable Name: ILP10_13

Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FLOVENT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back

Column: 1088

Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.

Type: NUM

SAS Variable Name: ILP03_14

Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	61	75.31	82.89
2	No	20	24.69	17.11
BLANK	Skip filled	1,019		

FLOVENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back

Column: 1089

Prologue:

Type: NUM

SAS Variable Name: ILP04_14

Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	44	54.32	62.80
2	No	31	38.27	24.49
3	No attack in past 3 months	6	7.41	12.70
BLANK	Skip filled	1,019		

FLOVENT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back

Column: 1090

Prologue:

Type: NUM

SAS Variable Name: ILP05_14

Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	19	23.46	37.86
2	No	61	75.31	60.92
3	Didn't exercise in past 3 months	1	1.23	1.22
BLANK	Skip filled	1,019		

FLOVENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back

Column: 1091

Prologue:

Type: NUM

SAS Variable Name: ILP06_14

Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	63	77.78	80.69
2	No	18	22.22	19.31
BLANK	Skip filled	1,019		

FLOVENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1092-1094 **SAS Variable Name:** ILP08_14
Prologue:
Description: Q8.18 How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	62	76.54	79.68
401 – 499	Weeks	12	14.81	15.94
666	Less often than once a week	6	7.41	4.25
777	Don´t know/Not sure	1	1.23	0.13
BLANK	Skip filled	1,019		

FLOVENT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1095-1096 **SAS Variable Name:** ILP10_14
Prologue:
Description: Q8.19 How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FLOVENT ROTADISK: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1097 **SAS Variable Name:** ILP03_15
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13 Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FLOVENT ROTADISK: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1098 **SAS Variable Name:** ILP04_15
Prologue:
Description: Q8.14 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2	50.00	62.72
3	No attack in past 3 months	2	50.00	37.28
BLANK	Skip filled	1,096		

FLOVENT ROTADISK: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1099 **SAS Variable Name:** ILP05_15
Prologue:
Description: Q8.15 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	4	100.00	100.00
BLANK	Skip filled	1,096		

FLOVENT ROTADISK: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1100   **SAS Variable Name:** ILP06_15
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	100.00	100.00
BLANK	Skip filled	1,096		

FLOVENT ROTADISK: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1101-1103   **SAS Variable Name:** ILP08_15
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	3	75.00	39.23
401 – 499	Weeks	1	25.00	60.77
BLANK	Skip filled	1,096		

FLOVENT ROTADISK: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1104-1105   **SAS Variable Name:** ILP10_15
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FLUNISOLIDE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1106   **SAS Variable Name:** ILP03_16
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FLUNISOLIDE: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1107   **SAS Variable Name:** ILP04_16
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FLUNISOLIDE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1108   **SAS Variable Name:** ILP05_16
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FLUNISOLIDE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1109   **SAS Variable Name:** ILP06_16
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FLUNISOLIDE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1110-1112   **SAS Variable Name:** ILP08_16
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FLUNISOLIDE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1113-1114   **SAS Variable Name:** ILP10_16
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FLUTICASONE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1115   **SAS Variable Name:** ILP03_17
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	3	100.00	100.00
BLANK	Skip filled	1,097		

FLUTICASONE: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1116 **SAS Variable Name:** ILP04_17
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	33.33	44.67
2	No	2	66.67	55.33
BLANK	Skip filled	1,097		

FLUTICASONE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1117 **SAS Variable Name:** ILP05_17
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	33.33	35.22
2	No	2	66.67	64.78
BLANK	Skip filled	1,097		

FLUTICASONE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1118 **SAS Variable Name:** ILP06_17
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	100.00	100.00
BLANK	Skip filled	1,097		

FLUTICASONE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1119-1121 **SAS Variable Name:** ILP08_17
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	2	66.67	64.78
401 – 499	Weeks	1	33.33	35.22
BLANK	Skip filled	1,097		

FLUTICASONE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1122-1123 **SAS Variable Name:** ILP10_17
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

INTAL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1124   **SAS Variable Name:** ILP03_18
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

INTAL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1125   **SAS Variable Name:** ILP04_18
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

INTAL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1126   **SAS Variable Name:** ILP05_18
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

INTAL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1127   **SAS Variable Name:** ILP06_18
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

INTAL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1128-1130   **SAS Variable Name:** ILP08_18
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

INTAL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1131-1132   **SAS Variable Name:** ILP10_18
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

IPRATROPIUM BROMIDE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1133　　　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP03_19
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13　Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

IPRATROPIUM BROMIDE: WHEN ATTACK

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1134　　　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP04_19
Prologue:
Description: Q8.14　In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

IPRATROPIUM BROMIDE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1135　　　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP05_19
Prologue:
Description: Q8.15　In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

IPRATROPIUM BROMIDE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1136　　　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP06_19
Prologue:
Description: Q8.16　In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

IPRATROPIUM BROMIDE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1137-1139　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP08_19
Prologue:
Description: Q8.18　How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
555	Never	1	100.00	100.00
BLANK	Skip filled	1,099		

IPRATROPIUM BROMIDE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1140-1141   **SAS Variable Name:** ILP10_19
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

MAXAIR: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1142   **SAS Variable Name:** ILP03_20
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

MAXAIR: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1143   **SAS Variable Name:** ILP04_20
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	80.00	71.38
2	No	1	20.00	28.62
BLANK	Skip filled	1,095		

MAXAIR: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1144   **SAS Variable Name:** ILP05_20
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	80.00	79.94
2	No	1	20.00	20.06
BLANK	Skip filled	1,095		

MAXAIR: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1145   **SAS Variable Name:** ILP06_20
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	5	100.00	100.00
BLANK	Skip filled	1,095		

MAXAIR: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1146-1148   **SAS Variable Name:** ILP08_20
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
401 – 499	Weeks	4	80.00	82.60
777	Don´t know/Not sure	1	20.00	17.40
BLANK	Skip filled	1,095		

MAXAIR: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1149-1150   **SAS Variable Name:** ILP10_20
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 canisters	2	40.00	26.21
88	None	3	60.00	73.79
BLANK	Skip filled	1,095		

METAPROTERONOL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1151   **SAS Variable Name:** ILP03_21
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

METAPROTERONOL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1152   **SAS Variable Name:** ILP04_21
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

METAPROTERONOL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1153   **SAS Variable Name:** ILP05_21
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

METAPROTERONOL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1154   **SAS Variable Name:** ILP06_21
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

METAPROTERONOL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1155-1157   **SAS Variable Name:** ILP08_21
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

METAPROTERONOL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1158-1159   **SAS Variable Name:** ILP10_21
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

NEDOCROMIL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1160   **SAS Variable Name:** ILP03_22
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

NEDOCROMIL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1161   **SAS Variable Name:** ILP04_22
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

NEDOCROMIL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1162   **SAS Variable Name:** ILP05_22
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

NEDOCROMIL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1163   **SAS Variable Name:** ILP06_22
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

NEDOCROMIL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1164-1166   **SAS Variable Name:** ILP08_22
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

NEDOCROMIL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1167-1168   **SAS Variable Name:** ILP10_22
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PIRBUTEROL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1169   **SAS Variable Name:** ILP03_23
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

PIRBUTEROL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1170   **SAS Variable Name:** ILP04_23
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	No attack in past 3 months	1	100.00	100.00
BLANK	Skip filled	1,099		

PIRBUTEROL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1171   **SAS Variable Name:** ILP05_23
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

PIRBUTEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1172   **SAS Variable Name:** ILP06_23
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

PIRBUTEROL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1173-1175   **SAS Variable Name:** ILP08_23
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
401 – 499	Weeks	1	100.00	100.00
BLANK	Skip filled	1,099		

PIRBUTEROL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1176-1177   **SAS Variable Name:** ILP10_23
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 canisters	1	100.00	100.00
BLANK	Skip filled	1,099		

PROVENTIL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1178   **SAS Variable Name:** ILP03_24
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	11	55.00	61.14
2	No	9	45.00	38.86
BLANK	Skip filled	1,080		

PROVENTIL: WHEN ATTACK

Survey: CHILD Asthma Call-Back
Column: 1179
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Type: NUM
SAS Variable Name: ILP04_24

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	17	85.00	94.24
2	No	2	10.00	3.67
3	No attack in past 3 months	1	5.00	2.09
BLANK	Skip filled	1,080		

PROVENTIL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Column: 1180
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Type: NUM
SAS Variable Name: ILP05_24

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	12	60.00	73.48
2	No	8	40.00	26.52
BLANK	Skip filled	1,080		

PROVENTIL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1181
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Type: NUM
SAS Variable Name: ILP06_24

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	20.00	21.70
2	No	16	80.00	78.30
BLANK	Skip filled	1,080		

PROVENTIL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1182-1184
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Type: NUM
SAS Variable Name: ILP08_24

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	7	35.00	26.19
401 – 499	Weeks	4	20.00	27.13
666	Less often than once a week	7	35.00	25.32
777	Don´t know/Not sure	2	10.00	21.36
BLANK	Skip filled	1,080		

PROVENTIL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back

Column: 1185-1186

Prologue:

Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Type: NUM

SAS Variable Name: ILP10_24

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 76	01-76 canisters	14	70.00	85.32
77	Don´t know	1	5.00	0.15
88	None	5	25.00	14.53
BLANK	Skip filled	1,080		

PULMICORT FLEXHALER: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back

Column: 1187

Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.

Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Type: NUM

SAS Variable Name: ILP03_25

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PULMICORT FLEXHALER: WHEN ATTACK

Survey: CHILD Asthma Call-Back

Column: 1188

Prologue:

Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Type: NUM

SAS Variable Name: ILP04_25

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	33.33	44.18
2	No	7	58.33	35.19
3	No attack in past 3 months	1	8.33	20.63
BLANK	Skip filled	1,088		

PULMICORT FLEXHALER: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back

Column: 1189

Prologue:

Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Type: NUM

SAS Variable Name: ILP05_25

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	25.00	40.08
2	No	9	75.00	59.92
BLANK	Skip filled	1,088		

PULMICORT FLEXHALER: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back

Column: 1190

Prologue:

Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Type: NUM

SAS Variable Name: ILP06_25

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	9	75.00	84.88
2	No	3	25.00	15.12
BLANK	Skip filled	1,088		

PULMICORT FLEXHALER: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1191-1193   **SAS Variable Name:** ILP08_25
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	10	83.33	88.73
401 – 499	Weeks	2	16.67	11.27
BLANK	Skip filled	1,088		

PULMICORT FLEXHALER: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1194-1195   **SAS Variable Name:** ILP10_25
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

SALMETEROL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1196   **SAS Variable Name:** ILP03_26
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

SALMETEROL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1197   **SAS Variable Name:** ILP04_26
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

SALMETEROL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1198   **SAS Variable Name:** ILP05_26
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

SALMETEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1199 **SAS Variable Name:** ILP06_26
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

SALMETEROL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1200-1202 **SAS Variable Name:** ILP08_26
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

SALMETEROL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1203-1204 **SAS Variable Name:** ILP10_26
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

SEREVENT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1205 **SAS Variable Name:** ILP03_27
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

SEREVENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1206 **SAS Variable Name:** ILP04_27
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

SEREVENT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1207   **SAS Variable Name:** ILP05_27
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

SEREVENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1208   **SAS Variable Name:** ILP06_27
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

SEREVENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1209-1211   **SAS Variable Name:** ILP08_27
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
401 – 499	Weeks	1	100.00	100.00
BLANK	Skip filled	1,099		

SEREVENT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1212-1213   **SAS Variable Name:** ILP10_27
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TERBUTALINE (+ T. SULFATE): WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1214   **SAS Variable Name:** ILP03_28
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TERBUTALINE (+ T. SULFATE): WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1215 **SAS Variable Name:** ILP04_28
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TERBUTALINE (+ T. SULFATE): BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1216 **SAS Variable Name:** ILP05_28
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TERBUTALINE (+ T. SULFATE): REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1217 **SAS Variable Name:** ILP06_28
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TERBUTALINE (+ T. SULFATE): TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1218-1220 **SAS Variable Name:** ILP08_28
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TERBUTALINE (+ T. SULFATE): NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1221-1222 **SAS Variable Name:** ILP10_28
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TILADE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1223 **SAS Variable Name:** ILP03_29
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TILADE: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1224 **SAS Variable Name:** ILP04_29
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TILADE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1225 **SAS Variable Name:** ILP05_29
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TILADE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1226 **SAS Variable Name:** ILP06_29
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TILADE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1227-1229 **SAS Variable Name:** ILP08_29
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TILADE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1230-1231 **SAS Variable Name:** ILP10_29
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TORNALATE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1232 **SAS Variable Name:** ILP03_30
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TORNALATE: WHEN ATTACK

Survey: CHILD Asthma Call-Back

Type: NUM

Column: 1233

SAS Variable Name: ILP04_30

Prologue:

Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TORNALATE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back

Type: NUM

Column: 1234

SAS Variable Name: ILP05_30

Prologue:

Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TORNALATE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back

Type: NUM

Column: 1235

SAS Variable Name: ILP06_30

Prologue:

Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TORNALATE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back

Type: NUM

Column: 1236-1238

SAS Variable Name: ILP08_30

Prologue:

Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TORNALATE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back

Type: NUM

Column: 1239-1240

SAS Variable Name: ILP10_30

Prologue:

Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TRIAMCINOLONE ACETONIDE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back

Type: NUM

Column: 1241

SAS Variable Name: ILP03_31

Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.

Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TRIAMCINOLONE ACETONIDE: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1242 **SAS Variable Name:** ILP04_31
Prologue:
Description: Q8.14 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TRIAMCINOLONE ACETONIDE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1243 **SAS Variable Name:** ILP05_31
Prologue:
Description: Q8.15 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TRIAMCINOLONE ACETONIDE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1244 **SAS Variable Name:** ILP06_31
Prologue:
Description: Q8.16 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TRIAMCINOLONE ACETONIDE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1245-1247 **SAS Variable Name:** ILP08_31
Prologue:
Description: Q8.18 How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TRIAMCINOLONE ACETONIDE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1248-1249 **SAS Variable Name:** ILP10_31
Prologue:
Description: Q8.19 How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

VANCERIL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1250 **SAS Variable Name:** ILP03_32
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13 Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

VANCERIL: WHEN ATTACK

Survey: CHILD Asthma Call-Back
Column: 1251

Type: NUM
SAS Variable Name: ILP04_32

Prologue:

Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

VANCERIL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Column: 1252

Type: NUM
SAS Variable Name: ILP05_32

Prologue:

Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	Didn't exercise in past 3 months	1	100.00	100.00
BLANK	Skip filled	1,099		

VANCERIL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1253

Type: NUM
SAS Variable Name: ILP06_32

Prologue:

Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

VANCERIL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1254-1256

Type: NUM
SAS Variable Name: ILP08_32

Prologue:

Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	1	100.00	100.00
BLANK	Skip filled	1,099		

VANCERIL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 1257-1258

Type: NUM
SAS Variable Name: ILP10_32

Prologue:

Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

VENTOLIN: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1259
SAS Variable Name: ILP03_33
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	43	52.44	58.68
2	No	37	45.12	41.18
7	Don´t know	2	2.44	0.14
BLANK	Skip filled	1,018		

VENTOLIN: WHEN ATTACK

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1260
SAS Variable Name: ILP04_33
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	66	80.49	87.25
2	No	10	12.20	7.89
3	No attack in past 3 months	6	7.32	4.86
BLANK	Skip filled	1,018		

VENTOLIN: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1261
SAS Variable Name: ILP05_33
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	43	52.44	59.05
2	No	37	45.12	39.81
7	Don´t know	2	2.44	1.13
BLANK	Skip filled	1,018		

VENTOLIN: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1262
SAS Variable Name: ILP06_33
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	21	25.61	23.97
2	No	60	73.17	75.79
7	Don´t know	1	1.22	0.24
BLANK	Skip filled	1,018		

VENTOLIN: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1263-1265   **SAS Variable Name:** ILP08_33
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	28	34.15	33.90
401 – 499	Weeks	30	36.59	42.65
555	Never	3	3.66	6.66
666	Less often than once a week	17	20.73	14.57
777	Don´t know/Not sure	4	4.88	2.21
BLANK	Skip filled	1,018		

VENTOLIN: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1266-1267   **SAS Variable Name:** ILP10_33
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 canisters	59	71.95	82.46
77	Don´t know	2	2.44	0.95
88	None	21	25.61	16.58
BLANK	Skip filled	1,018		

FORADIL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1268   **SAS Variable Name:** ILP03_34
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FORADIL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1269   **SAS Variable Name:** ILP04_34
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FORADIL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1270   **SAS Variable Name:** ILP05_34
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FORADIL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1271 **SAS Variable Name:** ILP06_34
Prologue:
Description: Q8.16 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FORADIL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1272-1274 **SAS Variable Name:** ILP08_34
Prologue:
Description: Q8.18 How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FORADIL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1275-1276 **SAS Variable Name:** ILP10_34
Prologue:
Description: Q8.19 How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FORMOTEROL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1277 **SAS Variable Name:** ILP03_35
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13 Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FORMOTEROL: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1278 **SAS Variable Name:** ILP04_35
Prologue:
Description: Q8.14 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FORMOTEROL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1279 **SAS Variable Name:** ILP05_35
Prologue:
Description: Q8.15 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FORMOTEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1280   **SAS Variable Name:** ILP06_35
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FORMOTEROL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1281-1283   **SAS Variable Name:** ILP08_35
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

FORMOTEROL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1284-1285   **SAS Variable Name:** ILP10_35
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

QVAR: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1286   **SAS Variable Name:** ILP03_36
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	7	36.84	37.75
2	No	12	63.16	62.25
BLANK	Skip filled	1,081		

QVAR: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1287   **SAS Variable Name:** ILP04_36
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	12	63.16	57.22
2	No	6	31.58	31.58
3	No attack in past 3 months	1	5.26	11.20
BLANK	Skip filled	1,081		

QVAR: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back — **Type:** NUM
Column: 1288 — **SAS Variable Name:** ILP05_36
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	6	31.58	20.89
2	No	13	68.42	79.11
BLANK	Skip filled	1,081		

QVAR: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back — **Type:** NUM
Column: 1289 — **SAS Variable Name:** ILP06_36
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	15	78.95	73.79
2	No	4	21.05	26.21
BLANK	Skip filled	1,081		

QVAR: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back — **Type:** NUM
Column: 1290-1292 — **SAS Variable Name:** ILP08_36
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	15	78.95	70.65
401 – 499	Weeks	3	15.79	25.18
666	Less often than once a week	1	5.26	4.16
BLANK	Skip filled	1,081		

QVAR: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back — **Type:** NUM
Column: 1293-1294 — **SAS Variable Name:** ILP10_36
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

LEVALBUTEROL TARTRATE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back — **Type:** NUM
Column: 1295 — **SAS Variable Name:** ILP03_37
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

LEVALBUTEROL TARTRATE: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1296   **SAS Variable Name:** ILP04_37
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

LEVALBUTEROL TARTRATE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1297   **SAS Variable Name:** ILP05_37
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

LEVALBUTEROL TARTRATE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1298   **SAS Variable Name:** ILP06_37
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

LEVALBUTEROL TARTRATE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1299-1301   **SAS Variable Name:** ILP08_37
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

LEVALBUTEROL TARTRATE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1302-1303   **SAS Variable Name:** ILP10_37
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

XOPENEX HFA: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1304   **SAS Variable Name:** ILP03_38
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13 Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	14	73.68	82.56
2	No	5	26.32	17.44
BLANK	Skip filled	1,081		

XOPENEX HFA: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1305   **SAS Variable Name:** ILP04_38
Prologue:
Description: Q8.14 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	15	78.95	90.56
2	No	2	10.53	9.05
3	No attack in past 3 months	2	10.53	0.38
BLANK	Skip filled	1,081		

XOPENEX HFA: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1306   **SAS Variable Name:** ILP05_38
Prologue:
Description: Q8.15 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	14	73.68	95.90
2	No	5	26.32	4.10
BLANK	Skip filled	1,081		

XOPENEX HFA: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1307   **SAS Variable Name:** ILP06_38
Prologue:
Description: Q8.16 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	21.05	65.68
2	No	15	78.95	34.32
BLANK	Skip filled	1,081		

XOPENEX HFA: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1308-1310   **SAS Variable Name:** ILP08_38
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	5	26.32	49.84
401 – 499	Weeks	6	31.58	28.72
555	Never	2	10.53	17.11
666	Less often than once a week	6	31.58	4.33
BLANK	Skip filled	1,081		

XOPENEX HFA: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1311-1312   **SAS Variable Name:** ILP10_38
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 canisters	8	42.11	50.60
77	Don´t know	1	5.26	44.26
88	None	10	52.63	5.14
BLANK	Skip filled	1,081		

MOMETASONE FUROATE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1313   **SAS Variable Name:** ILP03_39
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

MOMETASONE FUROATE: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1314   **SAS Variable Name:** ILP04_39
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	No attack in past 3 months	1	100.00	100.00
BLANK	Skip filled	1,099		

MOMETASONE FUROATE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1315   **SAS Variable Name:** ILP05_39
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

MOMETASONE FUROATE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1316   **SAS Variable Name:** ILP06_39
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

MOMETASONE FUROATE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1317-1319   **SAS Variable Name:** ILP08_39
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	1	100.00	100.00
BLANK	Skip filled	1,099		

MOMETASONE FUROATE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1320-1321   **SAS Variable Name:** ILP10_39
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ASMANEX (TWISTHALER): WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1322   **SAS Variable Name:** ILP03_40
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ASMANEX (TWISTHALER): WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1323   **SAS Variable Name:** ILP04_40
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	18.18	57.81
2	No	8	72.73	42.09
3	No attack in past 3 months	1	9.09	0.10
BLANK	Skip filled	1,089		

ASMANEX (TWISTHALER): BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1324   **SAS Variable Name:** ILP05_40
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	27.27	26.23
2	No	8	72.73	73.77
BLANK	Skip filled	1,089		

ASMANEX (TWISTHALER): REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1325   **SAS Variable Name:** ILP06_40
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	10	90.91	99.85
2	No	1	9.09	0.15
BLANK	Skip filled	1,089		

ASMANEX (TWISTHALER): TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1326-1328   **SAS Variable Name:** ILP08_40
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	9	81.82	82.14
401 – 499	Weeks	2	18.18	17.86
BLANK	Skip filled	1,089		

ASMANEX (TWISTHALER): NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1329-1330   **SAS Variable Name:** ILP10_40
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PRO-AIR HFA: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1331   **SAS Variable Name:** ILP03_41
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	35	41.18	47.07
2	No	48	56.47	50.84
7	Don´t know	2	2.35	2.10
BLANK	Skip filled	1,015		

PRO-AIR HFA: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1332 **SAS Variable Name:** ILP04_41
Prologue:
Description: Q8.14 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	70	82.35	88.95
2	No	10	11.76	4.12
3	No attack in past 3 months	5	5.88	6.93
BLANK	Skip filled	1,015		

PRO-AIR HFA: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1333 **SAS Variable Name:** ILP05_41
Prologue:
Description: Q8.15 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	44	51.76	44.85
2	No	40	47.06	53.92
7	Don´t know	1	1.18	1.23
BLANK	Skip filled	1,015		

PRO-AIR HFA: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1334 **SAS Variable Name:** ILP06_41
Prologue:
Description: Q8.16 In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	15	17.65	20.41
2	No	70	82.35	79.59
BLANK	Skip filled	1,015		

PRO-AIR HFA: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1335-1337 **SAS Variable Name:** ILP08_41
Prologue:
Description: Q8.18 How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	19	22.35	14.48
401 – 499	Weeks	34	40.00	47.43
555	Never	4	4.71	4.60
666	Less often than once a week	27	31.76	32.98
777	Don´t know/Not sure	1	1.18	0.51
BLANK	Skip filled	1,015		

PRO-AIR HFA: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back		**Type:** NUM	
Column: 1338-1339		**SAS Variable Name:** ILP10_41	

Prologue:

Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 76	01-76 canisters	62	72.94	85.00
77	Don´t know	4	4.71	1.03
88	None	19	22.35	13.98
BLANK	Skip filled	1,015		

SYMBICORT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back		**Type:** NUM	
Column: 1340		**SAS Variable Name:** ILP03_42	

Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.

Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

SYMBICORT: WHEN ATTACK

Survey: CHILD Asthma Call-Back		**Type:** NUM	
Column: 1341		**SAS Variable Name:** ILP04_42	

Prologue:

Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	5	33.33	25.04
2	No	10	66.67	74.96
BLANK	Skip filled	1,085		

SYMBICORT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back		**Type:** NUM	
Column: 1342		**SAS Variable Name:** ILP05_42	

Prologue:

Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	26.67	13.26
2	No	11	73.33	86.74
BLANK	Skip filled	1,085		

SYMBICORT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back		**Type:** NUM	
Column: 1343		**SAS Variable Name:** ILP06_42	

Prologue:

Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	12	80.00	89.05
2	No	3	20.00	10.95
BLANK	Skip filled	1,085		

SYMBICORT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1344-1346 **SAS Variable Name:** ILP08_42
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	11	73.33	43.09
401 – 499	Weeks	2	13.33	51.37
666	Less often than once a week	2	13.33	5.55
BLANK	Skip filled	1,085		

SYMBICORT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1347-1348 **SAS Variable Name:** ILP10_42
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL ACCOLATE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1349 **SAS Variable Name:** PILL01_1
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL AEROLATE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1350 **SAS Variable Name:** PILL01_2
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL ALBUTEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1351 **SAS Variable Name:** PILL01_3
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

PILL ALUPENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1352   **SAS Variable Name:** PILL01_4
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL CHOLEDYL (OXTRIPHYLLINE): REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1353   **SAS Variable Name:** PILL01_5
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL DELTASONE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1354   **SAS Variable Name:** PILL01_7
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL ELIXOPHYLLIN: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1355   **SAS Variable Name:** PILL01_8
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL MEDROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1356   **SAS Variable Name:** PILL01_11
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

PILL METAPREL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1357   **SAS Variable Name:** PILL01_12
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL METAPROTERONOL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1358   **SAS Variable Name:** PILL01_13
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL METHYLPREDNISOLONE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1359   **SAS Variable Name:** PILL01_14
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL MONTELUKAST: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1360   **SAS Variable Name:** PILL01_15
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	100.00	100.00
BLANK	Skip filled	1,098		

PILL PEDIAPRED: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1361   **SAS Variable Name:** PILL01_17
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL PREDNISOLONE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1362   **SAS Variable Name:** PILL01_18
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL PREDNISONE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1363   **SAS Variable Name:** PILL01_19
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	33.33	10.88
2	No	8	66.67	89.12
BLANK	Skip filled	1,088		

PILL PROVENTIL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1364   **SAS Variable Name:** PILL01_21
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL RESPID: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1365   **SAS Variable Name:** PILL01_23
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL SINGULAIR: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1366   **SAS Variable Name:** PILL01_24
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	121	95.28	98.62
2	No	6	4.72	1.38
BLANK	Skip filled	973		

PILL SLO-PHYLLIN: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1367   **SAS Variable Name:** PILL01_25
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL SLO-BID: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1368   **SAS Variable Name:** PILL01_26
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL THEO-24: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1369   **SAS Variable Name:** PILL01_28
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL THEOCHRON: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1370   **SAS Variable Name:** PILL01_30
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL THEOCLEAR: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1371   **SAS Variable Name:** PILL01_31
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL THEODUR: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1372   **SAS Variable Name:** PILL01_32
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL THEO-DUR: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1373   **SAS Variable Name:** PILL01_33
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL THEOPHYLLINE: REGULAR SCHEDULE
Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1374
SAS Variable Name: PILL01_35
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL THEOSPAN: REGULAR SCHEDULE
Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1375
SAS Variable Name: PILL01_37
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL T-PHYL: REGULAR SCHEDULE
Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1376
SAS Variable Name: PILL01_40
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL UNIPHYL: REGULAR SCHEDULE
Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1377
SAS Variable Name: PILL01_42
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL VENTOLIN: REGULAR SCHEDULE
Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1378
SAS Variable Name: PILL01_43
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL VOLMAX: REGULAR SCHEDULE
Survey: CHILD Asthma Call-Back
Type: NUM
Column: 1379
SAS Variable Name: PILL01_44
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL ZAFIRLUKAST: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1380   **SAS Variable Name:** PILL01_45
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL ZILEUTON: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1381   **SAS Variable Name:** PILL01_46
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL ZYFLO FILMTAB: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1382   **SAS Variable Name:** PILL01_47
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL TERBUTALINE (+ T. SULFATE): REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1383   **SAS Variable Name:** PILL01_48
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PILL BRETHINE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1384   **SAS Variable Name:** PILL01_49
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ALBUTEROL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1385   **SAS Variable Name:** NEB01_1
Prologue:
Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	147	84.97	85.15
2	No	17	9.83	10.69
3	No attack in past 3 months	9	5.20	4.15
BLANK	Skip filled	927		

ALBUTEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1386   **SAS Variable Name:** NEB02_1
Prologue:
Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	58	33.53	47.99
2	No	115	66.47	52.01
BLANK	Skip filled	927		

ALBUTEROL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1387   **SAS Variable Name:** NEB03_1
Prologue:
Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	62	35.84	44.97
401 – 499	Weeks	36	20.81	19.48
555	Never	3	1.73	0.40
666	Less often than once a week	65	37.57	33.62
777	Don´t know/Not sure	7	4.05	1.53
BLANK	Skip filled	927		

ALUPENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1388   **SAS Variable Name:** NEB01_2
Prologue:
Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ALUPENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1389   **SAS Variable Name:** NEB02_2
Prologue:
Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ALUPENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1390   **SAS Variable Name:** NEB03_2

Prologue:

Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

ATROVENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1391   **SAS Variable Name:** NEB01_3

Prologue:

Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	66.67	83.31
2	No	2	33.33	16.69
BLANK	Skip filled	1,094		

ATROVENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1392   **SAS Variable Name:** NEB02_3

Prologue:

Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	16.67	15.02
2	No	5	83.33	84.98
BLANK	Skip filled	1,094		

ATROVENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1393   **SAS Variable Name:** NEB03_3

Prologue:

Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	1	16.67	15.02
401 – 499	Weeks	1	16.67	68.91
666	Less often than once a week	4	66.67	16.07
BLANK	Skip filled	1,094		

BITOLTEROL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1394   **SAS Variable Name:** NEB01_4

Prologue:

Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BITOLTEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1395 **SAS Variable Name:** NEB02_4
Prologue:
Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BITOLTEROL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1396 **SAS Variable Name:** NEB03_4
Prologue:
Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

BUDESONIDE: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1397 **SAS Variable Name:** NEB01_5
Prologue:
Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	17	89.47	87.12
2	No	1	5.26	2.72
3	No attack in past 3 months	1	5.26	10.16
BLANK	Skip filled	1,081		

BUDESONIDE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1398 **SAS Variable Name:** NEB02_5
Prologue:
Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	13	68.42	64.47
2	No	6	31.58	35.53
BLANK	Skip filled	1,081		

BUDESONIDE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1399 **SAS Variable Name:** NEB03_5
Prologue:
Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	12	63.16	59.85
401 – 499	Weeks	1	5.26	4.63
666	Less often than once a week	6	31.58	35.53
BLANK	Skip filled	1,081		

CROMOLYN: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1400   **SAS Variable Name:** NEB01_6

Prologue:

Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,099		

CROMOLYN: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1401   **SAS Variable Name:** NEB02_6

Prologue:

Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,099		

CROMOLYN: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1402   **SAS Variable Name:** NEB03_6

Prologue:

Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
666	Less often than once a week	1	100.00	100.00
BLANK	Skip filled	1,099		

DUONEB: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1403   **SAS Variable Name:** NEB01_7

Prologue:

Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	100.00	100.00
BLANK	Skip filled	1,098		

DUONEB: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1404   **SAS Variable Name:** NEB02_7

Prologue:

Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2	100.00	100.00
BLANK	Skip filled	1,098		

DUONEB: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1405   **SAS Variable Name:** NEB03_7

Prologue:

Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
401 – 499	Weeks	1	50.00	87.97
666	Less often than once a week	1	50.00	12.03
BLANK	Skip filled	1,098		

INTAL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1406   **SAS Variable Name:** NEB01_8

Prologue:

Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

INTAL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1407   **SAS Variable Name:** NEB02_8

Prologue:

Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

INTAL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1408   **SAS Variable Name:** NEB03_8

Prologue:

Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

IPRATROPRIUM BROMIDE: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1409   **SAS Variable Name:** NEB01_9

Prologue:

Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	100.00	100.00
BLANK	Skip filled	1,097		

IPRATROPRIUM BROMIDE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1410   **SAS Variable Name:** NEB02_9
Prologue:
Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	66.67	91.50
2	No	1	33.33	8.50
BLANK	Skip filled	1,097		

IPRATROPRIUM BROMIDE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1411   **SAS Variable Name:** NEB03_9
Prologue:
Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	2	66.67	91.50
401 – 499	Weeks	1	33.33	8.50
BLANK	Skip filled	1,097		

LEVALBUTEROL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1412   **SAS Variable Name:** NEB01_10
Prologue:
Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

LEVALBUTEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1413   **SAS Variable Name:** NEB02_10
Prologue:
Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

LEVALBUTEROL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1414   **SAS Variable Name:** NEB03_10
Prologue:
Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

METAPROTERONOL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1415   **SAS Variable Name:** NEB01_11

Prologue:

Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

METAPROTERONOL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1416   **SAS Variable Name:** NEB02_11

Prologue:

Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

METAPROTERONOL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1417   **SAS Variable Name:** NEB03_11

Prologue:

Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PROVENTIL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1418   **SAS Variable Name:** NEB01_12

Prologue:

Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PROVENTIL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1419   **SAS Variable Name:** NEB02_12

Prologue:

Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PROVENTIL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM

Column: 1420   **SAS Variable Name:** NEB03_12

Prologue:

Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

PULMICORT: WHEN ATTACK
      Survey: CHILD Asthma Call-Back   **Type:** NUM
      Column: 1421   **SAS Variable Name:** NEB01_13
      Prologue:
Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	18	66.67	85.74
2	No	9	33.33	14.26
BLANK	Skip filled	1,073		

PULMICORT: REGULAR SCHEDULE
      Survey: CHILD Asthma Call-Back   **Type:** NUM
      Column: 1422   **SAS Variable Name:** NEB02_13
      Prologue:
Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	18	66.67	79.21
2	No	9	33.33	20.79
BLANK	Skip filled	1,073		

PULMICORT: TIMES PER DAY/WEEK
      Survey: CHILD Asthma Call-Back   **Type:** NUM
      Column: 1423   **SAS Variable Name:** NEB03_13
      Prologue:
Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	18	66.67	89.10
401 – 499	Weeks	5	18.52	5.82
555	Never	1	3.70	0.19
666	Less often than once a week	2	7.41	4.52
777	Don´t know/Not sure	1	3.70	0.38
BLANK	Skip filled	1,073		

TORNALATE: WHEN ATTACK
      Survey: CHILD Asthma Call-Back   **Type:** NUM
      Column: 1424   **SAS Variable Name:** NEB01_14
      Prologue:
Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TORNALATE: REGULAR SCHEDULE
      Survey: CHILD Asthma Call-Back   **Type:** NUM
      Column: 1425   **SAS Variable Name:** NEB02_14
      Prologue:
Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

TORNALATE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1426   **SAS Variable Name:** NEB03_14
Prologue:
Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,100		

VENTOLIN: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1427   **SAS Variable Name:** NEB01_15
Prologue:
Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	66.67	91.58
3	No attack in past 3 months	1	33.33	8.42
BLANK	Skip filled	1,097		

VENTOLIN: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1428   **SAS Variable Name:** NEB02_15
Prologue:
Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	33.33	83.04
2	No	2	66.67	16.96
BLANK	Skip filled	1,097		

VENTOLIN: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1429   **SAS Variable Name:** NEB03_15
Prologue:
Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	1	33.33	83.04
666	Less often than once a week	2	66.67	16.96
BLANK	Skip filled	1,097		

XOPENEX: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1430   **SAS Variable Name:** NEB01_16
Prologue:
Description: Q8.28   In the past 3 months, did child's name take [MEDICINE FROM NEB_ID SERIES] when   he/she had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	20	100.00	100.00
BLANK	Skip filled	1,080		

XOPENEX: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1431   **SAS Variable Name:** NEB02_16
Prologue:
Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	10.00	4.50
2	No	18	90.00	95.50
BLANK	Skip filled	1,080		

XOPENEX: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1432   **SAS Variable Name:** NEB03_16
Prologue:
Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	2	10.00	4.50
401 – 499	Weeks	3	15.00	35.03
666	Less often than once a week	13	65.00	58.36
777	Don´t know/Not sure	2	10.00	2.11
BLANK	Skip filled	1,080		

INTERIM CHILD ASTHMA CALL-BACK WEIGHT

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1433-1442   **SAS Variable Name:** CWEIGHT_IN
Prologue:
Description: INTERIM CHILD ASTHMA CALL-BACK WEIGHT

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN	Interim child asthma call-back weight	1,100	100.00	100.00

CHILD ASTHMA CALL-BACK POST STRATIFICATION FACTOR

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1443-1452   **SAS Variable Name:** CPOST
Prologue:
Description: CHILD ASTHMA CALL-BACK POST STRATIFICATION FACTOR

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN	Child asthma call-back post stratification factor	1,100	100.00	100.00

REGIONS COLLAPSED TO 1 REGION FOR ASTHMA CALL-BACK.

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1453   **SAS Variable Name:** REGION_F
Prologue:
Description: REGIONS COLLAPSED TO 1 REGION FOR ASTHMA CALL-BACK.

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No region collapsed	1,100		

CHILD RACE GROUP FOR ASTHMA CALL-BACK POST-STRATIFICATION

Survey: CHILD Asthma Call-Back
Column: 1454
Prologue:
Description: CHILD RACE GROUP FOR ASTHMA CALL-BACK POST-STRATIFICATION

Type: NUM
SAS Variable Name: CRACEG_F

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Races are collapsed to 1 group	1,100	100.00	100.00

IMPUTED CHILD AGE FOR ASTHMA CALL-BACK

Survey: CHILD Asthma Call-Back
Column: 1455-1457
Prologue:
Description: IMPUTED CHILD AGE FOR ASTHMA CALL-BACK

Type: NUM
SAS Variable Name: _CIMPAGE

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN	Child age in years, combined, imputed and reported	1,100	100.00	100.00

FINAL LAND LINE AND CELL PHONE COMBINED CHILD ASTHMA CALL-BACK WEIGHT

Survey: CHILD Asthma Call-Back
Column: 1458-1467
Prologue:
Description: FINAL LAND LINE AND CELL PHONE COMBINED CHILD ASTHMA CALL-BACK WEIGHT

Type: NUM
SAS Variable Name: CLLCPWT_F

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN	Final land line and cell phone combined child asthma call-back weight	1,100	100.00	100.00

CHILD ASTHMA CALL-BACK AGE GROUPS

Survey: CHILD Asthma Call-Back
Column: 1468
Prologue:
Description: CHILD ASTHMA CALL-BACK AGE GROUPS

Type: NUM
SAS Variable Name: CAGEG_F4

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Age 0 - 4	76	7.77	9.81
2	Age 5 - 9	213	21.78	30.79
3	Age 10 - 14	386	39.47	35.41
4	Age 15 - 17	303	30.98	23.99
BLANK	Missing	122		

CHILD ASTHMA CALL-BACK AGE GROUPS

Survey: CHILD Asthma Call-Back
Column: 1469
Prologue:
Description: CHILD ASTHMA CALL-BACK AGE GROUPS

Type: NUM
SAS Variable Name: CAGEG_F3

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Age 0 - 6	101	9.18	11.17
2	Age 7 - 12	244	22.18	32.66
3	age 13 - 17	755	68.64	56.17

CHILD ASTHMA CALL-BACK AGE GROUPS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1470   **SAS Variable Name:** CAGEG_F2
Prologue:
Description: CHILD ASTHMA CALL-BACK AGE GROUPS

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Age 0 - 9	152	35.68	44.56
2	Age 10 - 17	274	64.32	55.44
BLANK	Missing	674		

CHILD ASTHMA CALL-BACK AGE GROUPS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1471   **SAS Variable Name:** CAGEG_F1
Prologue:
Description: CHILD ASTHMA CALL-BACK AGE GROUPS

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Missing	1,100		

CHILD ASTHMA CALL-BACK ADJUST FACTOR

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1472-1479   **SAS Variable Name:** CADJUST
Prologue:
Description: CHILD ASTHMA CALL-BACK ADJUST FACTOR

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN	Child asthma call-back post stratification adjust factor	1,100	100.00	100.00

ACTIVE ASTHMA STATUS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1480   **SAS Variable Name:** ACTASTH
Prologue:
Description: Active Asthma Status

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Active Asthma	823	74.82	81.58
2	Inactive Asthma	277	25.18	18.42