United States

2012 Land Line Only Codebook Report

CHILD Asthma Call-Back Survey

March 11, 2014
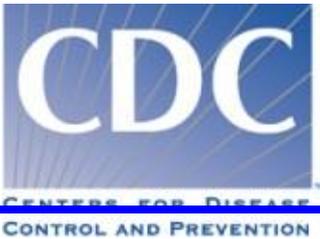
STATE FIPS CODE

    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
9	Connecticut	81	7.32	6.83
20	Kansas	98	8.86	4.04
21	Kentucky	121	10.94	7.71
24	Maryland	98	8.86	10.69
26	Michigan	115	10.40	13.99
31	Nebraska	141	12.75	2.33
34	New Jersey	133	12.03	12.38
39	Ohio	81	7.32	14.84
42	Pennsylvania	158	14.29	18.94
53	Washington	80	7.23	8.26

MONTH NAME OF SOURCE FILE ASTHMA CALL-BACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 3-4   **SAS Variable Name:** FMONTH_F
Prologue:
Description: FILE MONTH

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	January	116	10.49	11.49
2	February	109	9.86	9.08
3	March	83	7.50	6.21
4	April	100	9.04	9.61
5	May	83	7.50	7.01
6	June	102	9.22	8.64
7	July	117	10.58	11.73
8	August	87	7.87	8.13
9	September	63	5.70	4.76
10	October	116	10.49	9.83
11	November	72	6.51	6.33
12	December	58	5.24	7.17

MONTH OF ASTHMA CALL-BACK INTERVIEW

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 13-14   **SAS Variable Name:** IMONTH_F
Prologue:
Description: MONTH OF ASTHMA CALL-BACK INTERVIEW

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	January	45	4.07	4.87
2	February	86	7.78	8.71
3	March	109	9.86	11.44
4	April	125	11.30	9.73
5	May	117	10.58	9.61
6	June	110	9.95	9.16
7	July	97	8.77	9.15
8	August	83	7.50	7.23
9	September	81	7.32	7.57
10	October	83	7.50	7.22
11	November	93	8.41	7.72
12	December	77	6.96	7.59

DAY OF ASTHMA CALL-BACK INTERVIEW

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 15-16   **SAS Variable Name:** IDAY_F
Prologue:
Description: DAY OF ASTHMA CALL-BACK INTERVIEW

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN		1,106	100.00	100.00

YEAR OF ASTHMA CALL-BACK INTERVIEW

Survey: CHILD Asthma Call-Back
Column: 17-20
Prologue:
Description: YEAR OF ASTHMA CALL-BACK INTERVIEW

Type: NUM
SAS Variable Name: IYEAR_F

Value	Value Label	Frequency	Percentage	Weighted Percentage
2012	Interview year	1,071	96.84	95.62
2013	Interview year	35	3.16	4.38

INTERVIEWER ID OF ASTHMA CALL-BACK

Survey: CHILD Asthma Call-Back
Column: 21-23
Prologue:
Description: INTERVIEWER ID OF ASTHMA CALL-BACK

Type: NUM
SAS Variable Name: INTVID_F

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN		1,106	100.00	100.00

DISPOSITION OF ASTHMA CALL-BACK

Survey: CHILD Asthma Call-Back
Column: 24-26
Prologue:
Description: DISPOSITION OF ASTHMA CALL-BACK

Type: NUM
SAS Variable Name: DISPCODE_F

Value	Value Label	Frequency	Percentage	Weighted Percentage
1100	Complete	1,105	99.91	99.82
1200	Partial complete	1	0.09	0.18

ANNUAL SEQUENCE NUMBER

Survey: CHILD Asthma Call-Back
Column: 27-36
Prologue:
Description: ANNUAL SEQUENCE NUMBER

Type: NUM
SAS Variable Name: SEQNO

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN		1,106	100.00	100.00

NUMBER OF ATTEMPTS OF ASTHMA CALL-BACK

Survey: CHILD Asthma Call-Back
Column: 37-38
Prologue:
Description: NUMBER OF ATTEMPTS OF ASTHMA CALL-BACK

Type: NUM
SAS Variable Name: NATTMPTS_F

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN		1,106	100.00	100.00

PERMIT TO CALL BACK FROM BRFSS

Survey: CHILD Asthma Call-Back
Column: 39
Prologue:
Description: PERMIT TO CALL BACK FROM BRFSS

Type: NUM
SAS Variable Name: CALLBACK

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,106	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	1,067	96.47	97.42
2	No	39	3.53	2.58

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	39	100.00	100.00
BLANK	Not asked or missing	1,067		

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	3	10.34	3.06
2	Alternate respondent is the MKP and will continue	26	89.66	96.94
BLANK	Not asked or missing	1,077		

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	61	100.00	100.00
BLANK	Not asked or missing	1,045		

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	61	100.00	100.00
BLANK	Not asked or missing	1,045		

STILL HAVE ASTHMA INCONSISTENT WITH BRFSS

Survey: CHILD Asthma Call-Back
Column: 45

Type: NUM
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	31	50.82	50.21
2	No	26	42.62	41.04
7	Don´t know/Not sure	4	6.56	8.75
BLANK	Not asked or missing	1,045		

RELATIONSHIP TO CHILD FROM QUESTION

Survey: CHILD Asthma Call-Back
Column: 46

Type: NUM
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)	299	73.65	71.81
2	Father (Birth/Adoptive/Step)	93	22.91	25.01
4	Grandparent (Father/Mother)	5	1.23	0.97
5	Other relative	1	0.25	0.12
6	Unrelated	8	1.97	2.09
BLANK	Not asked or missing	700		

LEGAL GUARDIAN

Survey: CHILD Asthma Call-Back
Column: 47

Type: NUM
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	14	100.00	100.00
BLANK	Not asked or missing	1,092		

PERMISSION TO COMBINE THE ANSWER WITH BRFSS

Survey: CHILD Asthma Call-Back
Column: 48

Type: NUM
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	729	65.91	75.97
7	Don´t know/Not sure	377	34.09	24.03

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	936	84.63	82.03
777	Don´t know	23	2.08	2.12
888	Less than 1 year old	146	13.20	15.82
999	Refused	1	0.09	0.03

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	55	4.97	6.12
2	One to five years ago	357	32.28	36.59
3	More than 5 years ago	693	62.66	57.11
7	Don't know	1	0.09	0.17

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	752	67.99	70.52
5	One year to less than 3 years ago	177	16.00	15.51
6	Three years to five years ago	70	6.33	5.81
7	More than five years ago	96	8.68	7.43
77	Don´t know	5	0.45	0.28
88	Never	6	0.54	0.46

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	241	21.79	19.74
2	1-6 days ago	96	8.68	8.86
3	1 week to less than 3 months ago	199	17.99	19.52
4	3 months to less than 1 year ago	176	15.91	15.89
5	1 year to less than 3 years ago	151	13.65	15.80
6	3 years to 5 years ago	106	9.58	8.98
7	More than 5 years ago	115	10.40	9.30
77	Don´t know	5	0.45	0.28
88	Never	17	1.54	1.64

LAST HAD ANY SYMPTOMS OF ASTHMA

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

Column: 57-58   **SAS Variable Name:** LASTSYMP

Prologue:

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	72	6.51	5.22
2	1-6 days ago	97	8.77	7.50
3	1 week to less than 3 months ago	289	26.13	27.12
4	3 months to less than 1 year ago	233	21.07	22.09
5	1 year to less than 3 years ago	151	13.65	13.77
6	3 years to 5 years ago	115	10.40	10.78
7	More than 5 years ago	123	11.12	9.56
77	Don´t know	17	1.54	1.40
88	Never	9	0.81	2.55

SYMPTOM DAYS

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

Column: 59-61   **SAS Variable Name:** SYMP_30D

Prologue:

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	328	29.66	27.76
30	Every day	27	2.44	1.90
66	No symptoms past one year, skip filled	398	35.99	36.67
77	Don't know	10	0.90	1.36
88	No symptoms in the past 30 days	109	9.86	10.20
99	Refused	1	0.09	0.02
100	Symptoms 3 months to 1 year ago, skip filled	233	21.07	22.09

CONSTANT SYMPTOMS

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

Column: 62-63   **SAS Variable Name:** DUR_30D

Prologue:

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	10	0.90	0.66
2	No	16	1.45	1.22
6	Last symptoms one+ years ago, skip filled	398	35.99	36.67
7	Don't know	1	0.09	0.02
10	Last symptoms 3 months - 1 year ago, skip filled	233	21.07	22.09
11	No symptoms 'SYMP_30D' skip filled	109	9.86	10.20
12	1-29 'SYMP_30D' skip filled	328	29.66	27.76
77	Don't know 'SYMP_30D' skip filled	10	0.90	1.36
99	Refused 'SYMP_30D' skip filled	1	0.09	0.02

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	151	13.65	13.12
66	No symptoms past one year, skip filled	398	35.99	36.67
77	Don't know	12	1.08	0.99
88	None	203	18.35	16.93
100	Symptoms 3 months to 1 year ago, skip filled	233	21.07	22.09
111	No symptoms in the past 30 days, skip filled	109	9.86	10.20

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	1,024	92.59	93.29
77	Don´t know	12	1.08	0.83
88	None	70	6.33	5.89

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	412	37.25	37.52
2	No	293	26.49	25.50
6	No symptoms past 1 year, skip filled	398	35.99	36.67
7	Don't know	3	0.27	0.31

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	25.05	25.02
666	No symptoms past 1 year, skip filled	398	35.99	36.67
777	Don't know	7	0.63	0.44
888	None	128	11.57	12.05
1111	No episode/asthma attack past year, skip filled	296	26.76	25.81

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	174	15.73	14.36
201 – 299	Hours	73	6.60	7.67
301 – 399	Days	106	9.58	10.24
401 – 499	Weeks	39	3.53	3.56
555	Never	1	0.09	0.01
666	No symptoms past 1 year, skip filled	398	35.99	36.67
777	Don't know	19	1.72	1.67
1111	No episode/asthma attack past year, skip filled	296	26.76	25.81

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	112	10.13	10.25
2	Longer	37	3.35	3.20
3	About the same	257	23.24	23.76
4	The most recent attack was actually the first attack	3	0.27	0.26
6	No symptoms past year, skip filled	398	35.99	36.67
7	Don't know	3	0.27	0.06
11	No episode/asthma attack past year, skip filled	296	26.76	25.81

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	1,075	97.20	97.25
2	No	31	2.80	2.75

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	731	66.09	64.93
2	Medicaid/Medicare	189	17.09	18.85
3	CHIP replace with state specific name	78	7.05	6.86
4	Other	69	6.24	6.11
5	No insurance at time of interview, skip filled	31	2.80	2.75
7	Don't know	2	0.18	0.13
9	Refused	6	0.54	0.38

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	45	4.07	3.34
2	No	1,029	93.04	93.89
5	No insurance at time of interview, skip filled	31	2.80	2.75
7	Don't know	1	0.09	0.01

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	568	51.36	55.90
2	No	515	46.56	41.84
7	Don't know/Not sure	23	2.08	2.26

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	93	8.41	8.75
2	No	1,000	90.42	90.38
7	Don't know/Not sure	13	1.18	0.87

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	577	52.17	53.00
2	A little	198	17.90	17.42
3	A moderate amount	71	6.42	6.37
4	A lot	27	2.44	3.06
5	No current asthma, nothing happened past year, skip filled	229	20.71	20.03
7	Don't know	4	0.36	0.13

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	585	52.89	55.12
555	No current asthma, nothing happened past year, skip filled	229	20.71	20.03
666	No MD visit past year, skip filled	122	11.03	9.21
777	Don't know	7	0.63	0.63
888	None	163	14.74	15.01

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	122	11.03	13.05
2	No	631	57.05	57.64
5	No current asthma, nothing happened past year, skip filled	229	20.71	20.03
6	No MD visit past year, skip filled	122	11.03	9.21
7	Don't know	2	0.18	0.07

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	122	11.03	13.05
555	No current asthma, nothing happened past year, skip filled	229	20.71	20.03
666	No MD visit past year, skip filled	122	11.03	9.21
677	MD visit, no ER visit past year, skip filled	631	57.05	57.64
777	Don't know	2	0.18	0.07

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	249	22.51	24.63
555	No current asthma, nothing happened past year, skip filled	229	20.71	20.03
666	No MD visit past year, skip filled	122	11.03	9.21
777	Don't know	4	0.36	0.37
888	None	501	45.30	45.70
999	Refused	1	0.09	0.07

HOSPITAL VISIT

Survey: CHILD Asthma Call-Back
Column: 96
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.

Type: NUM
SAS Variable Name: HOSP_VST

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	17	1.54	2.04
2	No	608	54.97	55.24
4	MD visit, no symptoms past year, skip filled	130	11.75	13.49
5	No current asthma, nothing happened past year, skip filled	229	20.71	20.03
6	No MD visit past year, skip filled	122	11.03	9.21

NUMBER OF HOSPITAL VISITS

Survey: CHILD Asthma Call-Back
Column: 97-99
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?

Type: NUM
SAS Variable Name: HOSPTIME

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 365	Times	17	1.54	2.04
444	MD visit, no symptoms past year, skip filled	130	11.75	13.49
455	MD visit, symptoms, no hospital visit past year, skip filled	608	54.97	55.24
555	No current asthma, nothing happened past year, skip filled	229	20.71	20.03
666	No MD visit past year, skip filled	122	11.03	9.21

HOSPITAL FOLLOW-UP

Survey: CHILD Asthma Call-Back
Column: 100-101
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?

Type: NUM
SAS Variable Name: HOSPPLAN

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	15	1.36	1.92
2	No	1	0.09	0.11
4	MD visit, no symptoms past year, skip filled	130	11.75	13.49
5	No current asthma, nothing happened past year, skip filled	229	20.71	20.03
6	No MD visit past year, skip filled	122	11.03	9.21
7	Don't know	1	0.09	0.01
45	MD visit, symptoms, no hospital visit past year, skip filled	608	54.97	55.24

EVER TAUGHT RECOGNIZE EARLY SIGN OR SYMPTOMS

Survey: CHILD Asthma Call-Back
Column: 102
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?

Type: NUM
SAS Variable Name: TCH_SIGN

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	882	79.75	77.47
2	No	216	19.53	21.85
7	Don´t know/Not sure	7	0.63	0.66
9	Refused	1	0.09	0.02

EVER TAUGHT WHAT TO DO DURING ASTHMA EPISODE OR ATTACK

Survey: CHILD Asthma Call-Back
Column: 103
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?

Type: NUM
SAS Variable Name: TCH_RESP

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	927	83.82	81.17
2	No	175	15.82	18.71
7	Don´t know/Not sure	4	0.36	0.12

EVER TAUGHT HOW TO USE A PEAK FLOW

Survey: CHILD Asthma Call-Back
Column: 104
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?

Type: NUM
SAS Variable Name: TCH_MON

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	451	40.78	38.56
2	No	646	58.41	60.84
7	Don´t know/Not sure	8	0.72	0.53
9	Refused	1	0.09	0.07

EVER GIVEN AN ASTHMA ACTION PLAN

Survey: CHILD Asthma Call-Back
Column: 105
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?

Type: NUM
SAS Variable Name: MGT_PLAN

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	520	47.02	45.47
2	No	565	51.08	53.03
7	Don´t know/Not sure	21	1.90	1.49

EVER TAKEN A COURSE TO MANAGE ASTHMA

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

Type: NUM
SAS Variable Name: MGT_CLAS

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	131	11.84	11.96
2	No	974	88.07	88.02
9	Refused	1	0.09	0.02

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	361	32.64	33.01
2	No	741	67.00	66.72
7	Don´t know/Not sure	4	0.36	0.27

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	432	39.06	39.32
2	No	673	60.85	60.61
7	Don´t know/Not sure	1	0.09	0.07

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	67.18	65.98
2	No	360	32.55	33.79
7	Don´t know/Not sure	3	0.27	0.24

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	444	40.14	45.25
2	No	660	59.67	54.64
7	Don´t know/Not sure	2	0.18	0.11

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	80	7.23	7.14
2	No	1,026	92.77	92.86

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	722	65.28	62.16
2	No	383	34.63	37.72
7	Don´t know/Not sure	1	0.09	0.12

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	454	41.05	38.24
2	No	260	23.51	23.27
3	Some are/some aren't	5	0.45	0.42
6	No pets, skip coded	384	34.72	37.84
7	Don't know	3	0.27	0.24

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	22	1.99	2.68
2	No	1,084	98.01	97.32

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	73	6.60	5.53
2	No	1,033	93.40	94.47

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	221	19.98	17.76
2	No	885	80.02	82.24

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	57	5.15	4.94
2	No	1,046	94.58	94.70
7	Don´t know/Not sure	3	0.27	0.36

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	86	7.78	8.00
2	No	1,020	92.22	92.00

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	410	37.07	39.81
2	No	689	62.30	59.81
7	Don´t know/Not sure	7	0.63	0.38

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	470	42.50	40.10
2	No	619	55.97	58.60
7	Don´t know/Not sure	17	1.54	1.30

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	432	39.06	37.16
2	No	663	59.95	62.18
7	Don´t know/Not sure	11	0.99	0.66

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	708	64.01	61.10
2	No	398	35.99	38.90

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	219	19.80	21.53
2	Warm	361	32.64	31.21
3	Hot	482	43.58	43.33
4	Varies	38	3.44	3.31
7	Don´t know/Not sure	6	0.54	0.62

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	709	64.10	61.61
2	No or "No fan"	387	34.99	37.43
7	Don´t know/Not sure	10	0.90	0.95

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	204	18.44	16.89
2	No	879	79.48	81.01
5	Never took asthma medication, skip filled	17	1.54	1.64
7	Don't know	5	0.45	0.38
9	Refused	1	0.09	0.07

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	996	90.05	87.46
2	No	91	8.23	10.81
5	Never took asthma medication, skip filled	17	1.54	1.64
7	Don't know	1	0.09	0.01
9	Refused	1	0.09	0.07

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	952	86.08	81.19
2	No	40	3.62	6.04
5	Never took asthma medication, skip filled	17	1.54	1.64
6	Never used prescription inhaler, skip filled	93	8.41	10.90
7	Don't know	4	0.36	0.23

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	822	74.32	70.54
2	No	145	13.11	15.21
5	Never took asthma medication, skip filled	17	1.54	1.64
6	Never used prescription inhaler, skip filled	93	8.41	10.90
7	Don't know	29	2.62	1.71

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	315	28.48	26.02
2	No	38	3.44	2.94
3	Respondent knows the meds	171	15.46	17.83
4	No asthma med. past 3 months, skip filled	553	50.00	50.24
5	Never took asthma medication, skip filled	17	1.54	1.64
7	Don't know	8	0.72	1.06
9	Refused	4	0.36	0.27

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	296	26.76	23.59
2	Yes, I have some of the medications but not all	11	0.99	1.22
3	No	7	0.63	1.13
4	No asthma med. past 3 months, skip filled	553	50.00	50.24
5	Never took asthma medication, skip filled	17	1.54	1.64
7	Don't know	1	0.09	0.07
10	Know or no handy asthma medicines, skip filled	221	19.98	22.10

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	470	42.50	40.59
2	No inhaler in past 3 months	36	3.25	3.42
4	No asthma med. past 3 months, skip filled	553	50.00	50.24
5	Never took asthma medication, skip filled	17	1.54	1.64
6	Asthma med. past 3 months, never used inhaler, skip filled	23	2.08	3.72
7	Don't know	6	0.54	0.34
9	Refused	1	0.09	0.04

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	130	11.75	11.34
2	No	379	34.27	34.37
4	No asthma med. past 3 months, skip filled	553	50.00	50.24
5	Never took asthma medication, skip filled	17	1.54	1.64
7	Don't know	26	2.35	2.36
9	Refused	1	0.09	0.04

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	16	1.45	1.86
2	No	502	45.39	44.44
4	No asthma med. past 3 months, skip filled	553	50.00	50.24
5	Never took asthma medication, skip filled	17	1.54	1.64
7	Don't know	17	1.54	1.76
9	Refused	1	0.09	0.04

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	168	15.19	17.37
2	No	343	31.01	28.27
4	No asthma med. past 3 months, skip filled	553	50.00	50.24
5	Never took asthma medication, skip filled	17	1.54	1.64
7	Don't know	23	2.08	2.41
9	Refused	2	0.18	0.06

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	165	14.92	16.87
2	No	3	0.27	0.50
4	No asthma med. past 3 months, skip filled	553	50.00	50.24
5	Never took asthma medication, skip filled	17	1.54	1.64
8	No neb. in past 3 months, skip filled	368	33.27	30.74

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	56	5.06	5.69
2	No	111	10.04	11.67
4	No asthma med. past 3 months, skip filled	553	50.00	50.24
5	Never took asthma medication, skip filled	17	1.54	1.64
7	Don´t know	1	0.09	0.02
8	No neb. in past 3 months, skip filled	368	33.27	30.74

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	38	3.44	2.97
2	No	130	11.75	14.40
4	No asthma med. past 3 months, skip filled	553	50.00	50.24
5	Never took asthma medication, skip filled	17	1.54	1.64
8	No neb. in past 3 months, skip filled	368	33.27	30.74

NEBULIZER AT WORK OR SCHOOL

Survey: CHILD Asthma Call-Back
Column: 139
Prologue: In the past 3 months, did [child's name] use a nebulizer . . .
Description: Q8.26d   . . . at work (or a school)?

Type: NUM
SAS Variable Name: NEB_PLCD

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	27	2.44	2.54
2	No	141	12.75	14.84
4	No asthma med. past 3 months, skip filled	553	50.00	50.24
5	Never took asthma medication, skip filled	17	1.54	1.64
8	No neb. in past 3 months, skip filled	368	33.27	30.74

NEBULIZER AT ANY OTHER PLACE

Survey: CHILD Asthma Call-Back
Column: 140
Prologue: In the past 3 months, did [child's name] use a nebulizer . . .
Description: Q8.26e   . . . at any other place?

Type: NUM
SAS Variable Name: NEB_PLCE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	30	2.71	2.75
2	No	138	12.48	14.63
4	No asthma med. past 3 months, skip filled	553	50.00	50.24
5	Never took asthma medication, skip filled	17	1.54	1.64
8	No neb. in past 3 months, skip filled	368	33.27	30.74

COST BARRIER: PRIMARY CARE DOCTOR

Survey: CHILD Asthma Call-Back
Column: 141
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?

Type: NUM
SAS Variable Name: ASMDCOST

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	26	2.35	3.17
2	No	849	76.76	76.58
5	No current asthma, skip filled	229	20.71	20.03
7	Don't know	2	0.18	0.22

COST BARRIER: SPECIALIST

Survey: CHILD Asthma Call-Back
Column: 142
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?

Type: NUM
SAS Variable Name: ASSPCOST

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	21	1.90	2.74
2	No	855	77.31	77.20
5	No current asthma, skip filled	229	20.71	20.03
7	Don't know	1	0.09	0.03

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	48	4.34	5.28
2	No	827	74.77	74.45
5	No current asthma, skip filled	229	20.71	20.03
7	Don't know	2	0.18	0.25

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	1,039	93.94	92.00
2	No	65	5.88	7.89
7	Don't know/Not sure	1	0.09	0.04
9	Refused	1	0.09	0.07

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	30	2.71	4.59
2	Home schooled	19	1.72	1.32
3	Unable to attend for health reason	1	0.09	0.02
4	On vacation or break	7	0.63	0.36
5	Other	7	0.63	1.56
6	Now goes to outside school, skip filled	1,039	93.94	92.00
7	Don't know/Not sure	2	0.18	0.06
9	Refused	1	0.09	0.07

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	12	1.08	1.41
2	No	4	0.36	0.56
3	Home school, skip filled	19	1.72	1.32
5	Not old enough for school, skip filled	30	2.71	4.59
6	Now goes to outside school, skip filled	1,039	93.94	92.00
7	Don't know	1	0.09	0.04
9	Refused	1	0.09	0.07

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	982	88.79	82.43
44	No school past year, skip filled	4	0.36	0.56
55	Not old enough for school, skip filled	30	2.71	4.59
66	Kindergarten	43	3.89	6.21
77	Don't know	6	0.54	0.40
88	Preschool	37	3.35	4.99
99	Refused	4	0.36	0.81

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	313	28.30	27.42
444	No school past year, skip filled	4	0.36	0.56
555	Not old enough for school, skip filled	30	2.71	4.59
666	No current asthma, skip filled	227	20.52	19.79
777	Don't know	12	1.08	0.99
888	None	520	47.02	46.66

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	365	33.00	31.56
2	No	442	39.96	41.47
3	Home school, skip filled	19	1.72	1.32
4	No school past year, skip filled	4	0.36	0.56
5	Not old enough for school, skip filled	30	2.71	4.59
6	No current asthma, skip filled	223	20.16	19.35
7	Don't know	23	2.08	1.15

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	393	35.53	32.49
2	No	344	31.10	31.88
3	Home school, skip filled	19	1.72	1.32
4	No school past year, skip filled	4	0.36	0.56
5	Not old enough for school, skip filled	30	2.71	4.59
6	No current asthma, skip filled	223	20.16	19.35
7	Don't know	93	8.41	9.80

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	47	4.25	3.53
2	No	949	85.80	85.05
3	Home school, skip filled	19	1.72	1.32
4	No school past year, skip filled	4	0.36	0.56
5	Not old enough for school, skip filled	30	2.71	4.59
7	Don't know	56	5.06	4.87
9	Refused	1	0.09	0.07

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	28	2.53	3.33
2	No	1,007	91.05	88.62
3	Home school, skip filled	19	1.72	1.32
4	No school past year, skip filled	4	0.36	0.56
5	Not old enough for school, skip filled	30	2.71	4.59
7	Don't know	17	1.54	1.51
9	Refused	1	0.09	0.07

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	79	7.14	8.64
2	No	323	29.20	38.64
3	Home school, skip filled	19	1.72	1.32
6	Over age ten, skip filled	651	58.86	47.11
7	Don't know	33	2.98	4.21
9	Refused	1	0.09	0.07

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	36	3.25	4.53
2	No	284	25.68	33.99
3	Home school, skip filled	19	1.72	1.32
5	Goes to daycare now, skip filled	79	7.14	8.64
6	Over age ten, skip filled	651	58.86	47.11
7	Don't know	36	3.25	4.34
9	Refused	1	0.09	0.07

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	34	3.07	3.57
444	No current asthma, skip filled	32	2.89	3.73
555	No daycare past year, skip filled	284	25.68	33.99
666	Over age ten, skip filled	651	58.86	47.11
777	Don't know	31	2.80	4.44
888	Zero	59	5.33	6.28
3333	Home school, skip filled	15	1.36	0.88

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	36	3.25	3.26
2	No	56	5.06	6.51
3	Home school, skip filled	15	1.36	0.88
4	No current asthma, skip filled	32	2.89	3.73
5	No daycare past year, skip filled	284	25.68	33.99
6	Over age ten, skip filled	651	58.86	47.11
7	Don't know	32	2.89	4.53

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	1.54	1.72
2	No	96	8.68	10.46
3	Home school, skip filled	19	1.72	1.32
5	No daycare past year, skip filled	284	25.68	33.99
6	Over age ten, skip filled	651	58.86	47.11
7	Don't know	38	3.44	5.33
9	Refused	1	0.09	0.07

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
1	Yes	1	0.09	0.03
2	No	114	10.31	13.14
3	Home school, skip filled	19	1.72	1.32
5	No daycare past year, skip filled	284	25.68	33.99
6	Over age ten, skip filled	651	58.86	47.11
7	Don't know	36	3.25	4.34
9	Refused	1	0.09	0.07

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	0.05
2	No	114	10.31	13.12
3	Home school, skip filled	19	1.72	1.32
5	No daycare past year, skip filled	284	25.68	33.99
6	Over age ten, skip filled	651	58.86	47.11
7	Don't know	36	3.25	4.34
9	Refused	1	0.09	0.07

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	13	1.18	1.11
2	No	860	77.83	78.68
5	No current asthma, skip filled	229	20.72	20.06
7	Don't know	3	0.27	0.15
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	47	4.25	3.45
2	No	827	74.84	76.42
5	No current asthma, skip filled	229	20.72	20.06
7	Don't know	2	0.18	0.07
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	2	0.18	0.09
2	No	872	78.91	79.78
5	No current asthma, skip filled	229	20.72	20.06
7	Don't know	2	0.18	0.07
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	3	0.27	0.32
2	No	871	78.82	79.55
5	No current asthma, skip filled	229	20.72	20.06
7	Don't know	2	0.18	0.07
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	16	1.45	0.86
2	No	857	77.56	78.97
5	No current asthma, skip filled	229	20.72	20.06
7	Don't know	3	0.27	0.11
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	14	1.27	1.33
2	No	857	77.56	78.12
5	No current asthma, skip filled	229	20.72	20.06
7	Don't know	5	0.45	0.49
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	8	0.72	0.52
2	No	865	78.28	79.18
5	No current asthma, skip filled	229	20.72	20.06
7	Don't know	3	0.27	0.24
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	0.63	0.81
2	No	867	78.46	79.06
5	No current asthma, skip filled	229	20.72	20.06
7	Don't know	2	0.18	0.07
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	146	13.21	12.43
2	No	727	65.79	67.41
5	No current asthma, skip filled	229	20.72	20.06
7	Don't know	3	0.27	0.10
BLANK	Partial complete	1		

USED NATUROPATHY TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 175   **SAS Variable Name:** CAM_NATR
Prologue:
Description: Q11.10 . . . naturopathy . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.27	0.66
2	No	870	78.73	79.18
5	No current asthma, skip filled	229	20.72	20.06
7	Don't know	3	0.27	0.11
BLANK	Partial complete	1		

OTHER ALTERNATIVE CARE TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 176   **SAS Variable Name:** CAM_OTHR
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?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	74	6.70	6.09
2	No	800	72.40	73.78
5	No current asthma, skip filled	229	20.72	20.06
7	Don't know	2	0.18	0.07
BLANK	Partial complete	1		

TEXT FOR OTHER TYPE CARE

Survey: CHILD Asthma Call-Back **Type:** CHAR
Column: 177-276 **SAS Variable Name:** CAM_TEXT
Prologue:
Description: Q11.12   What else has [child's name] used?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK		1,032		
HIDDEN	Text field - up to 100 characters	74	100.00	100.00

HEIGHT OF CHILD

Survey: CHILD Asthma Call-Back **Type:** CHAR
Column: 277-280 **SAS Variable Name:** HEIGHT1
Prologue:
Description: Q12.1   How tall is [child's name]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Partial complete	1		
HIDDEN		1,105	100.00	100.00

WEIGHT OF CHILD

Survey: CHILD Asthma Call-Back **Type:** CHAR
Column: 281-284 **SAS Variable Name:** WEIGHT1
Prologue:
Description: Q12.2   How much does [he/she] weigh?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Partial complete	1		
HIDDEN		1,105	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		1,105	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	1.22	2.30
1	Yes	7	8.54	7.93
2	No	47	57.32	50.50
7	Don't know	25	30.49	34.72
9	Refused	2	2.44	4.56
BLANK	Have reported birth weight	1,024		

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	1,094	98.92	98.85
2	Spanish	12	1.08	1.15

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	1,106	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)	875	100.00	100.00
BLANK	Not asked or missing	231		

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	1,106	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	1,106	100.00	100.00

STILL HAVE ASTHMA COMBINED BRFSS AND CALL BACK

Survey: CHILD Asthma Call-Back
Column: 388
Prologue:
Description: STILL HAVE ASTHMA COMBINED BRFSS (ASTHNOW) AND CALL BACK (CUR_ASTH)

Type: NUM
SAS Variable Name: _CUR_ASTH_C

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	733	66.27	66.69
2	No	352	31.83	31.50
7	Don´t know/Not sure	21	1.90	1.81

RELATIONSHIP TO CHILD COMBINED BRFSS

Survey: CHILD Asthma Call-Back
Column: 389
Prologue:
Description: RELATIONSHIP TO CHILD COMBINED BRFSS

Type: NUM
SAS Variable Name: RELATED

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Parents	1,023	92.50	91.90
2	Guardian	22	1.99	3.27
3	Other relative	60	5.42	4.80
4	Unrelated	1	0.09	0.03

FLAG FOR AGE, AGEDX, INCIDNT INCONSISTENCY

Survey: CHILD Asthma Call-Back
Column: 390
Prologue:
Description: FLAG FOR AGE, AGEDX, INCIDNT INCONSISTENCY

Type: NUM
SAS Variable Name: FLAG1

Value	Value Label	Frequency	Percentage	Weighted Percentage
0	AGE, AGEDX, and INCIDNT are consistent	1,068	96.56	96.12
1	AGEDX is greater than AGE	1	0.09	0.03
2	AGE, AGEDX, and INCIDNT are inconsistent	37	3.35	3.85

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	44	3.98	3.21
2	No	1,062	96.02	96.79

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
2	No	1,106	100.00	100.00

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	165	14.92	15.06
2	No	941	85.08	84.94

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	1,106	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	2	0.18	0.18
2	No	1,104	99.82	99.82

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
1	Yes	1	0.09	0.02
2	No	1,105	99.91	99.98

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	0.06
2	No	1,104	99.82	99.94

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	1,106	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	0.06
2	No	1,104	99.82	99.94

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	1,106	100.00	100.00

BUDESONIDE

Survey: CHILD Asthma Call-Back
Column: 401
Prologue:
Description: BUDESONIDE

Type: NUM
SAS Variable Name: INHALER_ID_11

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.27	0.15
2	No	1,103	99.73	99.85

COMBIVENT

Survey: CHILD Asthma Call-Back
Column: 402
Prologue:
Description: COMBIVENT

Type: NUM
SAS Variable Name: INHALER_ID_12

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.18	0.18
2	No	1,104	99.82	99.82

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	1,106	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	91	8.23	9.60
2	No	1,015	91.77	90.40

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	7	0.63	0.55
2	No	1,099	99.37	99.45

FLUNISOLIDE

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

Column: 406   **SAS Variable Name:** INHALER_ID_16

Prologue:

Description: FLUNISOLIDE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

FLUTICASONE

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

Column: 407   **SAS Variable Name:** INHALER_ID_17

Prologue:

Description: FLUTICASONE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.27	0.27
2	No	1,103	99.73	99.73

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
1	Yes	1	0.09	0.22
2	No	1,105	99.91	99.78

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	0.03
2	No	1,105	99.91	99.97

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	7	0.63	0.55
2	No	1,099	99.37	99.45

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	1,106	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	1,106	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
2	No	1,106	100.00	100.00

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	23	2.08	2.16
2	No	1,083	97.92	97.84

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	14	1.27	1.34
2	No	1,092	98.73	98.66

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	1,106	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	0.06
2	No	1,105	99.91	99.94

TERBUTALINE (+ T. SULFATE)

Survey: CHILD Asthma Call-Back　　　　　　　　　　　**Type:** NUM
Column: 418　　　　　　　　　　　　　　　　**SAS Variable Name:** INHALER_ID_28
Prologue:
Description: TERBUTALINE (+ T. SULFATE)

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

TILADE

Survey: CHILD Asthma Call-Back　　　　　　　　　　　**Type:** NUM
Column: 419　　　　　　　　　　　　　　　　**SAS Variable Name:** INHALER_ID_29
Prologue:
Description: TILADE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.04
2	No	1,105	99.91	99.96

TORNALATE

Survey: CHILD Asthma Call-Back　　　　　　　　　　　**Type:** NUM
Column: 420　　　　　　　　　　　　　　　　**SAS Variable Name:** INHALER_ID_30
Prologue:
Description: TORNALATE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

TRIAMCINOLONE ACETONIDE

Survey: CHILD Asthma Call-Back　　　　　　　　　　　**Type:** NUM
Column: 421　　　　　　　　　　　　　　　　**SAS Variable Name:** INHALER_ID_31
Prologue:
Description: TRIAMCINOLONE ACETONIDE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	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
2	No	1,106	100.00	100.00

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	87	7.87	7.63
2	No	1,019	92.13	92.37

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	1,106	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	1,106	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	22	1.99	1.54
2	No	1,084	98.01	98.46

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	1,106	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	24	2.17	1.49
2	No	1,082	97.83	98.51

MOMETASONE FUROATE

Survey: CHILD Asthma Call-Back

Column: 429

Prologue:

Description: MOMETASONE FUROATE

Type: NUM

SAS Variable Name: INHALER_ID_39

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.07
2	No	1,105	99.91	99.93

ASMANEX (TWISTHALER)

Survey: CHILD Asthma Call-Back

Column: 430

Prologue:

Description: ASMANEX (TWISTHALER)

Type: NUM

SAS Variable Name: INHALER_ID_40

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	12	1.08	0.68
2	No	1,094	98.92	99.32

PRO-AIR HFA

Survey: CHILD Asthma Call-Back

Column: 431

Prologue:

Description: PRO-AIR HFA

Type: NUM

SAS Variable Name: INHALER_ID_41

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	77	6.96	5.64
2	No	1,029	93.04	94.36

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	17	1.54	1.15
2	No	1,089	98.46	98.85

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	24	2.17	2.06
2	No	1,082	97.83	97.94

OTHER INHALER

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 434   **SAS Variable Name:** OTHER_INHALER
Prologue:
Description: NEW OTHER PRESCRIPTION INHALER

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Not asked or missing	1,106		

PILL ACCOLATE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 435   **SAS Variable Name:** PILLS_ID_1
Prologue:
Description: PILL ACCOLATE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL AEROLATE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 436   **SAS Variable Name:** PILLS_ID_2
Prologue:
Description: PILL AEROLATE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	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	2	0.18	0.18
2	No	1,104	99.82	99.82

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	1,106	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	1,106	100.00	100.00

PILL DELTASONE

Survey: CHILD Asthma Call-Back
Column: 440
Prologue:
Description: PILL DELTASONE

Type: NUM
SAS Variable Name: PILLS_ID_7

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL ELIXOPHYLLIN

Survey: CHILD Asthma Call-Back
Column: 441
Prologue:
Description: PILL ELIXOPHYLLIN

Type: NUM
SAS Variable Name: PILLS_ID_8

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL MEDROL

Survey: CHILD Asthma Call-Back
Column: 442
Prologue:
Description: PILL MEDROL

Type: NUM
SAS Variable Name: PILLS_ID_11

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

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	1,106	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	1,106	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	1,106	100.00	100.00

PILL MONTELUKAST
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 446 **SAS Variable Name:** PILLS_ID_15
Prologue:
Description: PILL MONTELUKAST

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.05
2	No	1,105	99.91	99.95

PILL PEDIAPRED
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 447 **SAS Variable Name:** PILLS_ID_17
Prologue:
Description: PILL PEDIAPRED

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL PREDNISOLONE
Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 448 **SAS Variable Name:** PILLS_ID_18
Prologue:
Description: PILL PREDNISOLONE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.02
2	No	1,105	99.91	99.98

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	14	1.27	0.80
2	No	1,092	98.73	99.20

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	1,106	100.00	100.00

PILL RESPID

Survey: CHILD Asthma Call-Back
Column: 451
Prologue:
Description: PILL RESPID

Type: NUM
SAS Variable Name: PILLS_ID_23

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL SINGULAIR

Survey: CHILD Asthma Call-Back
Column: 452
Prologue:
Description: PILL SINGULAIR

Type: NUM
SAS Variable Name: PILLS_ID_24

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	114	10.31	10.35
2	No	992	89.69	89.65

PILL SLO-PHYLLIN

Survey: CHILD Asthma Call-Back
Column: 453
Prologue:
Description: PILL SLO-PHYLLIN

Type: NUM
SAS Variable Name: PILLS_ID_25

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	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	1,106	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	1,106	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	1,106	100.00	100.00

PILL THEOCLEAR

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 457   **SAS Variable Name:** PILLS_ID_31
Prologue:
Description: PILL THEOCLEAR

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL THEODUR

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 458   **SAS Variable Name:** PILLS_ID_32
Prologue:
Description: PILL THEODUR

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL THEO-DUR

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 459   **SAS Variable Name:** PILLS_ID_33
Prologue:
Description: PILL THEO-DUR

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL THEOPHYLLINE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 460   **SAS Variable Name:** PILLS_ID_35
Prologue:
Description: PILL THEOPHYLLINE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL THEOSPAN

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 461   **SAS Variable Name:** PILLS_ID_37
Prologue:
Description: PILL THEOSPAN

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL T-PHYL

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 462   **SAS Variable Name:** PILLS_ID_40
Prologue:
Description: PILL T-PHYL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	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	1,106	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	1,106	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	1,106	100.00	100.00

PILL ZAFIRLUKAST
Survey: CHILD Asthma Call-Back
Column: 466
Prologue:
Description: PILL ZAFIRLUKAST

Type: NUM
SAS Variable Name: PILLS_ID_45

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL ZILEUTON
Survey: CHILD Asthma Call-Back
Column: 467
Prologue:
Description: PILL ZILEUTON

Type: NUM
SAS Variable Name: PILLS_ID_46

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL ZYFLO FILMTAB
Survey: CHILD Asthma Call-Back
Column: 468
Prologue:
Description: PILL ZYFLO FILMTAB

Type: NUM
SAS Variable Name: PILLS_ID_47

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL TERBUTALINE (+ T. SULFATE)

Survey: CHILD Asthma Call-Back
Column: 469
Prologue:
Description: PILL TERBUTALINE (+ T. SULFATE)

Type: NUM
SAS Variable Name: PILLS_ID_48

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

PILL BRETHINE

Survey: CHILD Asthma Call-Back
Column: 470
Prologue:
Description: PILL BRETHINE

Type: NUM
SAS Variable Name: PILLS_ID_49

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

DON´T KNOW/REFUSED

Survey: CHILD Asthma Call-Back
Column: 471
Prologue:
Description: DON´T KNOW/REFUSED

Type: NUM
SAS Variable Name: PILLS_ID_7799

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	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
BLANK	Not asked or missing	1,106		

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	1,106	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	2	0.18	0.15
2	No	1,104	99.82	99.85

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	1,106	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	1,106	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	14	1.27	1.72
2	No	1,092	98.73	98.28

SYRUP PRELONE
Survey: CHILD Asthma Call-Back
Column: 478
Prologue:
Description: SYRUP PRELONE

Type: NUM
SAS Variable Name: SYRUP_ID_6

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

SYRUP PROVENTIL
Survey: CHILD Asthma Call-Back
Column: 479
Prologue:
Description: SYRUP PROVENTIL

Type: NUM
SAS Variable Name: SYRUP_ID_7

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

SYRUP SLO-PHYLLIN
Survey: CHILD Asthma Call-Back
Column: 480
Prologue:
Description: SYRUP SLO-PHYLLIN

Type: NUM
SAS Variable Name: SYRUP_ID_8

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

SYRUP THEOPHYLLINE
Survey: CHILD Asthma Call-Back
Column: 481
Prologue:
Description: SYRUP THEOPHYLLINE

Type: NUM
SAS Variable Name: SYRUP_ID_9

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

SYRUP VENTOLIN
Survey: CHILD Asthma Call-Back
Column: 482
Prologue:
Description: SYRUP VENTOLIN

Type: NUM
SAS Variable Name: SYRUP_ID_10

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

DON´T KNOW/REFUSED
Survey: CHILD Asthma Call-Back
Column: 483
Prologue:
Description: DON´T KNOW/REFUSED

Type: NUM
SAS Variable Name: SYRUP_ID_7799

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

OTHER SYRUP
Survey: CHILD Asthma Call-Back
Column: 484
Prologue:
Description: NEW OTHER PRESCRIPTION SYRUP

Type: NUM
SAS Variable Name: OTHER_SYRUP

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Not asked or missing	1,106		

NEB ALBUTEROL
Survey: CHILD Asthma Call-Back
Column: 485
Prologue:
Description: NEB ALBUTEROL

Type: NUM
SAS Variable Name: NEB_ID_1

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	135	12.21	14.15
2	No	971	87.79	85.85

NEB ALUPENT
Survey: CHILD Asthma Call-Back
Column: 486
Prologue:
Description: NEB ALUPENT

Type: NUM
SAS Variable Name: NEB_ID_2

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

NEB ATROVENT
Survey: CHILD Asthma Call-Back
Column: 487
Prologue:
Description: NEB ATROVENT

Type: NUM
SAS Variable Name: NEB_ID_3

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	6	0.54	0.64
2	No	1,100	99.46	99.36

NEB BITOLTEROL
Survey: CHILD Asthma Call-Back
Column: 488
Prologue:
Description: NEB BITOLTEROL

Type: NUM
SAS Variable Name: NEB_ID_4

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

NEB BUDESONIDE
Survey: CHILD Asthma Call-Back
Column: 489
Prologue:
Description: NEB BUDESONIDE

Type: NUM
SAS Variable Name: NEB_ID_5

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	10	0.90	1.04
2	No	1,096	99.10	98.96

NEB CROMOLYN
Survey: CHILD Asthma Call-Back
Column: 490
Prologue:
Description: NEB CROMOLYN

Type: NUM
SAS Variable Name: NEB_ID_6

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.02
2	No	1,105	99.91	99.98

NEB DUONEB
Survey: CHILD Asthma Call-Back
Column: 491
Prologue:
Description: NEB DUONEB

Type: NUM
SAS Variable Name: NEB_ID_7

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.27	0.19
2	No	1,103	99.73	99.81

NEB INTAL

Survey: CHILD Asthma Call-Back
Column: 492
Prologue:
Description: NEB INTAL

Type: NUM
SAS Variable Name: NEB_ID_8

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

NEB IPRATROPRIUM BROMIDE

Survey: CHILD Asthma Call-Back
Column: 493
Prologue:
Description: NEB IPRATROPRIUM BROMIDE

Type: NUM
SAS Variable Name: NEB_ID_9

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.27	0.07
2	No	1,103	99.73	99.93

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	1,106	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	1,106	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
1	Yes	1	0.09	0.02
2	No	1,105	99.91	99.98

NEB PULMICORT

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 497   **SAS Variable Name:** NEB_ID_13
Prologue:
Description: NEB PULMICORT

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	19	1.72	2.47
2	No	1,087	98.28	97.53

NEB TORNALATE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 498   **SAS Variable Name:** NEB_ID_14
Prologue:
Description: NEB TORNALATE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1,106	100.00	100.00

NEB VENTOLIN

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 499   **SAS Variable Name:** NEB_ID_15
Prologue:
Description: NEB VENTOLIN

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.14
2	No	1,105	99.91	99.86

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	21	1.90	2.44
2	No	1,085	98.10	97.56

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	1,106	100.00	100.00

OTHER NEBULIZER

Survey: CHILD Asthma Call-Back

Column: 502

Prologue:

Type: NUM

SAS Variable Name: OTHER_NEB

Description: NEW OTHER PRESCRIPTION   NEBULIZER

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Not asked or missing	1,106		

OTHER INHALER TEXT

Survey: CHILD Asthma Call-Back

Column: 503-602

Prologue:

Type: CHAR

SAS Variable Name: OTH_I1R

Description: New other prescription inhaler name

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No other new asthma medication	1,103		
HIDDEN		3	100.00	100.00

OTHER PILLS TEXT

Survey: CHILD Asthma Call-Back

Column: 603-702

Prologue:

Type: CHAR

SAS Variable Name: OTH_P1R

Description: New other prescription pills name

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No other new asthma medication	1,106		

OTHER SYRUP TEXT

Survey: CHILD Asthma Call-Back

Column: 703-802

Prologue:

Type: CHAR

SAS Variable Name: OTH_S1R

Description: New other prescription syrup name

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No other new asthma medication	1,106		

OTHER NEBULIZER TEXT

Survey: CHILD Asthma Call-Back

Column: 803-902

Prologue:

Type: CHAR

SAS Variable Name: OTH_N1R

Description: New other prescription nebulizer name

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No other new asthma medication	1,106		

INHALER_TEXT: COUGH/COLD MED.

Survey: CHILD Asthma Call-Back

Column: 903

Prologue:

Type: NUM

SAS Variable Name: INHALER_TEXT1

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	11	0.99	0.76
3	No other medication text filled	1,095	99.01	99.24

INHALER_TEXT: ALLERGY MED.

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 904 **SAS Variable Name:** INHALER_TEXT2
Prologue:
Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.01
2	No	10	0.90	0.75
3	No other medication text filled	1,095	99.01	99.24

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

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 905 **SAS Variable Name:** INHALER_TEXT3
Prologue:
Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.04
2	No	10	0.90	0.72
3	No other medication text filled	1,095	99.01	99.24

INHALER_TEXT: ASTHMA MED., BUT NOT INHALER

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 906 **SAS Variable Name:** INHALER_TEXT4
Prologue:
Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.01
2	No	10	0.90	0.75
3	No other medication text filled	1,095	99.01	99.24

INHALER_TEXT: UNIDENTIFIABLE WORD OR NOT A MED.

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 907 **SAS Variable Name:** INHALER_TEXT5
Prologue:
Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	11	0.99	0.76
3	No other medication text filled	1,095	99.01	99.24

INHALER_TEXT: WAS BACK CODED TO EXISTING INHALER

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 908 **SAS Variable Name:** INHALER_TEXT6
Prologue:
Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	0.36	0.26
2	No	7	0.63	0.50
3	No other medication text filled	1,095	99.01	99.24

INHALER_TEXT: OTC INHALER, PILL, OR SYRUP

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

Column: 909   **SAS Variable Name:** INHALER_TEXT7

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	11	0.99	0.76
3	No other medication text filled	1,095	99.01	99.24

INHALER_TEXT: TRUE ASTHMA MED., NO AVAILABLE BACK CODE

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

Column: 910   **SAS Variable Name:** INHALER_TEXT8

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.27	0.44
2	No	8	0.72	0.32
3	No other medication text filled	1,095	99.01	99.24

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	0.01
2	No	10	0.90	0.75
3	No other medication text filled	1,095	99.01	99.24

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	8	0.72	0.51
3	No other medication text filled	1,098	99.28	99.49

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	7	0.63	0.34
2	No	1	0.09	0.17
3	No other medication text filled	1,098	99.28	99.49

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	8	0.72	0.51
3	No other medication text filled	1,098	99.28	99.49

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
1	Yes	1	0.09	0.17
2	No	7	0.63	0.34
3	No other medication text filled	1,098	99.28	99.49

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	8	0.72	0.51
3	No other medication text filled	1,098	99.28	99.49

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	8	0.72	0.51
3	No other medication text filled	1,098	99.28	99.49

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	8	0.72	0.51
3	No other medication text filled	1,098	99.28	99.49

PILLS_TEXT: TRUE ASTHMA MED., NO AVAILABLE BACK CODE

Survey: CHILD Asthma Call-Back
Column: 919

Type: NUM
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	8	0.72	0.51
3	No other medication text filled	1,098	99.28	99.49

PILLS_TEXT: DON'T KNOW

Survey: CHILD Asthma Call-Back
Column: 920

Type: NUM
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	8	0.72	0.51
3	No other medication text filled	1,098	99.28	99.49

SYRUP_TEXT: COUGH/COLD MED.

Survey: CHILD Asthma Call-Back
Column: 921

Type: NUM
SAS Variable Name: SYRUP_TEXT1

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.09	0.02
3	No other medication text filled	1,105	99.91	99.98

SYRUP_TEXT: ALLERGY MED.

Survey: CHILD Asthma Call-Back
Column: 922

Type: NUM
SAS Variable Name: SYRUP_TEXT2

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	0.09	0.02
3	No other medication text filled	1,105	99.91	99.98

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

Survey: CHILD Asthma Call-Back
Column: 923

Type: NUM
SAS Variable Name: SYRUP_TEXT3

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	0.09	0.02
3	No other medication text filled	1,105	99.91	99.98

SYRUP_TEXT: ASTHMA MED., BUT NOT SYRUP

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 924
SAS Variable Name: SYRUP_TEXT4
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	0.09	0.02
3	No other medication text filled	1,105	99.91	99.98

SYRUP_TEXT: UNIDENTIFIABLE WORD OR NOT A MED.

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 925
SAS Variable Name: SYRUP_TEXT5
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	0.09	0.02
3	No other medication text filled	1,105	99.91	99.98

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	0.02
3	No other medication text filled	1,105	99.91	99.98

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	0.02
3	No other medication text filled	1,105	99.91	99.98

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	0.02
3	No other medication text filled	1,105	99.91	99.98

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	0.02
3	No other medication text filled	1,105	99.91	99.98

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
3	No other medication text filled	1,106	100.00	100.00

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
3	No other medication text filled	1,106	100.00	100.00

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
3	No other medication text filled	1,106	100.00	100.00

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
3	No other medication text filled	1,106	100.00	100.00

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
3	No other medication text filled	1,106	100.00	100.00

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
3	No other medication text filled	1,106	100.00	100.00

NEB_TEXT: OTC INHALER, PILL, OR SYRUP

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 936   **SAS Variable Name:** NEB_TEXT7
Prologue:
Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	No other medication text filled	1,106	100.00	100.00

NEB_TEXT: TRUE ASTHMA MED., NO AVAILABLE BACK CODE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 937   **SAS Variable Name:** NEB_TEXT8
Prologue:
Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	No other medication text filled	1,106	100.00	100.00

NEB_TEXT: DON'T KNOW

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 938   **SAS Variable Name:** NEB_TEXT96
Prologue:
Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	No other medication text filled	1,106	100.00	100.00

INHALED CORTICOSTEROIDS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 939-940   **SAS Variable Name:** INH_CS
Prologue:
Description: INHALED CORTICOSTEROIDS

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 14	Count	1,094	98.92	99.33
99	Missing	12	1.08	0.67

INHALED ANTI-INFLAMMATORY

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 941-942   **SAS Variable Name:** INH_AI
Prologue:
Description: INHALED ANTI-INFLAMMATORY

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 4	Count	1,094	98.92	99.33
99	Missing	12	1.08	0.67

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	1,094	98.92	99.33
99	Missing	12	1.08	0.67

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	1,094	98.92	99.33
99	Missing	12	1.08	0.67

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	1,094	98.92	99.33
99	Missing	12	1.08	0.67

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	97.11	97.31
99	Missing	32	2.89	2.69

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	97.11	97.31
99	Missing	32	2.89	2.69

PILL BETA 2 AGONIST

Survey: CHILD Asthma Call-Back
Column: 953-954
Prologue:
Description: PILL BETA 2 AGONIST

Type: NUM
SAS Variable Name: PILL_B2A

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 7	Count	1,074	97.11	97.31
99	Missing	32	2.89	2.69

PILL METHYLXANTHINES

Survey: CHILD Asthma Call-Back
Column: 955-956
Prologue:
Description: PILL METHYLXANTHINES

Type: NUM
SAS Variable Name: PILL_METH

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 23	Count	1,074	97.11	97.31
99	Missing	32	2.89	2.69

SYRUP METHYLXANTHINES

Survey: CHILD Asthma Call-Back
Column: 957-958
Prologue:
Description: SYRUP METHYLXANTHINES

Type: NUM
SAS Variable Name: SYRP_METH

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 3	Count	1,083	97.92	97.91
99	Missing	23	2.08	2.09

SYRUP SHORT ACTING BETA 2 AGONIST

Survey: CHILD Asthma Call-Back
Column: 959-960
Prologue:
Description: SYRUP SHORT ACTING BETA 2 AGONIST

Type: NUM
SAS Variable Name: SYRP_B2AS

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 5	Count	1,083	97.92	97.91
99	Missing	23	2.08	2.09

SYRUP CORTICOSTEROIDS

Survey: CHILD Asthma Call-Back
Column: 961-962
Prologue:
Description: SYRUP CORTICOSTEROIDS

Type: NUM
SAS Variable Name: SYRP_CS

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 2	Count	1,083	97.92	97.91
99	Missing	23	2.08	2.09

NEBULIZER ANTI-INFLAMMATORY

Survey: CHILD Asthma Call-Back
Column: 963-964
Prologue:
Description: NEBULIZER ANTI-INFLAMMATORY

Type: NUM
SAS Variable Name: NEB_AI

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 2	Count	1,076	97.29	97.25
99	Missing	30	2.71	2.75

NEBULIZER CORTICOSTEROID

Survey: CHILD Asthma Call-Back
Column: 965-966
Prologue:
Description: NEBULIZER CORTICOSTEROID

Type: NUM
SAS Variable Name: NEB_CS

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 2	Count	1,076	97.29	97.25
99	Missing	30	2.71	2.75

NEBULIZER ANTICHOLINERGIC

Survey: CHILD Asthma Call-Back
Column: 967-968
Prologue:
Description: NEBULIZER ANTICHOLINERGIC

Type: NUM
SAS Variable Name: NEB_AC

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 3	Count	1,076	97.29	97.25
99	Missing	30	2.71	2.75

NEBULIZER BETA 2 AGONIST

Survey: CHILD Asthma Call-Back
Column: 969-970
Prologue:
Description: NEBULIZER BETA 2 AGONIST

Type: NUM
SAS Variable Name: NEB_B2A

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 8	Count	1,076	97.29	97.25
99	Missing	30	2.71	2.75

ADVAIR (+ A. DISKUS): WHETHER SPACER USED

Survey: CHILD Asthma Call-Back
Column: 971
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_1

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

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	13	29.55	26.76
2	No	25	56.82	61.55
3	No attack in past 3 months	5	11.36	9.43
7	Don´t know	1	2.27	2.26
BLANK	Skip filled	1,062		

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	11	25.00	27.50
2	No	32	72.73	68.27
9	Refused	1	2.27	4.24
BLANK	Skip filled	1,062		

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	38	86.36	90.41
2	No	6	13.64	9.59
BLANK	Skip filled	1,062		

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	38	86.36	85.21
401 – 499	Weeks	3	6.82	9.29
666	Less often than once a week	2	4.55	3.87
777	Don´t know/Not sure	1	2.27	1.62
BLANK	Skip filled	1,062		

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	1,106		

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
BLANK	Skip filled	1,106		

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
BLANK	Skip filled	1,106		

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
BLANK	Skip filled	1,106		

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
BLANK	Skip filled	1,106		

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
BLANK	Skip filled	1,106		

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	1,106		

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	50.30	49.94
2	No	77	46.67	41.36
7	Don´t know	4	2.42	4.25
9	Refused	1	0.61	4.45
BLANK	Skip filled	941		

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	132	80.00	83.91
2	No	17	10.30	10.87
3	No attack in past 3 months	14	8.48	4.83
7	Don´t know	2	1.21	0.39
BLANK	Skip filled	941		

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	71	43.03	41.86
2	No	89	53.94	52.16
3	Didn't exercise in past 3 months	3	1.82	4.73
7	Don´t know	2	1.21	1.25
BLANK	Skip filled	941		

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	33	20.00	19.74
2	No	130	78.79	79.90
7	Don´t know	2	1.21	0.37
BLANK	Skip filled	941		

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	40	24.24	24.14
401 – 499	Weeks	61	36.97	36.07
555	Never	6	3.64	2.97
666	Less often than once a week	51	30.91	34.81
777	Don´t know/Not sure	6	3.64	1.76
999	Refused	1	0.61	0.26
BLANK	Skip filled	941		

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	105	63.64	65.91
77	Don´t know	5	3.03	7.82
88	None	55	33.33	26.27
BLANK	Skip filled	941		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	50.00	73.16
2	No	1	50.00	26.84
BLANK	Skip filled	1,104		

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
1	Yes	1	50.00	73.16
2	No	1	50.00	26.84
BLANK	Skip filled	1,104		

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
1	Yes	1	50.00	26.84
2	No	1	50.00	73.16
BLANK	Skip filled	1,104		

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	50.00	26.84
2	No	1	50.00	73.16
BLANK	Skip filled	1,104		

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	50.00	26.84
666	Less often than once a week	1	50.00	73.16
BLANK	Skip filled	1,104		

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	1,106		

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,105		

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
2	No	1	100.00	100.00
BLANK	Skip filled	1,105		

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
2	No	1	100.00	100.00
BLANK	Skip filled	1,105		

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,105		

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
301 – 399	Days	1	100.00	100.00
BLANK	Skip filled	1,105		

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	1,106		

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	1,104		

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	44.73
2	No	1	50.00	55.27
BLANK	Skip filled	1,104		

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	1,104		

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	1,104		

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	1,104		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,104		

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	1,104		

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	44.58
2	No	1	50.00	55.42
BLANK	Skip filled	1,104		

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	44.58
2	No	1	50.00	55.42
BLANK	Skip filled	1,104		

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	1,104		

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	1,104		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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
1	Yes	1	50.00	63.61
2	No	1	50.00	36.39
BLANK	Skip filled	1,104		

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	50.00	63.61
2	No	1	50.00	36.39
BLANK	Skip filled	1,104		

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	50.00	36.39
3	Didn't exercise in past 3 months	1	50.00	63.61
BLANK	Skip filled	1,104		

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	50.00	63.61
7	Don´t know	1	50.00	36.39
BLANK	Skip filled	1,104		

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
301 – 399	Days	1	50.00	63.61
555	Never	1	50.00	36.39
BLANK	Skip filled	1,104		

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	1,106		

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	94.99
2	No	1	50.00	5.01
BLANK	Skip filled	1,104		

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	1,104		

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	5.01
2	No	1	50.00	94.99
BLANK	Skip filled	1,104		

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	5.01
2	No	1	50.00	94.99
BLANK	Skip filled	1,104		

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	1,104		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

CROMOLYN: TIMES PER DAY/WEEK
Survey: CHILD Asthma Call-Back
Column: 1083-1085
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_13

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

CROMOLYN: NUMBER OF CANISTERS
Survey: CHILD Asthma Call-Back
Column: 1086-1087
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_13

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

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

Type: NUM
SAS Variable Name: ILP03_14

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	66	73.33	82.55
2	No	24	26.67	17.45
BLANK	Skip filled	1,016		

FLOVENT: WHEN ATTACK
Survey: CHILD Asthma Call-Back
Column: 1089
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_14

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	43	47.78	52.42
2	No	37	41.11	35.05
3	No attack in past 3 months	9	10.00	10.52
7	Don´t know	1	1.11	2.00
BLANK	Skip filled	1,016		

FLOVENT: BEFORE EXERCISING
Survey: CHILD Asthma Call-Back
Column: 1090
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_14

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	29	32.22	33.74
2	No	59	65.56	58.94
3	Didn't exercise in past 3 months	1	1.11	6.83
7	Don´t know	1	1.11	0.49
BLANK	Skip filled	1,016		

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	71	78.89	75.20
2	No	19	21.11	24.80
BLANK	Skip filled	1,016		

FLOVENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1092-1094
Prologue:
Type: NUM
SAS Variable Name: ILP08_14

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	74	82.22	77.12
401 – 499	Weeks	9	10.00	13.89
666	Less often than once a week	6	6.67	8.56
777	Don´t know/Not sure	1	1.11	0.43
BLANK	Skip filled	1,016		

FLOVENT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 1095-1096
Prologue:
Type: NUM
SAS Variable Name: ILP10_14

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	1,106		

FLOVENT ROTADISK: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back
Column: 1097
Type: NUM
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	1,106		

FLOVENT ROTADISK: WHEN ATTACK

Survey: CHILD Asthma Call-Back
Column: 1098
Prologue:
Type: NUM
SAS Variable Name: ILP04_15

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	3	42.86	59.75
2	No	3	42.86	38.81
3	No attack in past 3 months	1	14.29	1.44
BLANK	Skip filled	1,099		

FLOVENT ROTADISK: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Column: 1099

Type: NUM
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
1	Yes	1	14.29	6.93
2	No	6	85.71	93.07
BLANK	Skip filled	1,099		

FLOVENT ROTADISK: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1100

Type: NUM
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	6	85.71	93.07
2	No	1	14.29	6.93
BLANK	Skip filled	1,099		

FLOVENT ROTADISK: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1101-1103

Type: NUM
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	6	85.71	83.31
401 – 499	Weeks	1	14.29	16.69
BLANK	Skip filled	1,099		

FLOVENT ROTADISK: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 1104-1105

Type: NUM
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	1,106		

FLUNISOLIDE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back
Column: 1106

Type: NUM
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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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
1	Yes	1	33.33	11.06
2	No	2	66.67	88.94
BLANK	Skip filled	1,103		

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	62.16
2	No	2	66.67	37.84
BLANK	Skip filled	1,103		

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	2	66.67	37.84
2	No	1	33.33	62.16
BLANK	Skip filled	1,103		

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	1	33.33	26.79
2	No	2	66.67	73.21
BLANK	Skip filled	1,103		

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
401 – 499	Weeks	2	66.67	88.94
666	Less often than once a week	1	33.33	11.06
BLANK	Skip filled	1,103		

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	1,106		

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,105		

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
2	No	1	100.00	100.00
BLANK	Skip filled	1,105		

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,105		

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,105		

INTAL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1128-1130
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_18

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	1	100.00	100.00
BLANK	Skip filled	1,105		

INTAL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 1131-1132
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_18

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

IPRATROPIUM BROMIDE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back
Column: 1133
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_19

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,105		

IPRATROPIUM BROMIDE: WHEN ATTACK

Survey: CHILD Asthma Call-Back
Column: 1134
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_19

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,105		

IPRATROPIUM BROMIDE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Column: 1135
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_19

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	1,105		

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	1,105		

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	1,105		

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	1,106		

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	1,106		

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	6	85.71	83.42
2	No	1	14.29	16.58
BLANK	Skip filled	1,099		

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	6	85.71	88.73
2	No	1	14.29	11.27
BLANK	Skip filled	1,099		

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
1	Yes	1	14.29	26.53
2	No	6	85.71	73.47
BLANK	Skip filled	1,099		

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
301 – 399	Days	1	14.29	26.53
401 – 499	Weeks	4	57.14	56.61
666	Less often than once a week	1	14.29	6.12
777	Don´t know/Not sure	1	14.29	10.75
BLANK	Skip filled	1,099		

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	3	42.86	24.25
88	None	4	57.14	75.75
BLANK	Skip filled	1,099		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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
BLANK	Skip filled	1,106		

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
BLANK	Skip filled	1,106		

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
BLANK	Skip filled	1,106		

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
BLANK	Skip filled	1,106		

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
BLANK	Skip filled	1,106		

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
BLANK	Skip filled	1,106		

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	10	43.48	37.59
2	No	13	56.52	62.41
BLANK	Skip filled	1,083		

PROVENTIL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1179   **SAS Variable Name:** ILP04_24
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	18	78.26	82.40
2	No	2	8.70	7.15
3	No attack in past 3 months	3	13.04	10.45
BLANK	Skip filled	1,083		

PROVENTIL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1180   **SAS Variable Name:** ILP05_24
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	13	56.52	63.63
2	No	10	43.48	36.37
BLANK	Skip filled	1,083		

PROVENTIL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1181   **SAS Variable Name:** ILP06_24
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	13.04	11.47
2	No	20	86.96	88.53
BLANK	Skip filled	1,083		

PROVENTIL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1182-1184   **SAS Variable Name:** ILP08_24
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	7	30.43	13.18
401 – 499	Weeks	6	26.09	24.81
666	Less often than once a week	8	34.78	30.53
777	Don´t know/Not sure	2	8.70	31.48
BLANK	Skip filled	1,083		

PROVENTIL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1185-1186   **SAS Variable Name:** ILP10_24
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	16	69.57	79.13
77	Don´t know	1	4.35	0.32
88	None	6	26.09	20.55
BLANK	Skip filled	1,083		

PULMICORT FLEXHALER: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1187   **SAS Variable Name:** ILP03_25
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	1,106		

PULMICORT FLEXHALER: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1188   **SAS Variable Name:** ILP04_25
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	16.67	4.15
2	No	8	66.67	61.67
3	No attack in past 3 months	2	16.67	34.18
BLANK	Skip filled	1,094		

PULMICORT FLEXHALER: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1189   **SAS Variable Name:** ILP05_25
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	2	16.67	6.31
2	No	10	83.33	93.69
BLANK	Skip filled	1,094		

PULMICORT FLEXHALER: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1190   **SAS Variable Name:** ILP06_25
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	83.33	83.98
2	No	2	16.67	16.02
BLANK	Skip filled	1,094		

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	11	91.67	89.39
401 – 499	Weeks	1	8.33	10.61
BLANK	Skip filled	1,094		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,105		

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	1,105		

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	1,105		

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	1,105		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,105		

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,105		

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
2	No	1	100.00	100.00
BLANK	Skip filled	1,105		

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
7	Don´t know	1	100.00	100.00
BLANK	Skip filled	1,105		

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
301 – 399	Days	1	100.00	100.00
BLANK	Skip filled	1,105		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

TORNALATE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 1239-1240
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_30

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

TRIAMCINOLONE ACETONIDE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back
Column: 1241
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_31

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

TRIAMCINOLONE ACETONIDE: WHEN ATTACK

Survey: CHILD Asthma Call-Back
Column: 1242
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_31

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

TRIAMCINOLONE ACETONIDE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Column: 1243
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_31

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

TRIAMCINOLONE ACETONIDE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1244
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_31

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

TRIAMCINOLONE ACETONIDE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1245-1247
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_31

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

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	1,106		

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
BLANK	Skip filled	1,106		

VANCERIL: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1251 **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
BLANK	Skip filled	1,106		

VANCERIL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1252 **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
BLANK	Skip filled	1,106		

VANCERIL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1253 **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
BLANK	Skip filled	1,106		

VANCERIL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1254-1256 **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
BLANK	Skip filled	1,106		

VANCERIL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back | **Type:** NUM
Column: 1257-1258 | **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	1,106		

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	45	52.33	67.21
2	No	40	46.51	32.60
7	Don´t know	1	1.16	0.19
BLANK	Skip filled	1,020		

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	68	79.07	78.14
2	No	12	13.95	13.79
3	No attack in past 3 months	6	6.98	8.07
BLANK	Skip filled	1,020		

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	46	53.49	51.79
2	No	39	45.35	47.62
7	Don´t know	1	1.16	0.59
BLANK	Skip filled	1,020		

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	26	30.23	21.56
2	No	60	69.77	78.44
BLANK	Skip filled	1,020		

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	30	34.88	33.70
401 – 499	Weeks	30	34.88	39.79
555	Never	5	5.81	5.94
666	Less often than once a week	21	24.42	20.57
BLANK	Skip filled	1,020		

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	53	61.63	71.22
77	Don´t know	2	2.33	0.96
88	None	31	36.05	27.82
BLANK	Skip filled	1,020		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	12	54.55	65.86
2	No	10	45.45	34.14
BLANK	Skip filled	1,084		

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	11	50.00	64.12
2	No	8	36.36	22.81
3	No attack in past 3 months	3	13.64	13.06
BLANK	Skip filled	1,084		

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	7	31.82	16.65
2	No	15	68.18	83.35
BLANK	Skip filled	1,084		

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	16	72.73	45.45
2	No	6	27.27	54.55
BLANK	Skip filled	1,084		

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	16	72.73	73.95
401 – 499	Weeks	3	13.64	5.32
666	Less often than once a week	2	9.09	8.91
777	Don´t know/Not sure	1	4.55	11.83
BLANK	Skip filled	1,084		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	58.33	64.14
2	No	10	41.67	35.86
BLANK	Skip filled	1,082		

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	21	87.50	97.30
2	No	1	4.17	0.81
3	No attack in past 3 months	2	8.33	1.89
BLANK	Skip filled	1,082		

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	16	66.67	56.58
2	No	8	33.33	43.42
BLANK	Skip filled	1,082		

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	5	20.83	26.22
2	No	19	79.17	73.78
BLANK	Skip filled	1,082		

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	8	33.33	49.18
401 – 499	Weeks	8	33.33	23.32
555	Never	1	4.17	0.29
666	Less often than once a week	7	29.17	27.22
BLANK	Skip filled	1,082		

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	11	45.83	61.37
77	Don´t know	2	8.33	6.34
88	None	11	45.83	32.29
BLANK	Skip filled	1,082		

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	1,106		

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,105		

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,105		

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
2	No	1	100.00	100.00
BLANK	Skip filled	1,105		

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
401 – 499	Weeks	1	100.00	100.00
BLANK	Skip filled	1,105		

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	1,106		

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	1,106		

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	16.67	11.37
2	No	9	75.00	87.19
3	No attack in past 3 months	1	8.33	1.44
BLANK	Skip filled	1,094		

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	25.00	17.83
2	No	9	75.00	82.17
BLANK	Skip filled	1,094		

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	11	91.67	98.91
2	No	1	8.33	1.09
BLANK	Skip filled	1,094		

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	11	91.67	98.91
401 – 499	Weeks	1	8.33	1.09
BLANK	Skip filled	1,094		

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	1,106		

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	30	38.96	43.15
2	No	44	57.14	52.03
7	Don´t know	3	3.90	4.81
BLANK	Skip filled	1,029		

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	65	84.42	81.10
2	No	7	9.09	6.76
3	No attack in past 3 months	5	6.49	12.13
BLANK	Skip filled	1,029		

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	39	50.65	45.78
2	No	38	49.35	54.22
BLANK	Skip filled	1,029		

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	13	16.88	10.91
2	No	64	83.12	89.09
BLANK	Skip filled	1,029		

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	17	22.08	20.54
401 – 499	Weeks	31	40.26	44.97
555	Never	2	2.60	0.39
666	Less often than once a week	24	31.17	29.32
777	Don´t know/Not sure	3	3.90	4.78
BLANK	Skip filled	1,029		

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	55	71.43	76.83
77	Don´t know	3	3.90	1.22
88	None	19	24.68	21.95
BLANK	Skip filled	1,029		

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	1,106		

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	4	23.53	39.21
2	No	11	64.71	53.58
3	No attack in past 3 months	2	11.76	7.21
BLANK	Skip filled	1,089		

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	3	17.65	17.44
2	No	14	82.35	82.56
BLANK	Skip filled	1,089		

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	13	76.47	72.01
2	No	4	23.53	27.99
BLANK	Skip filled	1,089		

SYMBICORT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1344-1346
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_42

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	13	76.47	72.01
401 – 499	Weeks	1	5.88	7.89
555	Never	1	5.88	6.63
666	Less often than once a week	2	11.76	13.47
BLANK	Skip filled	1,089		

SYMBICORT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 1347-1348
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_42

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

PILL ACCOLATE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1349
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Type: NUM
SAS Variable Name: PILL01_1

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

PILL AEROLATE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1350
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Type: NUM
SAS Variable Name: PILL01_2

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

PILL ALBUTEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1351
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Type: NUM
SAS Variable Name: PILL01_3

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	100.00	100.00
BLANK	Skip filled	1,104		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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
BLANK	Skip filled	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1	100.00	100.00
BLANK	Skip filled	1,105		

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	1,106		

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,105		

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	6	42.86	54.43
2	No	8	57.14	45.57
BLANK	Skip filled	1,092		

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	1,106		

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	1,106		

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	110	96.49	96.74
2	No	4	3.51	3.26
BLANK	Skip filled	992		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

PILL THEOPHYLLINE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1374
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Type: NUM
SAS Variable Name: PILL01_35

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

PILL THEOSPAN: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1375
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Type: NUM
SAS Variable Name: PILL01_37

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

PILL T-PHYL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1376
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Type: NUM
SAS Variable Name: PILL01_40

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

PILL UNIPHYL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1377
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Type: NUM
SAS Variable Name: PILL01_42

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

PILL VENTOLIN: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1378
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Type: NUM
SAS Variable Name: PILL01_43

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

PILL VOLMAX: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1379
Prologue:
Description: Q8.22   In the past 3 months, did you take [MEDICATION LISTED IN PILLS_MD] on a regular schedule every day?

Type: NUM
SAS Variable Name: PILL01_44

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	118	87.41	85.80
2	No	9	6.67	10.10
3	No attack in past 3 months	6	4.44	3.30
7	Don´t know	2	1.48	0.80
BLANK	Skip filled	971		

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	46	34.07	33.24
2	No	86	63.70	65.78
7	Don´t know	3	2.22	0.98
BLANK	Skip filled	971		

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	47	34.81	37.07
401 – 499	Weeks	28	20.74	15.96
555	Never	3	2.22	1.70
666	Less often than once a week	49	36.30	43.05
777	Don´t know/Not sure	8	5.93	2.22
BLANK	Skip filled	971		

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	1,106		

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	1,106		

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	1,106		

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	49.07
2	No	2	33.33	50.93
BLANK	Skip filled	1,100		

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	44.84
2	No	5	83.33	55.16
BLANK	Skip filled	1,100		

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	44.84
401 – 499	Weeks	1	16.67	6.14
666	Less often than once a　week	4	66.67	49.02
BLANK	Skip filled	1,100		

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	1,106		

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	1,106		

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	1,106		

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	9	90.00	84.89
2	No	1	10.00	15.11
BLANK	Skip filled	1,096		

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	7	70.00	54.94
2	No	3	30.00	45.06
BLANK	Skip filled	1,096		

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	6	60.00	47.80
666	Less often than once a week	3	30.00	41.99
777	Don´t know/Not sure	1	10.00	10.21
BLANK	Skip filled	1,096		

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	1,105		

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	1,105		

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
401 – 499	Weeks	1	100.00	100.00
BLANK	Skip filled	1,105		

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	3	100.00	100.00
BLANK	Skip filled	1,103		

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
1	Yes	1	33.33	68.97
2	No	2	66.67	31.03
BLANK	Skip filled	1,103		

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	33.33	25.04
666	Less often than once a week	2	66.67	74.96
BLANK	Skip filled	1,103		

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	1,106		

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	1,106		

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	1,106		

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	2	66.67	14.30
2	No	1	33.33	85.70
BLANK	Skip filled	1,103		

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	1	33.33	7.92
2	No	1	33.33	6.38
7	Don´t know	1	33.33	85.70
BLANK	Skip filled	1,103		

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	1	33.33	7.92
401 – 499	Weeks	1	33.33	6.38
666	Less often than once a week	1	33.33	85.70
BLANK	Skip filled	1,103		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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	1,106		

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,105		

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	1,105		

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
301 – 399	Days	1	100.00	100.00
BLANK	Skip filled	1,105		

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	9	47.37	54.99
2	No	8	42.11	42.64
3	No attack in past 3 months	2	10.53	2.37
BLANK	Skip filled	1,087		

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	10	52.63	44.05
2	No	9	47.37	55.95
BLANK	Skip filled	1,087		

PULMICORT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back

Column: 1423

Prologue:

Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Type: NUM

SAS Variable Name: NEB03_13

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	11	57.89	76.51
401 – 499	Weeks	1	5.26	2.38
555	Never	1	5.26	6.97
666	Less often than once a week	5	26.32	13.19
777	Don´t know/Not sure	1	5.26	0.94
BLANK	Skip filled	1,087		

TORNALATE: WHEN ATTACK

Survey: CHILD Asthma Call-Back

Column: 1424

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?

Type: NUM

SAS Variable Name: NEB01_14

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

TORNALATE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back

Column: 1425

Prologue:

Description: Q8.29   In the past 3 months, did he/she take [MEDICINE FROM NEB_ID SERIES] on a regular schedule every day?

Type: NUM

SAS Variable Name: NEB02_14

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

TORNALATE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back

Column: 1426

Prologue:

Description: Q8.30   How many times per day or per week does he/she use [MEDICINE FROM NEB_ID SERIES]?

Type: NUM

SAS Variable Name: NEB03_14

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	1,106		

VENTOLIN: WHEN ATTACK

Survey: CHILD Asthma Call-Back

Column: 1427

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?

Type: NUM

SAS Variable Name: NEB01_15

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	No attack in past 3 months	1	100.00	100.00
BLANK	Skip filled	1,105		

VENTOLIN: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back

Column: 1428

Type: NUM

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
2	No	1	100.00	100.00
BLANK	Skip filled	1,105		

VENTOLIN: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back

Column: 1429

Type: NUM

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
666	Less often than once a week	1	100.00	100.00
BLANK	Skip filled	1,105		

XOPENEX: WHEN ATTACK

Survey: CHILD Asthma Call-Back

Column: 1430

Type: NUM

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	95.24	96.69
3	No attack in past 3 months	1	4.76	3.31
BLANK	Skip filled	1,085		

XOPENEX: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back

Column: 1431

Type: NUM

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	6	28.57	26.90
2	No	15	71.43	73.10
BLANK	Skip filled	1,085		

XOPENEX: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back

Column: 1432

Type: NUM

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	6	28.57	35.43
401 – 499	Weeks	3	14.29	20.89
666	Less often than once a week	11	52.38	42.08
777	Don´t know/Not sure	1	4.76	1.60
BLANK	Skip filled	1,085		

INTERIM CHILD ASTHMA CALL-BACK WEIGHT

Survey: CHILD Asthma Call-Back
Column: 1433-1442
Prologue:
Description: INTERIM CHILD ASTHMA CALL-BACK WEIGHT

Type: NUM
SAS Variable Name: CWEIGHT_IN

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN	Interim child asthma call-back weight	1,106	100.00	100.00

CHILD ASTHMA CALL-BACK POST STRATIFICATION FACTOR

Survey: CHILD Asthma Call-Back
Column: 1443-1452
Prologue:
Description: CHILD ASTHMA CALL-BACK POST STRATIFICATION FACTOR

Type: NUM
SAS Variable Name: CPOST

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN	Child asthma call-back post stratification factor	1,106	100.00	100.00

REGIONS COLLAPSED TO 1 REGION FOR ASTHMA CALL-BACK.

Survey: CHILD Asthma Call-Back
Column: 1453
Prologue:
Description: REGIONS COLLAPSED TO 1 REGION FOR ASTHMA CALL-BACK.

Type: NUM
SAS Variable Name: REGION_F

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No region collapsed	1,106		

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	1,106	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	1,106	100.00	100.00

FINAL LAND LINE ONLY CHILD ASTHMA CALL-BACK WEIGHT

Survey: CHILD Asthma Call-Back
Column: 1458-1467
Prologue:
Description: FINAL LAND LINE ONLY CHILD ASTHMA CALL-BACK WEIGHT

Type: NUM
SAS Variable Name: CLANDWT_F

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN	Final child asthma call-back land line only weight	1,106	100.00	100.00

CHILD ASTHMA CALL-BACK AGE GROUPS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1468   **SAS Variable Name:** CAGEG_F4
Prologue:
Description: CHILD ASTHMA CALL-BACK AGE GROUPS

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Age 0 - 4	67	6.06	10.07
2	Age 5 - 9	277	25.05	32.47
3	Age 10 - 14	426	38.52	32.38
4	Age 15 - 17	336	30.38	25.08

CHILD ASTHMA CALL-BACK AGE GROUPS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1469   **SAS Variable Name:** CAGEG_F3
Prologue:
Description: CHILD ASTHMA CALL-BACK AGE GROUPS

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Age 0 - 6	70	6.33	10.60
2	Age 7 - 12	277	25.05	32.47
3	age 13 - 17	759	68.63	56.92

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	216	32.05	42.26
2	Age 10 - 17	458	67.95	57.74
BLANK	Missing	432		

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	1,106		

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	1,106	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	850	76.85	77.70
2	Inactive Asthma	256	23.15	22.30