United States

2010 Codebook Report

CHILD Asthma Call-Back Survey

December 12, 2012

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	85	3.70	3.85
13	Georgia	77	3.35	7.74
15	Hawaii	104	4.52	1.50
18	Indiana	120	5.22	6.58
20	Kansas	111	4.83	2.30
24	Maryland	97	4.22	5.38
26	Michigan	146	6.35	10.38
28	Mississippi	96	4.17	3.15
30	Montana	81	3.52	0.66
31	Nebraska	143	6.22	1.22
34	New Jersey	149	6.48	6.32
35	New Mexico	93	4.04	1.94
40	Oklahoma	90	3.91	3.88
42	Pennsylvania	117	5.09	12.28
48	Texas	208	9.04	24.67
49	Utah	183	7.96	2.55
50	Vermont	110	4.78	0.56
53	Washington	290	12.61	5.04

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	198	8.61	9.79
2	February	201	8.74	11.83
3	March	180	7.83	6.73
4	April	222	9.65	9.40
5	May	161	7.00	7.58
6	June	181	7.87	6.70
7	July	208	9.04	10.86
8	August	157	6.83	5.25
9	September	181	7.87	6.39
10	October	219	9.52	10.10
11	November	201	8.74	9.31
12	December	191	8.30	6.06

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	138	6.00	6.12
2	February	192	8.35	12.18
3	March	223	9.70	9.40
4	April	198	8.61	7.88
5	May	183	7.96	8.46
6	June	179	7.78	7.37
7	July	206	8.96	9.98
8	August	182	7.91	6.41
9	September	189	8.22	6.81
10	October	187	8.13	8.22
11	November	226	9.83	9.35
12	December	197	8.57	7.81

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		2,300	100.00	100.00

YEAR OF ASTHMA CALL-BACK INTERVIEW

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
2010	Interview year	2,199	95.61	96.09
2011	Interview year	101	4.39	3.91

INTERVIEWER ID OF ASTHMA CALL-BACK

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN		2,300	100.00	100.00

DISPOSITION OF ASTHMA CALL-BACK

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
110	Complete	2,288	99.48	98.44
120	Partial complete	12	0.52	1.56

ANNUAL SEQUENCE NUMBER

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN		2,300	100.00	100.00

NUMBER OF ATTEMPTS OF ASTHMA CALL-BACK

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN		2,300	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	2,198	95.57	96.77
2	No	102	4.43	3.23

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	102	100.00	100.00
BLANK	Not asked or missing	2,198		

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	1,261	95.10	93.00
2	Alternate respondent is the MKP and will continue	65	4.90	7.00
BLANK	Not asked or missing	974		

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	130	100.00	100.00
BLANK	Not asked or missing	2,170		

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	130	100.00	100.00
BLANK	Not asked or missing	2,170		

STILL HAVE ASTHMA INCONSISTENT WITH BRFSS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 45 **SAS Variable Name:** CUR_ASTH
Prologue: FOR THOSE WHO DISAGREE WITH BRFSS ASTHMA STATUS: I would like to repeat the questions from the previous survey now to make sure [child's name] qualifies for this study.
Description: Q2.2   Does [he/she] still have asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	83	63.85	66.19
2	No	42	32.31	31.07
7	Don´t know/Not sure	5	3.85	2.73
BLANK	Not asked or missing	2,170		

RELATIONSHIP TO CHILD FROM QUESTION

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 46   **SAS Variable Name:** RELATION
Prologue:
Description: Q2.3   What is your relationship to the child?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Mother (Birth/Adoptive/Step)	496	76.66	79.05
2	Father (Birth/Adoptive/Step)	117	18.08	16.83
4	Grandparent (Father/Mother)	25	3.86	1.98
6	Unrelated	9	1.39	2.14
BLANK	Not asked or missing	1,653		

LEGAL GUARDIAN

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 47   **SAS Variable Name:** GUARDIAN
Prologue:
Description: Q2.4   Are you the legal guardian for [child's name]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	162	99.39	99.55
2	No	1	0.61	0.45
BLANK	Not asked or missing	2,137		

PERMISSION TO COMBINE THE ANSWER WITH BRFSS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 48   **SAS Variable Name:** PERMISS
Prologue:
Description: Q2.5   May we combine your answers to this survey with your answers from the survey you did a few weeks ago?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,022	44.43	54.92
2	No	1	0.04	0.06
7	Don´t know/Not sure	1,277	55.52	45.02

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	1,902	82.70	77.77
777	Don´t know	51	2.22	2.14
888	Less than 1 year old	347	15.09	20.09

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	168	7.30	10.27
2	One to five years ago	768	33.39	38.34
3	More than 5 years ago	1,350	58.70	50.88
7	Don't know	12	0.52	0.47
9	Refused	2	0.09	0.04

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	1,504	65.39	70.56
5	One year to less than 3 years ago	409	17.78	15.31
6	Three years to five years ago	174	7.57	6.21
7	More than five years ago	190	8.26	7.47
77	Don´t know	13	0.57	0.23
88	Never	9	0.39	0.22
99	Refused	1	0.04	0.01

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	546	23.74	23.61
2	1-6 days ago	181	7.87	8.15
3	1 week to less than 3 months ago	388	16.87	17.36
4	3 months to less than 1 year ago	372	16.17	19.10
5	1 year to less than 3 years ago	316	13.74	12.98
6	3 years to 5 years ago	203	8.83	7.60
7	More than 5 years ago	244	10.61	9.40
77	Don´t know	23	1.00	0.50
88	Never	26	1.13	1.29
99	Refused	1	0.04	0.02

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	170	7.39	7.26
2	1-6 days ago	187	8.13	8.34
3	1 week to less than 3 months ago	633	27.52	28.71
4	3 months to less than 1 year ago	451	19.61	20.72
5	1 year to less than 3 years ago	349	15.17	14.49
6	3 years to 5 years ago	191	8.30	7.16
7	More than 5 years ago	252	10.96	9.37
77	Don´t know	29	1.26	1.22
88	Never	37	1.61	2.68
99	Refused	1	0.04	0.06

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	718	31.22	31.16
30	Every day	65	2.83	2.41
66	No symptoms past one year, skip filled	829	36.04	33.70
77	Don't know	36	1.57	0.90
88	No symptoms in the past 30 days	201	8.74	11.12
100	Symptoms 3 months to 1 year ago, skip filled	451	19.61	20.72

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	30	1.30	0.84
2	No	32	1.39	1.44
6	Last symptoms one+ years ago, skip filled	829	36.04	33.70
7	Don't know	3	0.13	0.12
10	Last symptoms 3 months - 1 year ago, skip filled	451	19.61	20.72
11	No symptoms 'SYMP_30D' skip filled	201	8.74	11.12
12	1-29 'SYMP_30D' skip filled	718	31.22	31.16
77	Don't know 'SYMP_30D' skip filled	36	1.57	0.90

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	358	15.57	18.50
66	No symptoms past one year, skip filled	829	36.04	33.70
77	Don't know	25	1.09	0.82
88	None	436	18.96	15.15
100	Symptoms 3 months to 1 year ago, skip filled	451	19.61	20.72
111	No symptoms in the past 30 days, skip filled	201	8.74	11.12

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	2,136	92.87	94.34
77	Don´t know	29	1.26	0.53
88	None	133	5.78	5.05
99	Refused	2	0.09	0.09

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	881	38.30	41.44
2	No	572	24.87	23.78
6	No symptoms past 1 year, skip filled	829	36.04	33.70
7	Don't know	17	0.74	1.05
9	Refused	1	0.04	0.02

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	632	27.48	29.20
666	No symptoms past 1 year, skip filled	829	36.04	33.70
777	Don't know	22	0.96	0.97
888	None	226	9.83	11.25
999	Refused	1	0.04	0.01
1111	No episode/asthma attack past year, skip filled	590	25.65	24.86

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	315	13.70	12.74
201 – 299	Hours	191	8.30	8.79
301 – 399	Days	256	11.13	13.10
401 – 499	Weeks	70	3.04	4.41
555	Never	2	0.09	0.02
666	No symptoms past 1 year, skip filled	829	36.04	33.70
777	Don't know	46	2.00	2.38
999	Refused	1	0.04	0.01
1111	No episode/asthma attack past year, skip filled	590	25.65	24.86

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	239	10.39	10.65
2	Longer	107	4.65	5.26
3	About the same	517	22.48	24.82
4	The most recent attack was actually the first attack	12	0.52	0.63
6	No symptoms past year, skip filled	829	36.04	33.70
7	Don't know	5	0.22	0.09
9	Refused	1	0.04	0.01
11	No episode/asthma attack past year, skip filled	590	25.65	24.86

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	2,213	96.22	96.68
2	No	84	3.65	3.13
7	Don´t know/Not sure	2	0.09	0.13
9	Refused	1	0.04	0.07

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	1,437	62.48	61.21
2	Medicaid/Medicare	448	19.48	22.53
3	CHIP replace with state specific name	125	5.43	6.75
4	Other	192	8.35	5.89
5	No insurance at time of interview, skip filled	87	3.78	3.32
7	Don't know	6	0.26	0.18
9	Refused	5	0.22	0.11

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	101	4.39	5.00
2	No	2,108	91.65	91.28
5	No insurance at time of interview, skip filled	87	3.78	3.32
7	Don't know	4	0.17	0.39

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	1,247	54.22	56.69
2	No	1,013	44.04	41.57
7	Don't know/Not sure	38	1.65	1.71
9	Refused	2	0.09	0.02

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	224	9.74	10.18
2	No	2,046	88.96	88.10
7	Don't know/Not sure	28	1.22	1.70
9	Refused	2	0.09	0.02

ACTIVITY LIMITATION

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 85   **SAS Variable Name:** ACT_DAYS
Prologue:
Description: Q5.6   During the past 12 months, 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	860	37.39	36.47
2	A little	711	30.91	33.36
3	A moderate amount	198	8.61	8.52
4	A lot	50	2.17	1.97
5	No current asthma, nothing happened past year, skip filled	474	20.61	19.17
7	Don't know	5	0.22	0.46
9	Refused	2	0.09	0.06

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	1,222	53.13	55.11
555	No current asthma, nothing happened past year, skip filled	474	20.61	19.17
666	No MD visit past year, skip filled	314	13.65	10.21
777	Don't know	17	0.74	0.83
888	None	272	11.83	14.65
999	Refused	1	0.04	0.03

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	257	11.17	15.20
2	No	1,250	54.35	55.30
5	No current asthma, nothing happened past year, skip filled	474	20.61	19.17
6	No MD visit past year, skip filled	314	13.65	10.21
7	Don't know	5	0.22	0.13

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	257	11.17	15.20
555	No current asthma, nothing happened past year, skip filled	474	20.61	19.17
666	No MD visit past year, skip filled	314	13.65	10.21
677	MD visit, no ER visit past year, skip filled	1,250	54.35	55.30
777	Don't know	5	0.22	0.13

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	507	22.04	27.57
555	No current asthma, nothing happened past year, skip filled	474	20.61	19.17
666	No MD visit past year, skip filled	314	13.65	10.21
777	Don't know	13	0.57	0.65
888	None	991	43.09	42.40
999	Refused	1	0.04	0.01

HOSPITAL VISIT

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

Column: 96   **SAS Variable Name:** HOSP_VST

Prologue:

Description: Q5.11 During the past 12 months, that is since [one year ago today], has [child's name] had to stay overnight in a hospital because of [his/her] asthma? Do not include an overnight stay in the emergency room.

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	55	2.39	3.70
2	No	1,193	51.87	54.92
4	MD visit, no symptoms past year, skip filled	260	11.30	11.93
5	No current asthma, nothing happened past year, skip filled	474	20.61	19.17
6	No MD visit past year, skip filled	314	13.65	10.21
7	Don't know	4	0.17	0.08

NUMBER OF HOSPITAL VISITS

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

Column: 97-99   **SAS Variable Name:** HOSPTIME

Prologue:

Description: Q5.12   During the past 12 months, how many different times did [he/she] stay in any hospital overnight or longer because of [his/her] asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 365	Times	55	2.39	3.70
444	MD visit, no symptoms past year, skip filled	260	11.30	11.93
455	MD visit, symptoms, no hospital visit past year, skip filled	1,193	51.87	54.92
555	No current asthma, nothing happened past year, skip filled	474	20.61	19.17
666	No MD visit past year, skip filled	314	13.65	10.21
777	Don't know	4	0.17	0.08

HOSPITAL FOLLOW-UP

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

Column: 100-101   **SAS Variable Name:** HOSPPLAN

Prologue:

Description: Q5.13   The last time [he/she] left the hospital, did a health professional talk with you or [child's name] about how to prevent serious attacks in the future?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	42	1.83	3.00
2	No	12	0.52	0.67
4	MD visit, no symptoms past year, skip filled	260	11.30	11.93
5	No current asthma, nothing happened past year, skip filled	474	20.61	19.17
6	No MD visit past year, skip filled	314	13.65	10.21
7	Don't know	5	0.22	0.11
45	MD visit, symptoms, no hospital visit past year, skip filled	1,193	51.87	54.92

EVER TAUGHT RECOGNIZE EARLY SIGN OR SYMPTOMS

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

Column: 103   **SAS Variable Name:** TCH_SIGN

Prologue: Has a doctor or other health professional ever taught you or [child's name] . . .

Description: Q6.1   . . . how to recognize early signs or symptoms of an asthma episode?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,787	77.70	79.73
2	No	467	20.30	18.98
7	Don´t know/Not sure	46	2.00	1.29

EVER TAUGHT WHAT TO DO DURING ASTHMA EPISODE OR ATTACK

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

Column: 104   **SAS Variable Name:** TCH_RESP

Prologue: Has a doctor or other health professional ever taught you or [child's name] . . .

Description: Q6.2   . . . what to do during an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,903	82.74	84.68
2	No	368	16.00	14.57
7	Don´t know/Not sure	29	1.26	0.76

EVER TAUGHT HOW TO USE A PEAK FLOW

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

Column: 105   **SAS Variable Name:** TCH_MON

Prologue: A peak flow meter is a hand held device that measures how quickly [child's name] can blow air out of [his/her] lungs. Has a doctor or other health professional ever taught you or [child's name] . . .

Description: Q6.3   . . . how to use a peak flow meter to adjust [his/her] daily medications?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	892	38.78	35.13
2	No	1,375	59.78	63.40
7	Don´t know/Not sure	30	1.30	1.32
9	Refused	3	0.13	0.15

EVER GIVEN AN ASTHMA ACTION PLAN

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

Column: 106   **SAS Variable Name:** MGT_PLAN

Prologue: An asthma action plan, or asthma management plan, is a form with instructions about when to change the amount or type of medicine, when to call the doctor for advice, and when to go to the emergency room.

Description: Q6.4   Has a doctor or other health professional EVER given you or [child's name] an asthma action plan?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	954	41.48	44.34
2	No	1,296	56.35	54.33
7	Don´t know/Not sure	49	2.13	1.25
9	Refused	1	0.04	0.08

EVER TAKEN A COURSE TO MANAGE ASTHMA

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

Column: 107   **SAS Variable Name:** MGT_CLAS

Prologue:

Description: Q6.5   Have you or [child's name] ever taken a course or class on how to manage [his/her] asthma?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	258	11.22	11.74
2	No	2,034	88.43	88.08
7	Don´t know/Not sure	7	0.30	0.09
9	Refused	1	0.04	0.08

AIR CLEANER USED

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

Column: 109   **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	629	27.35	28.78
2	No	1,661	72.22	70.80
7	Don´t know/Not sure	10	0.43	0.42

DEHUMIDIFIER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 110   **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	599	26.04	29.18
2	No	1,695	73.70	70.64
7	Don´t know/Not sure	6	0.26	0.17

EXHAUST FAN USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 111   **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	1,467	63.78	67.79
2	No	827	35.96	32.12
7	Don´t know/Not sure	6	0.26	0.09

GAS USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 112   **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	938	40.78	47.73
2	No	1,362	59.22	52.27

SAW OR SMELLED MOLD PAST 30 DAYS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 113   **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	171	7.43	6.63
2	No	2,124	92.35	93.30
7	Don´t know/Not sure	5	0.22	0.08

INDOOR PETS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 114   **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	1,449	63.00	56.66
2	No	851	37.00	43.34

PETS ALLOWED IN BEDROOM

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 115   **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	932	40.52	34.77
2	No	498	21.65	21.44
3	Some are/some aren't	18	0.78	0.43
6	No pets, skip coded	851	37.00	43.34
7	Don't know	1	0.04	0.02

SAW COCKROACH INSIDE CHILD'S HOME PAST 30 DAYS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 116   **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	153	6.65	6.76
2	No	2,146	93.30	93.16
7	Don´t know/Not sure	1	0.04	0.08

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

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 117   **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	134	5.83	4.42
2	No	2,163	94.04	95.48
7	Don´t know/Not sure	3	0.13	0.11

FIREPLACE OR WOOD STOVE USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 118   **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	484	21.04	18.15
2	No	1,813	78.83	81.44
7	Don´t know/Not sure	3	0.13	0.41

GAS APPLIANCE USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 119   **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	113	4.91	6.11
2	No	2,180	94.78	93.72
7	Don´t know/Not sure	7	0.30	0.17

ANYONE SMOKED INSIDE CHILD'S HOME

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 120
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	155	6.74	6.82
2	No	2,145	93.26	93.18

EVER ADVISED CHANGE THINGS IN CHILD'S HOME

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 121
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	792	34.43	37.28
2	No	1,496	65.04	62.25
7	Don´t know/Not sure	11	0.48	0.38
9	Refused	1	0.04	0.08

USE A MATTRESS COVER

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 122
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	774	33.65	32.74
2	No	1,494	64.96	65.24
7	Don´t know/Not sure	32	1.39	2.02

USE A PILLOW COVER

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 123
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	704	30.61	29.66
2	No	1,586	68.96	69.86
7	Don´t know/Not sure	10	0.43	0.48

CARPETING OR RUGS IN CHILD'S BEDROOM

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 124   **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	1,651	71.78	72.82
2	No	648	28.17	27.18
7	Don´t know/Not sure	1	0.04	0.01

WASH WATER TEMPERATURE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 125   **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	523	22.74	24.16
2	Warm	751	32.65	32.27
3	Hot	911	39.61	37.83
4	Varies	86	3.74	4.58
7	Don´t know/Not sure	29	1.26	1.16

USE AN EXHAUST FAN IN CHILD'S BATHROOM

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 126   **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	1,337	58.13	59.59
2	No or "No fan"	936	40.70	39.61
7	Don´t know/Not sure	27	1.17	0.79

EVER USED OVER-THE-COUNTER MEDICATION

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 128   **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	414	18.00	17.11
2	No	1,839	79.96	80.74
5	Never took asthma medication, skip filled	26	1.13	1.29
7	Don't know	20	0.87	0.83
9	Refused	1	0.04	0.03

EVER USED PRESCRIPTION INHALER

Survey: CHILD Asthma Call-Back
Column: 129
Prologue:
Description: Q8.2　Has [he/she] ever used a prescription inhaler?

Type: NUM
SAS Variable Name: INHALERE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,996	86.78	82.48
2	No	273	11.87	15.80
5	Never took asthma medication, skip filled	26	1.13	1.29
7	Don't know	5	0.22	0.43

PROFESSIONAL INHALER INSTRUCTION

Survey: CHILD Asthma Call-Back
Column: 130
Prologue:
Description: Q8.3　Did a health professional show [him/her] how to use the inhaler?

Type: NUM
SAS Variable Name: INHALERH

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,900	82.61	77.70
2	No	91	3.96	4.50
5	Never took asthma medication, skip filled	26	1.13	1.29
6	Never used prescription inhaler, skip filled	278	12.09	16.22
7	Don't know	4	0.17	0.21
9	Refused	1	0.04	0.07

INHALER USE WATCHED

Survey: CHILD Asthma Call-Back
Column: 131
Prologue:
Description: Q8.4　Did a doctor or other health professional watch [him/her] use the inhaler?

Type: NUM
SAS Variable Name: INHALERW

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,584	68.87	65.76
2	No	336	14.61	14.16
5	Never took asthma medication, skip filled	26	1.13	1.29
6	Never used prescription inhaler, skip filled	278	12.09	16.22
7	Don't know	74	3.22	2.42
9	Refused	2	0.09	0.15

MEDICATION IN HAND

Survey: CHILD Asthma Call-Back
Column: 132
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?

Type: NUM
SAS Variable Name: SCR_MED1

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	713	31.00	29.71
2	No	69	3.00	2.91
3	Respondent knows the meds	321	13.96	16.14
4	No asthma med. past 3 months, skip filled	1,159	50.39	49.59
5	Never took asthma medication, skip filled	26	1.13	1.29
7	Don't know	8	0.35	0.32
9	Refused	4	0.17	0.04

HAVE ALL THE MEDICATIONS

Survey: CHILD Asthma Call-Back
Column: 134-135
Prologue:

Type: NUM
SAS Variable Name: SCR_MED3

Description: Q8.7　　Do you have all the medications?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes, I have all the medications	656	28.52	27.21
2	Yes, I have some of the medications but not all	38	1.65	1.72
3	No	19	0.83	0.78
4	No asthma med. past 3 months, skip filled	1,159	50.39	49.59
5	Never took asthma medication, skip filled	26	1.13	1.29
10	Know or no handy asthma medicines, skip filled	402	17.48	19.41

TAKEN PRESCRIPTION INHALER PAST 3 MONTHS

Survey: CHILD Asthma Call-Back
Column: 136
Prologue:

Type: NUM
SAS Variable Name: INH_SCR

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	909	39.52	37.63
2	No inhaler in past 3 months	92	4.00	4.75
4	No asthma med. past 3 months, skip filled	1,159	50.39	49.59
5	Never took asthma medication, skip filled	26	1.13	1.29
6	Asthma med. past 3 months, never used inhaler, skip filled	105	4.57	6.37
7	Don't know	7	0.30	0.16
9	Refused	2	0.09	0.22

TAKEN MEDICATION IN PILL PAST 3 MONTHS

Survey: CHILD Asthma Call-Back
Column: 137
Prologue:

Type: NUM
SAS Variable Name: PILLS

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, pills in past 3 months	349	15.17	15.38
2	No pills in past 3 months	760	33.04	33.53
4	No asthma med. past 3 months, skip filled	1,159	50.39	49.59
5	Never took asthma medication, skip filled	26	1.13	1.29
7	Don't know	5	0.22	0.19
9	Refused	1	0.04	0.01

TAKEN MEDICATION IN SYRUP PAST 3 MONTHS

Survey: CHILD Asthma Call-Back
Column: 138
Prologue:

Type: NUM
SAS Variable Name: SYRUP

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, syrup in past 3 months	75	3.26	5.00
2	No syrup in past 3 months	1,038	45.13	44.05
4	No asthma med. past 3 months, skip filled	1,159	50.39	49.59
5	Never took asthma medication, skip filled	26	1.13	1.29
7	Don't know	2	0.09	0.06

TAKEN MEDICATION WITH A NEBULIZER PAST 3 MONTHS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 139   **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, nebulizer in past 3 months	410	17.83	22.49
2	No nebulizer in past 3 months	700	30.43	26.53
4	No asthma med. past 3 months, skip filled	1,159	50.39	49.59
5	Never took asthma medication, skip filled	26	1.13	1.29
7	Don't know	5	0.22	0.10

NEBULIZER AT HOME

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 140   **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	398	17.30	21.64
2	No	12	0.52	0.85
4	No asthma med. past 3 months, skip filled	1,159	50.39	49.59
5	Never took asthma medication, skip filled	26	1.13	1.29
8	No neb. in past 3 months, skip filled	705	30.65	26.63

NEBULIZER AT DOCTOR'S OFFICE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 141   **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	131	5.70	8.95
2	No	278	12.09	13.54
4	No asthma med. past 3 months, skip filled	1,159	50.39	49.59
5	Never took asthma medication, skip filled	26	1.13	1.29
7	Don´t know/Not sure	1	0.04	0.01
8	No neb. in past 3 months, skip filled	705	30.65	26.63

NEBULIZER IN EMERGENCY ROOM

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 142   **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	90	3.91	5.11
2	No	318	13.83	17.31
4	No asthma med. past 3 months, skip filled	1,159	50.39	49.59
5	Never took asthma medication, skip filled	26	1.13	1.29
7	Don´t know/Not sure	2	0.09	0.07
8	No neb. in past 3 months, skip filled	705	30.65	26.63

NEBULIZER AT WORK OR SCHOOL

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

Column: 143   **SAS Variable Name:** NEB_PLCD

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

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	67	2.91	4.80
2	No	343	14.91	17.69
4	No asthma med. past 3 months, skip filled	1,159	50.39	49.59
5	Never took asthma medication, skip filled	26	1.13	1.29
8	No neb. in past 3 months, skip filled	705	30.65	26.63

NEBULIZER AT ANY OTHER PLACE

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

Column: 144   **SAS Variable Name:** NEB_PLCE

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

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	75	3.26	4.31
2	No	334	14.52	18.17
4	No asthma med. past 3 months, skip filled	1,159	50.39	49.59
5	Never took asthma medication, skip filled	26	1.13	1.29
7	Don´t know/Not sure	1	0.04	0.01
8	No neb. in past 3 months, skip filled	705	30.65	26.63

COST BARRIER: PRIMARY CARE DOCTOR

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

Column: 146   **SAS Variable Name:** ASMDCOST

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	61	2.66	4.12
2	No	1,741	76.06	76.10
5	No current asthma, skip filled	474	20.71	19.47
7	Don't know	13	0.57	0.31
BLANK	Partial complete	11		

COST BARRIER: SPECIALIST

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

Column: 147   **SAS Variable Name:** ASSPCOST

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	38	1.66	2.00
2	No	1,766	77.15	78.28
5	No current asthma, skip filled	474	20.71	19.47
7	Don't know	11	0.48	0.25
BLANK	Partial complete	11		

COST BARRIER: MEDICATION

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 148   **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	119	5.20	7.20
2	No	1,686	73.66	73.13
5	No current asthma, skip filled	474	20.71	19.47
7	Don't know	10	0.44	0.20
BLANK	Partial complete	11		

CURRENT GO TO SCHOOL OUTSIDE HOME

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 150   **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	2,090	91.31	88.30
2	No	198	8.65	11.64
7	Don't know/Not sure	1	0.04	0.06
BLANK	Partial complete	11		

REASON NOT IN SCHOOL NOW

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 151   **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	108	4.72	8.63
2	Home schooled	40	1.75	1.18
3	Unable to attend for health reason	7	0.31	0.24
4	On vacation or break	16	0.70	0.64
5	Other	27	1.18	0.96
6	Now goes to outside school, skip filled	2,090	91.31	88.30
7	Don't know/Not sure	1	0.04	0.06
BLANK	Partial complete	11		

GONE TO SCHOOL OUTSIDE HOME PAST 12 MONTHS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 152   **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	28	1.22	0.98
2	No	22	0.96	0.86
3	Home school, skip filled	40	1.75	1.18
5	Not old enough for school, skip filled	108	4.72	8.63
6	Now goes to outside school, skip filled	2,090	91.31	88.30
7	Don't know	1	0.04	0.06
BLANK	Partial complete	11		

WHAT GRADE WAS CHILD IN LAST TIME

Survey: CHILD Asthma Call-Back
Column: 153-154
Prologue:

Type: NUM
SAS Variable Name: SCHGRADE

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	1,912	83.53	74.97
44	No school past year, skip filled	22	0.96	0.86
55	Not old enough for school, skip filled	108	4.72	8.63
66	Kindergarten	92	4.02	5.86
77	Don't know	8	0.35	0.47
88	Preschool	138	6.03	8.94
99	Refused	9	0.39	0.26
BLANK	Partial complete	11		

HOW MANY DAYS MISSED SCHOOL

Survey: CHILD Asthma Call-Back
Column: 155-157
Prologue:

Type: NUM
SAS Variable Name: MISS_SCHL

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	663	29.03	31.95
444	No school past year, skip filled	22	0.96	0.86
555	Not old enough for school, skip filled	108	4.73	8.64
666	No current asthma, skip filled	457	20.01	18.79
777	Don't know	22	0.96	0.68
888	None	1,010	44.22	38.99
999	Refused	2	0.09	0.09
BLANK	Partial complete	16		

WRITTEN ASTHMA ACTION PLAN IN SCHOOL

Survey: CHILD Asthma Call-Back
Column: 158

Type: NUM
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	657	28.77	28.48
2	No	950	41.59	39.11
3	Home school, skip filled	40	1.75	1.18
4	No school past year, skip filled	22	0.96	0.86
5	Not old enough for school, skip filled	108	4.73	8.64
6	No current asthma, skip filled	444	19.44	18.55
7	Don't know	63	2.76	3.19
BLANK	Partial complete	16		

ASTHMA MEDICATION ALLOWED WITH CHILD IN SCHOOL

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 159   **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	867	37.96	32.37
2	No	610	26.71	30.00
3	Home school, skip filled	40	1.75	1.18
4	No school past year, skip filled	22	0.96	0.86
5	Not old enough for school, skip filled	108	4.73	8.64
6	No current asthma, skip filled	444	19.44	18.55
7	Don't know	193	8.45	8.41
BLANK	Partial complete	16		

PETS IN CLASSROOM

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 160   **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	76	3.32	5.46
2	No	1,942	84.84	79.63
3	Home school, skip filled	40	1.75	1.18
4	No school past year, skip filled	22	0.96	0.86
5	Not old enough for school, skip filled	108	4.72	8.63
7	Don't know	101	4.41	4.25
BLANK	Partial complete	11		

AWARE OF MOLD PROBLEM IN SCHOOL

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 161   **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	42	1.83	1.74
2	No	2,031	88.73	85.04
3	Home school, skip filled	40	1.75	1.18
4	No school past year, skip filled	22	0.96	0.86
5	Not old enough for school, skip filled	108	4.72	8.63
7	Don't know	46	2.01	2.56
BLANK	Partial complete	11		

GO TO DAYCARE OUTSIDE HOME

Survey: CHILD Asthma Call-Back
Column: 162
Prologue:

Type: NUM
SAS Variable Name: DAYCARE

Description: Q10.10   Does [child's name] go to day care outside [his/her] home?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	201	8.78	12.07
2	No	717	31.32	40.50
3	Home school, skip filled	40	1.75	1.18
6	Over age ten, skip filled	1,287	56.23	43.83
7	Don't know	44	1.92	2.43
BLANK	Partial complete	11		

WENT TO DAYCARE PAST 12 MONTHS

Survey: CHILD Asthma Call-Back
Column: 163
Prologue:

Type: NUM
SAS Variable Name: DAYCARE1

Description: Q10.11   Has [he/she] gone to daycare in the past 12 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	70	3.06	3.63
2	No	647	28.27	36.87
3	Home school, skip filled	40	1.75	1.18
5	Goes to daycare now, skip filled	201	8.78	12.07
6	Over age ten, skip filled	1,287	56.23	43.83
7	Don't know	44	1.92	2.43
BLANK	Partial complete	11		

DAYS MISSED DAYCARE BECAUSE OF ASTHMA

Survey: CHILD Asthma Call-Back
Column: 164-167
Prologue:

Type: NUM
SAS Variable Name: MISS_DCAR

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	97	4.24	5.84
444	No current asthma, skip filled	61	2.67	3.05
555	No daycare past year, skip filled	647	28.28	36.88
666	Over age ten, skip filled	1,287	56.25	43.84
777	Don't know	38	1.66	1.76
888	Zero	131	5.73	7.69
3333	Home school, skip filled	27	1.18	0.94
BLANK	Partial complete	12		

WRITTEN ASTHMA ACTION PLAN IN DAYCARE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 168   **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	84	3.67	4.42
2	No	139	6.08	9.00
3	Home school, skip filled	27	1.18	0.94
4	No current asthma, skip filled	61	2.67	3.05
5	No daycare past year, skip filled	647	28.29	36.89
6	Over age ten, skip filled	1,287	56.27	43.86
7	Don't know	42	1.84	1.85
BLANK	Partial complete	13		

PETS IN DAYCARE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 169   **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	53	2.32	3.75
2	No	216	9.44	11.94
3	Home school, skip filled	40	1.75	1.18
5	No daycare past year, skip filled	647	28.27	36.87
6	Over age ten, skip filled	1,287	56.23	43.83
7	Don't know	46	2.01	2.44
BLANK	Partial complete	11		

AWARE OF MOLD PROBLEM IN DAYCARE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 170   **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	2	0.09	0.02
2	No	269	11.75	15.68
3	Home school, skip filled	40	1.75	1.18
5	No daycare past year, skip filled	647	28.27	36.87
6	Over age ten, skip filled	1,287	56.23	43.83
7	Don't know	44	1.92	2.43
BLANK	Partial complete	11		

SMOKING ALLOWED IN DAYCARE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 171   **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	3	0.13	0.20
2	No	267	11.66	15.50
3	Home school, skip filled	40	1.75	1.18
5	No daycare past year, skip filled	647	28.27	36.87
6	Over age ten, skip filled	1,287	56.23	43.83
7	Don't know	45	1.97	2.43
BLANK	Partial complete	11		

USED HERBS TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 173   **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	45	1.97	1.42
2	No	1,758	77.00	78.95
5	No current asthma, skip filled	474	20.76	19.48
7	Don't know	5	0.22	0.13
9	Refused	1	0.04	0.02
BLANK	Partial complete	17		

USED VITAMINS TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 174   **SAS Variable Name:** CAM_VITA
Prologue:
Description: Q11.2   . . . vitamins . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	113	4.95	4.67
2	No	1,688	73.97	75.59
5	No current asthma, skip filled	474	20.77	19.49
7	Don't know	7	0.31	0.26
BLANK	Partial complete	18		

USED ACUPUNCTURE TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 175   **SAS Variable Name:** CAM_PUNC
Prologue:
Description: Q11.3   . . . acupuncture . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	11	0.48	0.22
2	No	1,793	78.57	80.18
5	No current asthma, skip filled	474	20.77	19.49
7	Don't know	4	0.18	0.11
BLANK	Partial complete	18		

USED ACUPRESSURE TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 176   **SAS Variable Name:** CAM_PRES
Prologue:
Description: Q11.4   . . . acupressure . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	12	0.53	0.34
2	No	1,792	78.53	80.07
5	No current asthma, skip filled	474	20.77	19.49
7	Don't know	4	0.18	0.11
BLANK	Partial complete	18		

USED AROMATHERAPY TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 177   **SAS Variable Name:** CAM_AROM
Prologue:
Description: Q11.5   . . . aromatherapy . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	53	2.32	2.50
2	No	1,751	76.73	77.91
5	No current asthma, skip filled	474	20.77	19.49
7	Don't know	4	0.18	0.11
BLANK	Partial complete	18		

USED HOMEOPATHY TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 178   **SAS Variable Name:** CAM_HOME
Prologue:
Description: Q11.6   . . . homeopathy . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	30	1.31	0.88
2	No	1,766	77.39	79.04
5	No current asthma, skip filled	474	20.77	19.49
7	Don't know	12	0.53	0.59
BLANK	Partial complete	18		

USED REFLEXOLOGY TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 179   **SAS Variable Name:** CAM_REFL
Prologue:
Description: Q11.7   . . . reflexology . . .

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	13	0.57	0.31
2	No	1,790	78.44	80.03
5	No current asthma, skip filled	474	20.77	19.49
7	Don't know	5	0.22	0.17
BLANK	Partial complete	18		

USED YOGA TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back
Column: 180
Prologue:
Description: Q11.8 . . . yoga . . .

Type: NUM
SAS Variable Name: CAM_YOGA

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	26	1.14	1.16
2	No	1,776	77.83	79.17
5	No current asthma, skip filled	474	20.77	19.49
7	Don't know	6	0.26	0.18
BLANK	Partial complete	18		

USED BREATHING TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back
Column: 181
Prologue:
Description: Q11.9 . . . breathing techniques . . .

Type: NUM
SAS Variable Name: CAM_BR

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	264	11.57	11.68
2	No	1,539	67.44	68.67
5	No current asthma, skip filled	474	20.77	19.49
7	Don't know	5	0.22	0.17
BLANK	Partial complete	18		

USED NATUROPATHY TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back
Column: 182
Prologue:
Description: Q11.10 . . . naturopathy . . .

Type: NUM
SAS Variable Name: CAM_NATR

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	14	0.61	0.29
2	No	1,787	78.31	80.01
5	No current asthma, skip filled	474	20.77	19.49
7	Don't know	7	0.31	0.21
BLANK	Partial complete	18		

OTHER ALTERNATIVE CARE TO CONTROL ASTHMA

Survey: CHILD Asthma Call-Back
Column: 183
Prologue:
Description: Q11.11 Besides the types I have just asked about, has [child's name] used any other type of alternative care for [his/her] asthma in the past 12 months?

Type: NUM
SAS Variable Name: CAM_OTHR

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	132	5.78	5.48
2	No	1,661	72.76	74.51
5	No current asthma, skip filled	474	20.76	19.48
7	Don't know	16	0.70	0.53
BLANK	Partial complete	17		

TEXT FOR OTHER TYPE CARE

Survey: CHILD Asthma Call-Back

Column: 184-283

Prologue:

Description: Q11.12   What else has [child's name] used?

Type: CHAR

SAS Variable Name: CAM_TEXT

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK		2,168		
HIDDEN	Text field - up to 100 characters	132	100.00	100.00

HEIGHT OF CHILD

Survey: CHILD Asthma Call-Back

Column: 285-288

Prologue:

Description: Q12.1   How tall is [child's name]?

Type: CHAR

SAS Variable Name: HEIGHT1

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Partial complete	12		
HIDDEN		2,288	100.00	100.00

WEIGHT OF CHILD

Survey: CHILD Asthma Call-Back

Column: 289-292

Prologue:

Description: Q12.2   How much does [he/she] weigh?

Type: CHAR

SAS Variable Name: WEIGHT1

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Partial complete	12		
HIDDEN		2,288	100.00	100.00

BIRTH WEIGHT

Survey: CHILD Asthma Call-Back

Column: 293-298

Prologue:

Description: Q12.3   How much did [he/she] weigh at birth (in pounds)?

Type: CHAR

SAS Variable Name: BIRTHW1

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Partial complete	12		
HIDDEN		2,288	100.00	100.00

WHETHER BIRTH WEIGHT LESS THAN 5.5 POUNDS

Survey: CHILD Asthma Call-Back

Column: 299

Prologue:

Description: Q12.4   At birth, did [child's name] weigh less than 5 ½ pounds?

Type: NUM

SAS Variable Name: BIRTHRF

Value	Value Label	Frequency	Percentage	Weighted Percentage
0	Partial complete	12	9.02	23.25
1	Yes	15	11.28	6.69
2	No	76	57.14	47.09
7	Don't know	29	21.80	22.72
9	Refused	1	0.75	0.26
BLANK	Have reported birth weight	2,167		

LANGUAGE IDENTIFIER

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 300-301   **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	2,276	99.00	96.86
2	Spanish	23	1.00	3.14
BLANK	Not asked or missing	1		

END OF THE RAW CALL BACK DATA

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 302   **SAS Variable Name:** END_OF_FILE
Prologue:
Description: END OF THE RAW CALL BACK DATA

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2,300	100.00	100.00

EVER HAVE ASTHMA COMBINED BRFSS AND CALL BACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 304   **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	2,300	100.00	100.00

STILL HAVE ASTHMA COMBINED BRFSS AND CALL BACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 305   **SAS Variable Name:** _CUR_ASTH_C
Prologue:
Description: STILL HAVE ASTHMA COMBINED BRFSS (ASTHNOW) AND CALL BACK (CUR_ASTH)

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1,547	67.26	67.32
2	No	705	30.65	31.31
7	Don´t know/Not sure	48	2.09	1.37

RELATIONSHIP TO CHILD COMBINED BRFSS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 306   **SAS Variable Name:** RELATED
Prologue:
Description: RELATIONSHIP TO CHILD COMBINED BRFSS

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Parents	2,210	96.09	95.58
2	Guardian	52	2.26	2.06
3	Other relative	37	1.61	2.22
4	Unrelated	1	0.04	0.14

FLAG FOR AGE, AGEDX, INCIDNT INCONSISTENCY

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 307
SAS Variable Name: FLAG1
Prologue:
Description: FLAG FOR AGE, AGEDX, INCIDNT INCONSISTENCY

Value	Value Label	Frequency	Percentage	Weighted Percentage
0	AGE, AGEDX, and INCIDNT are consistent	2,222	96.61	96.13
1	AGEDX is greater than AGE	3	0.13	0.17
2	AGE, AGEDX, and INCIDNT are inconsistent	75	3.26	3.70

ADVAIR (+ A. DISKUS)

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 308
SAS Variable Name: INHALER_ID_1
Prologue:
Description: ADVAIR (+ A. DISKUS)

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	144	6.26	5.29
2	No	2,156	93.74	94.71

AEROBID

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 309
SAS Variable Name: INHALER_ID_2
Prologue:
Description: AEROBID

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.29
2	No	2,299	99.96	99.71

ALBUTEROL (+ A. SULFATE OR SALBUTAMOL)

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 310
SAS Variable Name: INHALER_ID_3
Prologue:
Description: ALBUTEROL (+ A. SULFATE OR SALBUTAMOL)

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	360	15.65	15.17
2	No	1,940	84.35	84.83

ALUPENT

Survey: CHILD Asthma Call-Back
Type: NUM
Column: 311
SAS Variable Name: INHALER_ID_4
Prologue:
Description: ALUPENT

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.31
2	No	2,299	99.96	99.69

ATROVENT

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 312   **SAS Variable Name:** INHALER_ID_5
Prologue:
Description: ATROVENT

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.09	0.05
2	No	2,298	99.91	99.95

AZMACORT

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 313   **SAS Variable Name:** INHALER_ID_6
Prologue:
Description: AZMACORT

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	8	0.35	0.34
2	No	2,292	99.65	99.66

BECLOMETHASONE DIPROPIONATE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 314   **SAS Variable Name:** INHALER_ID_7
Prologue:
Description: BECLOMETHASONE DIPROPIONATE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.09	0.04
2	No	2,298	99.91	99.96

BECLOVENT

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 315   **SAS Variable Name:** INHALER_ID_8
Prologue:
Description: BECLOVENT

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

BITOLTEROL

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 316   **SAS Variable Name:** INHALER_ID_9
Prologue:
Description: BITOLTEROL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

BRETHAIRE

Survey: CHILD Asthma Call-Back
Column: 317
Prologue:
Description: BRETHAIRE

Type: NUM
SAS Variable Name: INHALER_ID_10

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

BUDESONIDE

Survey: CHILD Asthma Call-Back
Column: 318
Prologue:
Description: BUDESONIDE

Type: NUM
SAS Variable Name: INHALER_ID_11

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.13	0.19
2	No	2,297	99.87	99.81

COMBIVENT

Survey: CHILD Asthma Call-Back
Column: 319
Prologue:
Description: COMBIVENT

Type: NUM
SAS Variable Name: INHALER_ID_12

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	9	0.39	0.09
2	No	2,291	99.61	99.91

CROMOLYN

Survey: CHILD Asthma Call-Back
Column: 320
Prologue:
Description: CROMOLYN

Type: NUM
SAS Variable Name: INHALER_ID_13

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

FLOVENT

Survey: CHILD Asthma Call-Back
Column: 321
Prologue:
Description: FLOVENT

Type: NUM
SAS Variable Name: INHALER_ID_14

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	171	7.43	6.82
2	No	2,129	92.57	93.18

FLOVENT ROTADISK

Survey: CHILD Asthma Call-Back
Column: 322
Prologue:
Description: FLOVENT ROTADISK

Type: NUM
SAS Variable Name: INHALER_ID_15

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	6	0.26	0.15
2	No	2,294	99.74	99.85

FLUNISOLIDE

Survey: CHILD Asthma Call-Back
Column: 323
Prologue:
Description: FLUNISOLIDE

Type: NUM
SAS Variable Name: INHALER_ID_16

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.01
2	No	2,299	99.96	99.99

FLUTICASONE

Survey: CHILD Asthma Call-Back
Column: 324
Prologue:
Description: FLUTICASONE

Type: NUM
SAS Variable Name: INHALER_ID_17

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.13	0.29
2	No	2,297	99.87	99.71

INTAL

Survey: CHILD Asthma Call-Back
Column: 325
Prologue:
Description: INTAL

Type: NUM
SAS Variable Name: INHALER_ID_18

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.01
2	No	2,299	99.96	99.99

IPRATROPIUM BROMIDE

Survey: CHILD Asthma Call-Back
Column: 326
Prologue:
Description: IPRATROPIUM BROMIDE

Type: NUM
SAS Variable Name: INHALER_ID_19

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

MAXAIR

Survey: CHILD Asthma Call-Back
Column: 327
Prologue:
Description: MAXAIR

Type: NUM
SAS Variable Name: INHALER_ID_20

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	10	0.43	0.19
2	No	2,290	99.57	99.81

METAPROTERONOL

Survey: CHILD Asthma Call-Back
Column: 328
Prologue:
Description: METAPROTERONOL

Type: NUM
SAS Variable Name: INHALER_ID_21

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

NEDOCROMIL

Survey: CHILD Asthma Call-Back
Column: 329
Prologue:
Description: NEDOCROMIL

Type: NUM
SAS Variable Name: INHALER_ID_22

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PIRBUTEROL

Survey: CHILD Asthma Call-Back
Column: 330
Prologue:
Description: PIRBUTEROL

Type: NUM
SAS Variable Name: INHALER_ID_23

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.05
2	No	2,299	99.96	99.95

PROVENTIL

Survey: CHILD Asthma Call-Back
Column: 331
Prologue:
Description: PROVENTIL

Type: NUM
SAS Variable Name: INHALER_ID_24

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	47	2.04	1.62
2	No	2,253	97.96	98.38

PULMICORT TURBUHALER

Survey: CHILD Asthma Call-Back
Column: 332
Prologue:
Description: PULMICORT TURBUHALER

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	30	1.30	1.64
2	No	2,270	98.70	98.36

Type: NUM
SAS Variable Name: INHALER_ID_25

SALMETEROL

Survey: CHILD Asthma Call-Back
Column: 333
Prologue:
Description: SALMETEROL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

Type: NUM
SAS Variable Name: INHALER_ID_26

SEREVENT

Survey: CHILD Asthma Call-Back
Column: 334
Prologue:
Description: SEREVENT

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.09	0.17
2	No	2,298	99.91	99.83

Type: NUM
SAS Variable Name: INHALER_ID_27

TERBUTALINE (+ T. SULFATE)

Survey: CHILD Asthma Call-Back
Column: 335
Prologue:
Description: TERBUTALINE (+ T. SULFATE)

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

Type: NUM
SAS Variable Name: INHALER_ID_28

TILADE

Survey: CHILD Asthma Call-Back
Column: 336
Prologue:
Description: TILADE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

Type: NUM
SAS Variable Name: INHALER_ID_29

TORNALATE

Survey: CHILD Asthma Call-Back
Column: 337
Prologue:
Description: TORNALATE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

Type: NUM
SAS Variable Name: INHALER_ID_30

TRIAMCINOLONE ACETONIDE

Survey: CHILD Asthma Call-Back

Column: 338

Prologue:

Description: TRIAMCINOLONE ACETONIDE

Type: NUM

SAS Variable Name: INHALER_ID_31

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

VANCERIL

Survey: CHILD Asthma Call-Back

Column: 339

Prologue:

Description: VANCERIL

Type: NUM

SAS Variable Name: INHALER_ID_32

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

VENTOLIN

Survey: CHILD Asthma Call-Back

Column: 340

Prologue:

Description: VENTOLIN

Type: NUM

SAS Variable Name: INHALER_ID_33

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	97	4.22	5.14
2	No	2,203	95.78	94.86

FORADIL

Survey: CHILD Asthma Call-Back

Column: 341

Prologue:

Description: FORADIL

Type: NUM

SAS Variable Name: INHALER_ID_34

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.09	0.14
2	No	2,298	99.91	99.86

FORMOTEROL

Survey: CHILD Asthma Call-Back

Column: 342

Prologue:

Description: FORMOTEROL

Type: NUM

SAS Variable Name: INHALER_ID_35

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.03
2	No	2,299	99.96	99.97

QVAR

Survey: CHILD Asthma Call-Back
Column: 343
Prologue:
Description: QVAR

Type: NUM
SAS Variable Name: INHALER_ID_36

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	30	1.30	1.45
2	No	2,270	98.70	98.55

LEVALBUTEROL TARTRATE

Survey: CHILD Asthma Call-Back
Column: 344
Prologue:
Description: LEVALBUTEROL TARTRATE

Type: NUM
SAS Variable Name: INHALER_ID_37

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.01
2	No	2,299	99.96	99.99

XOPENEX HFA

Survey: CHILD Asthma Call-Back
Column: 345
Prologue:
Description: XOPENEX HFA

Type: NUM
SAS Variable Name: INHALER_ID_38

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	81	3.52	2.77
2	No	2,219	96.48	97.23

MOMETASONE FUROATE

Survey: CHILD Asthma Call-Back
Column: 346
Prologue:
Description: MOMETASONE FUROATE

Type: NUM
SAS Variable Name: INHALER_ID_39

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

ASMANEX (TWISTHALER)

Survey: CHILD Asthma Call-Back
Column: 347
Prologue:
Description: ASMANEX (TWISTHALER)

Type: NUM
SAS Variable Name: INHALER_ID_40

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	25	1.09	0.55
2	No	2,275	98.91	99.45

PRO-AIR HFA

Survey: CHILD Asthma Call-Back
Column: 348
Prologue:
Description: PRO-AIR HFA

Type: NUM
SAS Variable Name: INHALER_ID_41

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	149	6.48	6.69
2	No	2,151	93.52	93.31

SYMBICORT

Survey: CHILD Asthma Call-Back
Column: 349
Prologue:
Description: SYMBICORT

Type: NUM
SAS Variable Name: INHALER_ID_42

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	21	0.91	0.85
2	No	2,279	99.09	99.15

DON´T KNOW/REFUSED

Survey: CHILD Asthma Call-Back
Column: 350
Prologue:
Description: DON´T KNOW/REFUSED

Type: NUM
SAS Variable Name: INHALER_ID_7799

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	29	1.26	0.77
2	No	2,271	98.74	99.23

OTHER INHALER

Survey: CHILD Asthma Call-Back
Column: 351
Prologue:
Description: NEW OTHER PRESCRIPTION INHALER

Type: NUM
SAS Variable Name: OTHER_INHALER

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Not asked or missing	2,300		

PILL ACCOLATE

Survey: CHILD Asthma Call-Back
Column: 352
Prologue:
Description: PILL ACCOLATE

Type: NUM
SAS Variable Name: PILLS_ID_1

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL AEROLATE

Survey: CHILD Asthma Call-Back
Column: 353
Prologue:
Description: PILL AEROLATE

Type: NUM
SAS Variable Name: PILLS_ID_2

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL ALBUTEROL

Survey: CHILD Asthma Call-Back
Column: 354
Prologue:
Description: PILL ALBUTEROL

Type: NUM
SAS Variable Name: PILLS_ID_3

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.09	0.02
2	No	2,298	99.91	99.98

PILL ALUPENT

Survey: CHILD Asthma Call-Back
Column: 355
Prologue:
Description: PILL ALUPENT

Type: NUM
SAS Variable Name: PILLS_ID_4

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL CHOLEDYL (OXTRIPHYLLINE)

Survey: CHILD Asthma Call-Back
Column: 356
Prologue:
Description: PILL CHOLEDYL (OXTRIPHYLLINE)

Type: NUM
SAS Variable Name: PILLS_ID_5

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.00
2	No	2,299	99.96	100.00

PILL DELTASONE

Survey: CHILD Asthma Call-Back
Column: 357
Prologue:
Description: PILL DELTASONE

Type: NUM
SAS Variable Name: PILLS_ID_7

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL ELIXOPHYLLIN
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 358   **SAS Variable Name:** PILLS_ID_8
Prologue:
Description: PILL ELIXOPHYLLIN

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.00
2	No	2,299	99.96	100.00

PILL MEDROL
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 359   **SAS Variable Name:** PILLS_ID_11
Prologue:
Description: PILL MEDROL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL METAPREL
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 360   **SAS Variable Name:** PILLS_ID_12
Prologue:
Description: PILL METAPREL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL METAPROTERONOL
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 361   **SAS Variable Name:** PILLS_ID_13
Prologue:
Description: PILL METAPROTERONOL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL METHYLPREDNISOLONE
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 362   **SAS Variable Name:** PILLS_ID_14
Prologue:
Description: PILL METHYLPREDNISOLONE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.01
2	No	2,299	99.96	99.99

PILL MONTELUKAST
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 363   **SAS Variable Name:** PILLS_ID_15
Prologue:
Description: PILL MONTELUKAST

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL PEDIAPRED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 364   **SAS Variable Name:** PILLS_ID_17
Prologue:
Description: PILL PEDIAPRED

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.01
2	No	2,299	99.96	99.99

PILL PREDNISOLONE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 365   **SAS Variable Name:** PILLS_ID_18
Prologue:
Description: PILL PREDNISOLONE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.04
2	No	2,299	99.96	99.96

PILL PREDNISONE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 366   **SAS Variable Name:** PILLS_ID_19
Prologue:
Description: PILL PREDNISONE

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	22	0.96	1.01
2	No	2,278	99.04	98.99

PILL PROVENTIL

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 367   **SAS Variable Name:** PILLS_ID_21
Prologue:
Description: PILL PROVENTIL

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL RESPID

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 368   **SAS Variable Name:** PILLS_ID_23
Prologue:
Description: PILL RESPID

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.00
2	No	2,299	99.96	100.00

PILL SINGULAIR

Survey: CHILD Asthma Call-Back

Column: 369

Prologue:

Description: PILL SINGULAIR

Type: NUM

SAS Variable Name: PILLS_ID_24

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	318	13.83	13.30
2	No	1,982	86.17	86.70

PILL SLO-PHYLLIN

Survey: CHILD Asthma Call-Back

Column: 370

Prologue:

Description: PILL SLO-PHYLLIN

Type: NUM

SAS Variable Name: PILLS_ID_25

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL SLO-BID

Survey: CHILD Asthma Call-Back

Column: 371

Prologue:

Description: PILL SLO-BID

Type: NUM

SAS Variable Name: PILLS_ID_26

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL THEO-24

Survey: CHILD Asthma Call-Back

Column: 372

Prologue:

Description: PILL THEO-24

Type: NUM

SAS Variable Name: PILLS_ID_28

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL THEOCHRON

Survey: CHILD Asthma Call-Back

Column: 373

Prologue:

Description: PILL THEOCHRON

Type: NUM

SAS Variable Name: PILLS_ID_30

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL THEOCLEAR

Survey: CHILD Asthma Call-Back

Column: 374

Prologue:

Description: PILL THEOCLEAR

Type: NUM

SAS Variable Name: PILLS_ID_31

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL THEODUR

Survey: CHILD Asthma Call-Back
Column: 375
Prologue:
Description: PILL THEODUR

Type: NUM
SAS Variable Name: PILLS_ID_32

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL THEO-DUR

Survey: CHILD Asthma Call-Back
Column: 376
Prologue:
Description: PILL THEO-DUR

Type: NUM
SAS Variable Name: PILLS_ID_33

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL THEOPHYLLINE

Survey: CHILD Asthma Call-Back
Column: 377
Prologue:
Description: PILL THEOPHYLLINE

Type: NUM
SAS Variable Name: PILLS_ID_35

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL THEOSPAN

Survey: CHILD Asthma Call-Back
Column: 378
Prologue:
Description: PILL THEOSPAN

Type: NUM
SAS Variable Name: PILLS_ID_37

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL T-PHYL

Survey: CHILD Asthma Call-Back
Column: 379
Prologue:
Description: PILL T-PHYL

Type: NUM
SAS Variable Name: PILLS_ID_40

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL UNIPHYL

Survey: CHILD Asthma Call-Back
Column: 380
Prologue:
Description: PILL UNIPHYL

Type: NUM
SAS Variable Name: PILLS_ID_42

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL VENTOLIN

Survey: CHILD Asthma Call-Back

Column: 381

Prologue:

Description: PILL VENTOLIN

Type: NUM

SAS Variable Name: PILLS_ID_43

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL VOLMAX

Survey: CHILD Asthma Call-Back

Column: 382

Prologue:

Description: PILL VOLMAX

Type: NUM

SAS Variable Name: PILLS_ID_44

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL ZAFIRLUKAST

Survey: CHILD Asthma Call-Back

Column: 383

Prologue:

Description: PILL ZAFIRLUKAST

Type: NUM

SAS Variable Name: PILLS_ID_45

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL ZILEUTON

Survey: CHILD Asthma Call-Back

Column: 384

Prologue:

Description: PILL ZILEUTON

Type: NUM

SAS Variable Name: PILLS_ID_46

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL ZYFLO FILMTAB

Survey: CHILD Asthma Call-Back

Column: 385

Prologue:

Description: PILL ZYFLO FILMTAB

Type: NUM

SAS Variable Name: PILLS_ID_47

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL TERBUTALINE (+ T. SULFATE)

Survey: CHILD Asthma Call-Back

Column: 386

Prologue:

Description: PILL TERBUTALINE (+ T. SULFATE)

Type: NUM

SAS Variable Name: PILLS_ID_48

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

PILL BRETHINE

Survey: CHILD Asthma Call-Back

Column: 387

Prologue:

Description: PILL BRETHINE

Type: NUM

SAS Variable Name: PILLS_ID_49

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

DON´T KNOW/REFUSED

Survey: CHILD Asthma Call-Back

Column: 388

Prologue:

Description: DON´T KNOW/REFUSED

Type: NUM

SAS Variable Name: PILLS_ID_7799

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	8	0.35	1.10
2	No	2,292	99.65	98.90

OTHER PILLS

Survey: CHILD Asthma Call-Back

Column: 389

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	2,300		

SYRUP AEROLATE

Survey: CHILD Asthma Call-Back

Column: 390

Prologue:

Description: SYRUP AEROLATE

Type: NUM

SAS Variable Name: SYRUP_ID_1

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.03
2	No	2,299	99.96	99.97

SYRUP ALBUTEROL

Survey: CHILD Asthma Call-Back

Column: 391

Prologue:

Description: SYRUP ALBUTEROL

Type: NUM

SAS Variable Name: SYRUP_ID_2

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	18	0.78	0.79
2	No	2,282	99.22	99.21

SYRUP ALUPENT

Survey: CHILD Asthma Call-Back

Column: 392

Prologue:

Description: SYRUP ALUPENT

Type: NUM

SAS Variable Name: SYRUP_ID_3

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

SYRUP METAPROTERONOL

Survey: CHILD Asthma Call-Back

Column: 393

Prologue:

Description: SYRUP METAPROTERONOL

Type: NUM

SAS Variable Name: SYRUP_ID_4

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

SYRUP PREDNISOLONE

Survey: CHILD Asthma Call-Back

Column: 394

Prologue:

Description: SYRUP PREDNISOLONE

Type: NUM

SAS Variable Name: SYRUP_ID_5

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	40	1.74	3.38
2	No	2,260	98.26	96.62

SYRUP PRELONE

Survey: CHILD Asthma Call-Back

Column: 395

Prologue:

Description: SYRUP PRELONE

Type: NUM

SAS Variable Name: SYRUP_ID_6

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.04
2	No	2,299	99.96	99.96

SYRUP PROVENTIL

Survey: CHILD Asthma Call-Back

Column: 396

Prologue:

Description: SYRUP PROVENTIL

Type: NUM

SAS Variable Name: SYRUP_ID_7

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

SYRUP SLO-PHYLLIN

Survey: CHILD Asthma Call-Back

Column: 397

Prologue:

Description: SYRUP SLO-PHYLLIN

Type: NUM

SAS Variable Name: SYRUP_ID_8

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

SYRUP THEOPHYLLINE
Survey: CHILD Asthma Call-Back

Column: 398

Prologue:

Description: SYRUP THEOPHYLLINE

Type: NUM

SAS Variable Name: SYRUP_ID_9

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.04
2	No	2,299	99.96	99.96

SYRUP VENTOLIN
Survey: CHILD Asthma Call-Back

Column: 399

Prologue:

Description: SYRUP VENTOLIN

Type: NUM

SAS Variable Name: SYRUP_ID_10

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.01
2	No	2,299	99.96	99.99

DON´T KNOW/REFUSED
Survey: CHILD Asthma Call-Back

Column: 400

Prologue:

Description: DON´T KNOW/REFUSED

Type: NUM

SAS Variable Name: SYRUP_ID_7799

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	13	0.57	0.75
2	No	2,287	99.43	99.25

OTHER SYRUP
Survey: CHILD Asthma Call-Back

Column: 401

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	2,300		

NEB ALBUTEROL
Survey: CHILD Asthma Call-Back

Column: 402

Prologue:

Description: NEB ALBUTEROL

Type: NUM

SAS Variable Name: NEB_ID_1

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	308	13.39	16.71
2	No	1,992	86.61	83.29

NEB ALUPENT

Survey: CHILD Asthma Call-Back

Column: 403

Prologue:

Description: NEB ALUPENT

Type: NUM

SAS Variable Name: NEB_ID_2

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

NEB ATROVENT

Survey: CHILD Asthma Call-Back

Column: 404

Prologue:

Description: NEB ATROVENT

Type: NUM

SAS Variable Name: NEB_ID_3

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	0.17	0.19
2	No	2,296	99.83	99.81

NEB BITOLTEROL

Survey: CHILD Asthma Call-Back

Column: 405

Prologue:

Description: NEB BITOLTEROL

Type: NUM

SAS Variable Name: NEB_ID_4

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.09	0.06
2	No	2,298	99.91	99.94

NEB BUDESONIDE

Survey: CHILD Asthma Call-Back

Column: 406

Prologue:

Description: NEB BUDESONIDE

Type: NUM

SAS Variable Name: NEB_ID_5

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	23	1.00	1.11
2	No	2,277	99.00	98.89

NEB CROMOLYN

Survey: CHILD Asthma Call-Back

Column: 407

Prologue:

Description: NEB CROMOLYN

Type: NUM

SAS Variable Name: NEB_ID_6

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

NEB DUONEB

Survey: CHILD Asthma Call-Back
Column: 408
Prologue:
Description: NEB DUONEB

Type: NUM
SAS Variable Name: NEB_ID_7

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	5	0.22	0.10
2	No	2,295	99.78	99.90

NEB INTAL

Survey: CHILD Asthma Call-Back
Column: 409
Prologue:
Description: NEB INTAL

Type: NUM
SAS Variable Name: NEB_ID_8

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.09	0.04
2	No	2,298	99.91	99.96

NEB IPRATROPRIUM BROMIDE

Survey: CHILD Asthma Call-Back
Column: 410
Prologue:
Description: NEB IPRATROPRIUM BROMIDE

Type: NUM
SAS Variable Name: NEB_ID_9

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	8	0.35	0.22
2	No	2,292	99.65	99.78

NEB LEVALBUTEROL

Survey: CHILD Asthma Call-Back
Column: 411
Prologue:
Description: NEB LEVALBUTEROL

Type: NUM
SAS Variable Name: NEB_ID_10

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.02
2	No	2,299	99.96	99.98

NEB METAPROTERONOL

Survey: CHILD Asthma Call-Back
Column: 412
Prologue:
Description: NEB METAPROTERONOL

Type: NUM
SAS Variable Name: NEB_ID_11

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

NEB PROVENTIL

    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 413   **SAS Variable Name:** NEB_ID_12
    Prologue:
Description: NEB PROVENTIL

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.09	0.29
2	No	2,298	99.91	99.71

NEB PULMICORT

    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 414   **SAS Variable Name:** NEB_ID_13
    Prologue:
Description: NEB PULMICORT

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	94	4.09	5.81
2	No	2,206	95.91	94.19

NEB TORNALATE

    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 415   **SAS Variable Name:** NEB_ID_14
    Prologue:
Description: NEB TORNALATE

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2,300	100.00	100.00

NEB VENTOLIN

    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 416   **SAS Variable Name:** NEB_ID_15
    Prologue:
Description: NEB VENTOLIN

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.04
2	No	2,299	99.96	99.96

NEB XOPENEX

    Survey: CHILD Asthma Call-Back   **Type:** NUM
    Column: 417   **SAS Variable Name:** NEB_ID_16
    Prologue:
Description: NEB XOPENEX

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	67	2.91	4.25
2	No	2,233	97.09	95.75

DON´T KNOW/REFUSED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 418   **SAS Variable Name:** NEB_ID_7799
Prologue:
Description: DON´T KNOW/REFUSED

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	13	0.57	0.79
2	No	2,287	99.43	99.21

OTHER NEBULIZER

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 419   **SAS Variable Name:** OTHER_NEB
Prologue:
Description: NEW OTHER PRESCRIPTION   NEBULIZER

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Not asked or missing	2,300		

OTHER INHALER TEXT

Survey: CHILD Asthma Call-Back   **Type:** CHAR
Column: 420-519   **SAS Variable Name:** OTH_I1R
Prologue:
Description: New other prescription inhaler name

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No other new asthma medication	2,295		
HIDDEN		5	100.00	100.00

OTHER PILLS TEXT

Survey: CHILD Asthma Call-Back   **Type:** CHAR
Column: 520-619   **SAS Variable Name:** OTH_P1R
Prologue:
Description: New other prescription pills name

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No other new asthma medication	2,299		
HIDDEN		1	100.00	100.00

OTHER SYRUP TEXT

Survey: CHILD Asthma Call-Back   **Type:** CHAR
Column: 620-719   **SAS Variable Name:** OTH_S1R
Prologue:
Description: New other prescription syrup name

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No other new asthma medication	2,299		
HIDDEN		1	100.00	100.00

OTHER NEBULIZER TEXT

Survey: CHILD Asthma Call-Back   **Type:** CHAR
Column: 720-819   **SAS Variable Name:** OTH_N1R
Prologue:
Description: New other prescription nebulizer name

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	No other new asthma medication	2,299		
HIDDEN		1	100.00	100.00

INHALER_TEXT: COUGH/COLD MED.

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 820   **SAS Variable Name:** INHALER_TEXT1
Prologue:
Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	21	0.91	0.69
3	No other medication text filled	2,279	99.09	99.31

INHALER_TEXT: ALLERGY MED.

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 821   **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	4	0.17	0.06
2	No	17	0.74	0.63
3	No other medication text filled	2,279	99.09	99.31

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

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 822   **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	2	0.09	0.03
2	No	19	0.83	0.66
3	No other medication text filled	2,279	99.09	99.31

INHALER_TEXT: ASTHMA MED., BUT NOT INHALER

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 823   **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	2	0.09	0.05
2	No	19	0.83	0.64
3	No other medication text filled	2,279	99.09	99.31

INHALER_TEXT: UNIDENTIFIABLE WORD OR NOT A MED.

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 824   **SAS Variable Name:** INHALER_TEXT5
Prologue:
Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	2	0.09	0.07
2	No	19	0.83	0.62
3	No other medication text filled	2,279	99.09	99.31

INHALER_TEXT: WAS BACK CODED TO EXISTING INHALER

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 825   **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	6	0.26	0.41
2	No	15	0.65	0.28
3	No other medication text filled	2,279	99.09	99.31

INHALER_TEXT: OTC INHALER, PILL, OR SYRUP

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 826   **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	21	0.91	0.69
3	No other medication text filled	2,279	99.09	99.31

INHALER_TEXT: TRUE ASTHMA MED., NO AVAILABLE BACK CODE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 827   **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	5	0.22	0.06
2	No	16	0.70	0.63
3	No other medication text filled	2,279	99.09	99.31

INHALER_TEXT: DON'T KNOW

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 828   **SAS Variable Name:** INHALER_TEXT96
Prologue:
Description: Flag variables for the verbatim other responses to prescription inhaler

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	21	0.91	0.69
3	No other medication text filled	2,279	99.09	99.31

PILLS_TEXT: COUGH/COLD MED.

Survey: CHILD Asthma Call-Back
Column: 829
Prologue:
Description: Flag variables for the verbatim other responses to prescription pills

Type: NUM
SAS Variable Name: PILLS_TEXT1

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	51	2.22	2.38
3	No other medication text filled	2,249	97.78	97.62

PILLS_TEXT: ALLERGY MED.

Survey: CHILD Asthma Call-Back
Column: 830
Prologue:
Description: Flag variables for the verbatim other responses to prescription pills

Type: NUM
SAS Variable Name: PILLS_TEXT2

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	46	2.00	2.23
2	No	5	0.22	0.15
3	No other medication text filled	2,249	97.78	97.62

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

Survey: CHILD Asthma Call-Back
Column: 831
Prologue:
Description: Flag variables for the verbatim other responses to prescription pills

Type: NUM
SAS Variable Name: PILLS_TEXT3

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.07
2	No	50	2.17	2.30
3	No other medication text filled	2,249	97.78	97.62

PILLS_TEXT: ASTHMA MED., BUT NOT PILLS

Survey: CHILD Asthma Call-Back
Column: 832
Prologue:
Description: Flag variables for the verbatim other responses to prescription pills

Type: NUM
SAS Variable Name: PILLS_TEXT4

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	51	2.22	2.38
3	No other medication text filled	2,249	97.78	97.62

PILLS_TEXT: UNIDENTIFIABLE WORD OR NOT A MED.

Survey: CHILD Asthma Call-Back
Column: 833
Prologue:
Description: Flag variables for the verbatim other responses to prescription pills

Type: NUM
SAS Variable Name: PILLS_TEXT5

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	51	2.22	2.38
3	No other medication text filled	2,249	97.78	97.62

PILLS_TEXT: WAS BACK CODED TO EXISTING PILLS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 834   **SAS Variable Name:** PILLS_TEXT6
Prologue:
Description: Flag variables for the verbatim other responses to prescription pills

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	0.17	0.12
2	No	47	2.04	2.25
3	No other medication text filled	2,249	97.78	97.62

PILLS_TEXT: OTC INHALER, PILL, OR SYRUP

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 835   **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	51	2.22	2.38
3	No other medication text filled	2,249	97.78	97.62

PILLS_TEXT: TRUE ASTHMA MED., NO AVAILABLE BACK CODE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 836   **SAS Variable Name:** PILLS_TEXT8
Prologue:
Description: Flag variables for the verbatim other responses to prescription pills

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.03
2	No	50	2.17	2.35
3	No other medication text filled	2,249	97.78	97.62

PILLS_TEXT: DON'T KNOW

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 837   **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	51	2.22	2.38
3	No other medication text filled	2,249	97.78	97.62

SYRUP_TEXT: COUGH/COLD MED.

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 838   **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	7	0.30	0.25
2	No	26	1.13	1.30
3	No other medication text filled	2,267	98.57	98.45

SYRUP_TEXT: ALLERGY MED.

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 839 **SAS Variable Name:** SYRUP_TEXT2
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	19	0.83	0.74
2	No	14	0.61	0.82
3	No other medication text filled	2,267	98.57	98.45

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

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 840 **SAS Variable Name:** SYRUP_TEXT3
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.13	0.19
2	No	30	1.30	1.37
3	No other medication text filled	2,267	98.57	98.45

SYRUP_TEXT: ASTHMA MED., BUT NOT SYRUP

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 841 **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	33	1.43	1.55
3	No other medication text filled	2,267	98.57	98.45

SYRUP_TEXT: UNIDENTIFIABLE WORD OR NOT A MED.

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 842 **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	33	1.43	1.55
3	No other medication text filled	2,267	98.57	98.45

SYRUP_TEXT: WAS BACK CODED TO EXISTING SYRUP

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 843 **SAS Variable Name:** SYRUP_TEXT6
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	0.17	0.25
2	No	29	1.26	1.30
3	No other medication text filled	2,267	98.57	98.45

SYRUP_TEXT: OTC INHALER, PILL, OR SYRUP

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 844 **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	33	1.43	1.55
3	No other medication text filled	2,267	98.57	98.45

SYRUP_TEXT: TRUE ASTHMA MED., NO AVAILABLE BACK CODE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 845 **SAS Variable Name:** SYRUP_TEXT8
Prologue:
Description: Flag variables for the verbatim other responses to prescription syrup

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.18
2	No	32	1.39	1.37
3	No other medication text filled	2,267	98.57	98.45

SYRUP_TEXT: DON'T KNOW

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 846 **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	33	1.43	1.55
3	No other medication text filled	2,267	98.57	98.45

NEB_TEXT: COUGH/COLD MED.

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 847 **SAS Variable Name:** NEB_TEXT1
Prologue:
Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	8	0.35	0.28
3	No other medication text filled	2,292	99.65	99.72

NEB_TEXT: ALLERGY MED.

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 848 **SAS Variable Name:** NEB_TEXT2
Prologue:
Description: Flag variables for the verbatim other responses to prescription nebulizer

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	8	0.35	0.28
3	No other medication text filled	2,292	99.65	99.72

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

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

Column: 849   **SAS Variable Name:** NEB_TEXT3

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	4	0.17	0.17
2	No	4	0.17	0.11
3	No other medication text filled	2,292	99.65	99.72

NEB_TEXT: ASTHMA MED., BUT NOT NEB

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

Column: 850   **SAS Variable Name:** NEB_TEXT4

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.06
2	No	7	0.30	0.22
3	No other medication text filled	2,292	99.65	99.72

NEB_TEXT: UNIDENTIFIABLE WORD OR NOT A MED.

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

Column: 851   **SAS Variable Name:** NEB_TEXT5

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	8	0.35	0.28
3	No other medication text filled	2,292	99.65	99.72

NEB_TEXT: WAS BACK CODED TO EXISTING NEB

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

Column: 852   **SAS Variable Name:** NEB_TEXT6

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	0.13	0.05
2	No	5	0.22	0.23
3	No other medication text filled	2,292	99.65	99.72

NEB_TEXT: OTC INHALER, PILL, OR SYRUP

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

Column: 853   **SAS Variable Name:** NEB_TEXT7

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	8	0.35	0.28
3	No other medication text filled	2,292	99.65	99.72

NEB_TEXT: TRUE ASTHMA MED., NO AVAILABLE BACK CODE

Survey: CHILD Asthma Call-Back
Column: 854

Type: NUM
SAS Variable Name: NEB_TEXT8

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	0.04	0.07
2	No	7	0.30	0.22
3	No other medication text filled	2,292	99.65	99.72

NEB_TEXT: DON'T KNOW

Survey: CHILD Asthma Call-Back
Column: 855

Type: NUM
SAS Variable Name: NEB_TEXT96

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	8	0.35	0.28
3	No other medication text filled	2,292	99.65	99.72

INHALED CORTICOSTEROIDS

Survey: CHILD Asthma Call-Back
Column: 856-857

Type: NUM
SAS Variable Name: INH_CS

Prologue:
Description: INHALED CORTICOSTEROIDS

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 14	Count	2,267	98.57	99.11
99	Missing	33	1.43	0.89

INHALED ANTI-INFLAMMATORY

Survey: CHILD Asthma Call-Back
Column: 858-859

Type: NUM
SAS Variable Name: INH_AI

Prologue:
Description: INHALED ANTI-INFLAMMATORY

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 4	Count	2,267	98.57	99.11
99	Missing	33	1.43	0.89

INHALED ANTI-CHOLINERGIC

Survey: CHILD Asthma Call-Back
Column: 860-861

Type: NUM
SAS Variable Name: INH_AC

Prologue:
Description: INHALED ANTI-CHOLINERGIC

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 3	Count	2,267	98.57	99.11
99	Missing	33	1.43	0.89

INHALED BETA 2 AGONIST SHORT ACTING

Survey: CHILD Asthma Call-Back

Column: 862-863

Prologue:

Description: INHALED BETA 2 AGONIST SHORT ACTING

Type: NUM

SAS Variable Name: INH_B2AS

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 12	Count	2,267	98.57	99.11
99	Missing	33	1.43	0.89

INHALED BETA 2 AGONIST LONG ACTING

Survey: CHILD Asthma Call-Back

Column: 864-865

Prologue:

Description: INHALED BETA 2 AGONIST LONG ACTING

Type: NUM

SAS Variable Name: INH_B2AL

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 5	Count	2,267	98.57	99.11
99	Missing	33	1.43	0.89

PILL CORTICOSTEROIDS

Survey: CHILD Asthma Call-Back

Column: 866-867

Prologue:

Description: PILL CORTICOSTEROIDS

Type: NUM

SAS Variable Name: PILL_CS

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 7	Count	2,270	98.70	99.28
99	Missing	30	1.30	0.72

PILL LEUKOTRIENE MODIFIERS

Survey: CHILD Asthma Call-Back

Column: 868-869

Prologue:

Description: PILL LEUKOTRIENE MODIFIERS

Type: NUM

SAS Variable Name: PILL_LM

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 6	Count	2,270	98.70	99.28
99	Missing	30	1.30	0.72

PILL BETA 2 AGONIST

Survey: CHILD Asthma Call-Back

Column: 870-871

Prologue:

Description: PILL BETA 2 AGONIST

Type: NUM

SAS Variable Name: PILL_B2A

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 7	Count	2,270	98.70	99.28
99	Missing	30	1.30	0.72

PILL METHYLXANTHINES

Survey: CHILD Asthma Call-Back
Column: 872-873
Prologue:
Description: PILL METHYLXANTHINES

Type: NUM
SAS Variable Name: PILL_METH

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 23	Count	2,270	98.70	99.28
99	Missing	30	1.30	0.72

SYRUP METHYLXANTHINES

Survey: CHILD Asthma Call-Back
Column: 874-875
Prologue:
Description: SYRUP METHYLXANTHINES

Type: NUM
SAS Variable Name: SYRP_METH

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 3	Count	2,274	98.87	99.42
99	Missing	26	1.13	0.58

SYRUP SHORT ACTING BETA 2 AGONIST

Survey: CHILD Asthma Call-Back
Column: 876-877
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	2,274	98.87	99.42
99	Missing	26	1.13	0.58

SYRUP CORTICOSTEROIDS

Survey: CHILD Asthma Call-Back
Column: 878-879
Prologue:
Description: SYRUP CORTICOSTEROIDS

Type: NUM
SAS Variable Name: SYRP_CS

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 2	Count	2,274	98.87	99.42
99	Missing	26	1.13	0.58

NEBULIZER ANTI-INFLAMMATORY

Survey: CHILD Asthma Call-Back
Column: 880-881
Prologue:
Description: NEBULIZER ANTI-INFLAMMATORY

Type: NUM
SAS Variable Name: NEB_AI

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 – 2	Count	2,271	98.74	99.39
99	Missing	29	1.26	0.61

NEBULIZER CORTICOSTEROID

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 882-883   **SAS Variable Name:** NEB_CS
Prologue:
Description: NEBULIZER CORTICOSTEROID

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 - 2	Count	2,271	98.74	99.39
99	Missing	29	1.26	0.61

NEBULIZER ANTICHOLINERGIC

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 884-885   **SAS Variable Name:** NEB_AC
Prologue:
Description: NEBULIZER ANTICHOLINERGIC

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 - 3	Count	2,271	98.74	99.39
99	Missing	29	1.26	0.61

NEBULIZER BETA 2 AGONIST

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 886-887   **SAS Variable Name:** NEB_B2A
Prologue:
Description: NEBULIZER BETA 2 AGONIST

Value	Value Label	Frequency	Percentage	Weighted Percentage
0 - 8	Count	2,271	98.74	99.39
99	Missing	29	1.26	0.61

ADVAIR (+ A. DISKUS): SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 888   **SAS Variable Name:** ILP01_1
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

ADVAIR (+ A. DISKUS): HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 889   **SAS Variable Name:** ILP02_1
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	19	13.19	19.96
2	6 months to 1 year	20	13.89	11.41
3	Longer than 1 year	100	69.44	66.91
7	Don´t know/Not sure	5	3.47	1.72
BLANK	Skip filled	2,156		

ADVAIR (+ A. DISKUS): WHETHER SPACER USED

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

Column: 890   **SAS Variable Name:** ILP03_1

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

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

ADVAIR (+ A. DISKUS): WHEN ATTACK

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

Column: 891   **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	52	36.11	47.49
2	No	77	53.47	44.87
3	No attack in past 3 months	12	8.33	7.17
7	Don´t know/Not sure	3	2.08	0.47
BLANK	Skip filled	2,156		

ADVAIR (+ A. DISKUS): BEFORE EXERCISING

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

Column: 892   **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	49	34.03	35.04
2	No	91	63.19	64.30
3	Didn't exercise in past 3 months	1	0.69	0.19
7	Don´t know/Not sure	3	2.08	0.47
BLANK	Skip filled	2,156		

ADVAIR (+ A. DISKUS): REGULAR SCHEDULE

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

Column: 893   **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	120	83.33	79.74
2	No	21	14.58	19.79
7	Don´t know/Not sure	3	2.08	0.47
BLANK	Skip filled	2,156		

ADVAIR (+ A. DISKUS): NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 894-895 **SAS Variable Name:** ILP07_1
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	141	97.92	99.20
77	Don´t know	3	2.08	0.80
BLANK	Skip filled	2,156		

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

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 896-898 **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	119	82.64	75.72
401 – 499	Weeks	14	9.72	15.75
555	Never	1	0.69	0.22
666	Less often than once a week	6	4.17	7.58
777	Don´t know	4	2.78	0.73
BLANK	Skip filled	2,156		

ADVAIR (+ A. DISKUS): NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 899-900 **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	2,300		

AEROBID: SIZE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 901 **SAS Variable Name:** ILP01_2
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

AEROBID: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 902 **SAS Variable Name:** ILP02_2
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	Longer than 1 year	1	100.00	100.00
BLANK	Skip filled	2,299		

AEROBID: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back

Column: 903

Type: NUM

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	2,299		

AEROBID: WHEN ATTACK

Survey: CHILD Asthma Call-Back

Column: 904

Type: NUM

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	2,299		

AEROBID: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back

Column: 905

Type: NUM

SAS Variable Name: ILP05_2

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	2,299		

AEROBID: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back

Column: 906

Type: NUM

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
1	Yes	1	100.00	100.00
BLANK	Skip filled	2,299		

AEROBID: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back

Column: 907-908

Type: NUM

SAS Variable Name: ILP07_2

Prologue:

Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 76	01-76 puffs	1	100.00	100.00
BLANK	Skip filled	2,299		

AEROBID: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 909-911
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_2

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	1	100.00	100.00
BLANK	Skip filled	2,299		

AEROBID: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 912-913
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_2

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

ALBUTEROL (+ A. SULFATE OR SALBUTAMOL): SIZE

Survey: CHILD Asthma Call-Back
Column: 914
Prologue:
Description: Q8.11 Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Type: NUM
SAS Variable Name: ILP01_3

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	80 puffs	51	14.17	12.11
2	100 puffs	51	14.17	13.60
3	200 puffs	153	42.50	46.14
4	Other number of puffs	23	6.39	7.38
5	Used different sizes of this medication in the past 3 months	1	0.28	0.06
7	Don´t know/Not sure	81	22.50	20.71
BLANK	Skip filled	1,940		

ALBUTEROL (+ A. SULFATE OR SALBUTAMOL): HOW LONG USED

Survey: CHILD Asthma Call-Back
Column: 915
Prologue:
Description: Q8.12 How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Type: NUM
SAS Variable Name: ILP02_3

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	32	8.89	12.04
2	6 months to 1 year	30	8.33	5.78
3	Longer than 1 year	284	78.89	80.55
7	Don´t know/Not sure	14	3.89	1.63
BLANK	Skip filled	1,940		

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

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 916 **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	168	46.67	50.67
2	No	178	49.44	45.00
7	Don´t know/Not sure	14	3.89	4.34
BLANK	Skip filled	1,940		

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

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 917 **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	306	85.00	88.62
2	No	24	6.67	6.30
3	No attack in past 3 months	16	4.44	3.11
7	Don´t know/Not sure	14	3.89	1.96
BLANK	Skip filled	1,940		

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

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 918 **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	162	45.00	46.72
2	No	170	47.22	45.61
3	Didn't exercise in past 3 months	9	2.50	3.98
7	Don´t know/Not sure	19	5.28	3.69
BLANK	Skip filled	1,940		

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

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 919 **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	78	21.67	27.99
2	No	268	74.44	70.17
7	Don´t know/Not sure	14	3.89	1.84
BLANK	Skip filled	1,940		

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

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 920-921 **SAS Variable Name:** ILP07_3
Prologue:
Description: Q8.17 On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	333	92.50	92.94
77	Don´t know	27	7.50	7.06
BLANK	Skip filled	1,940		

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

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 922-924 **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	102	28.33	26.08
401 – 499	Weeks	107	29.72	29.84
555	Never	4	1.11	3.00
666	Less often than once a week	113	31.39	35.42
777	Don´t know	34	9.44	5.66
BLANK	Skip filled	1,940		

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

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 925-926 **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	245	68.06	73.03
77	Don´t know	30	8.33	5.37
88	None/Less than 1 full canister	85	23.61	21.61
BLANK	Skip filled	1,940		

ALUPENT: SIZE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 927 **SAS Variable Name:** ILP01_4
Prologue:
Description: Q8.11 Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
7	Don´t know/Not sure	1	100.00	100.00
BLANK	Skip filled	2,299		

ALUPENT: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 928   **SAS Variable Name:** ILP02_4
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	Longer than 1 year	1	100.00	100.00
BLANK	Skip filled	2,299		

ALUPENT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 929   **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
1	Yes	1	100.00	100.00
BLANK	Skip filled	2,299		

ALUPENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 930   **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
1	Yes	1	100.00	100.00
BLANK	Skip filled	2,299		

ALUPENT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 931   **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
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

ALUPENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 932   **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
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

ALUPENT: NUMBER OF PUFFS
     Survey: CHILD Asthma Call-Back   **Type:** NUM
     Column: 933-934   **SAS Variable Name:** ILP07_4
     Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	1	100.00	100.00
BLANK	Skip filled	2,299		

ALUPENT: TIMES PER DAY/WEEK
     Survey: CHILD Asthma Call-Back   **Type:** NUM
     Column: 935-937   **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
666	Less often than once a week	1	100.00	100.00
BLANK	Skip filled	2,299		

ALUPENT: NUMBER OF CANISTERS
     Survey: CHILD Asthma Call-Back   **Type:** NUM
     Column: 938-939   **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
88	None/Less than 1 full canister	1	100.00	100.00
BLANK	Skip filled	2,299		

ATROVENT: SIZE
     Survey: CHILD Asthma Call-Back   **Type:** NUM
     Column: 940   **SAS Variable Name:** ILP01_5
     Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

ATROVENT: HOW LONG USED
     Survey: CHILD Asthma Call-Back   **Type:** NUM
     Column: 941   **SAS Variable Name:** ILP02_5
     Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	6 months to 1 year	1	50.00	94.69
3	Longer than 1 year	1	50.00	5.31
BLANK	Skip filled	2,298		

ATROVENT: WHETHER SPACER USED

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

Column: 942   **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	2	100.00	100.00
BLANK	Skip filled	2,298		

ATROVENT: WHEN ATTACK

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

Column: 943   **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	5.31
2	No	1	50.00	94.69
BLANK	Skip filled	2,298		

ATROVENT: BEFORE EXERCISING

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

Column: 944   **SAS Variable Name:** ILP05_5

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	2	100.00	100.00
BLANK	Skip filled	2,298		

ATROVENT: REGULAR SCHEDULE

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

Column: 945   **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	94.69
2	No	1	50.00	5.31
BLANK	Skip filled	2,298		

ATROVENT: NUMBER OF PUFFS

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

Column: 946-947   **SAS Variable Name:** ILP07_5

Prologue:

Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	2	100.00	100.00
BLANK	Skip filled	2,298		

ATROVENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 948-950   **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	94.69
666	Less often than once a week	1	50.00	5.31
BLANK	Skip filled	2,298		

ATROVENT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 951-952   **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	2,300		

AZMACORT: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 953   **SAS Variable Name:** ILP01_6
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

AZMACORT: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 954   **SAS Variable Name:** ILP02_6
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	1	12.50	7.75
2	6 months to 1 year	2	25.00	7.52
3	Longer than 1 year	5	62.50	84.73
BLANK	Skip filled	2,292		

AZMACORT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 955   **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	4	50.00	78.90
2	No	3	37.50	15.68
3	Medication is a disk inhaler, not a canister inhaler	1	12.50	5.42
BLANK	Skip filled	2,292		

AZMACORT: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 956 **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
1	Yes	5	62.50	81.10
2	No	2	25.00	11.84
3	No attack in past 3 months	1	12.50	7.07
BLANK	Skip filled	2,292		

AZMACORT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 957 **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
1	Yes	4	50.00	83.87
2	No	4	50.00	16.13
BLANK	Skip filled	2,292		

AZMACORT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 958 **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	4	50.00	21.34
2	No	4	50.00	78.66
BLANK	Skip filled	2,292		

AZMACORT: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 959-960 **SAS Variable Name:** ILP07_6
Prologue:
Description: Q8.17 On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 76	01-76 puffs	7	87.50	92.93
77	Don´t know	1	12.50	7.07
BLANK	Skip filled	2,292		

AZMACORT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 961-963 **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	6	75.00	30.95
666	Less often than once a week	2	25.00	69.05
BLANK	Skip filled	2,292		

AZMACORT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 964-965   **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	2,300		

BECLOMETHASONE DIPROPIONATE: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 966   **SAS Variable Name:** ILP01_7
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

BECLOMETHASONE DIPROPIONATE: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 967   **SAS Variable Name:** ILP02_7
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	1	50.00	20.45
2	6 months to 1 year	1	50.00	79.55
BLANK	Skip filled	2,298		

BECLOMETHASONE DIPROPIONATE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 968   **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
1	Yes	1	50.00	79.55
2	No	1	50.00	20.45
BLANK	Skip filled	2,298		

BECLOMETHASONE DIPROPIONATE: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 969   **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
2	No	2	100.00	100.00
BLANK	Skip filled	2,298		

BECLOMETHASONE DIPROPIONATE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 970 **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	2,298		

BECLOMETHASONE DIPROPIONATE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 971 **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	2,298		

BECLOMETHASONE DIPROPIONATE: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 972-973 **SAS Variable Name:** ILP07_7
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	2	100.00	100.00
BLANK	Skip filled	2,298		

BECLOMETHASONE DIPROPIONATE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 974-976 **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	2,298		

BECLOMETHASONE DIPROPIONATE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 977-978 **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	2,300		

BECLOVENT: SIZE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 979 **SAS Variable Name:** ILP01_8
Prologue:
Description: Q8.11 Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

BECLOVENT: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 980 **SAS Variable Name:** ILP02_8
Prologue:
Description: Q8.12 How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

BECLOVENT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 981 **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	2,300		

BECLOVENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 982 **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	2,300		

BECLOVENT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 983 **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	2,300		

BECLOVENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 984 **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	2,300		

BECLOVENT: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 985-986 **SAS Variable Name:** ILP07_8
Prologue:
Description: Q8.17 On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

BECLOVENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 987-989 **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	2,300		

BECLOVENT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 990-991 **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	2,300		

BITOLTEROL: SIZE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 992 **SAS Variable Name:** ILP01_9
Prologue:
Description: Q8.11 Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

BITOLTEROL: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 993 **SAS Variable Name:** ILP02_9
Prologue:
Description: Q8.12 How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

BITOLTEROL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 994 **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
BLANK	Skip filled	2,300		

BITOLTEROL: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 995 **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
BLANK	Skip filled	2,300		

BITOLTEROL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 996 **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
BLANK	Skip filled	2,300		

BITOLTEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 997 **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
BLANK	Skip filled	2,300		

BITOLTEROL: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 998-999 **SAS Variable Name:** ILP07_9
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

BITOLTEROL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1000-1002 **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
BLANK	Skip filled	2,300		

BITOLTEROL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1003-1004 **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
BLANK	Skip filled	2,300		

BRETHAIRE: SIZE

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1005　　　　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP01_10
Prologue:
Description: Q8.11　Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

BRETHAIRE: HOW LONG USED

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1006　　　　　　　　　　　　　　　　　　　　　　**SAS Variable Name:** ILP02_10
Prologue:
Description: Q8.12　How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

BRETHAIRE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1007　　　　　　　　　　　　　　　　　　　　　　**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	2,300		

BRETHAIRE: WHEN ATTACK

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1008　　　　　　　　　　　　　　　　　　　　　　**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	2,300		

BRETHAIRE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　　　　　**Type:** NUM
Column: 1009　　　　　　　　　　　　　　　　　　　　　　**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	2,300		

BRETHAIRE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1010   **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	2,300		

BRETHAIRE: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1011-1012   **SAS Variable Name:** ILP07_10
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

BRETHAIRE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1013-1015   **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	2,300		

BRETHAIRE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1016-1017   **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	2,300		

BUDESONIDE: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1018   **SAS Variable Name:** ILP01_11
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

BUDESONIDE: HOW LONG USED

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

Column: 1019   **SAS Variable Name:** ILP02_11

Prologue:

Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	1	33.33	54.40
2	6 months to 1 year	1	33.33	25.76
3	Longer than 1 year	1	33.33	19.85
BLANK	Skip filled	2,297		

BUDESONIDE: WHETHER SPACER USED

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

Column: 1020   **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	33.33	25.76
2	No	2	66.67	74.24
BLANK	Skip filled	2,297		

BUDESONIDE: WHEN ATTACK

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

Column: 1021   **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	2	66.67	80.15
2	No	1	33.33	19.85
BLANK	Skip filled	2,297		

BUDESONIDE: BEFORE EXERCISING

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

Column: 1022   **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
1	Yes	2	66.67	80.15
2	No	1	33.33	19.85
BLANK	Skip filled	2,297		

BUDESONIDE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1023   **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	2	66.67	45.60
2	No	1	33.33	54.40
BLANK	Skip filled	2,297		

BUDESONIDE: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1024-1025   **SAS Variable Name:** ILP07_11
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
77	Don´t know	3	100.00	100.00
BLANK	Skip filled	2,297		

BUDESONIDE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1026-1028   **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	33.33	25.76
401 - 499	Weeks	1	33.33	19.85
666	Less often than once a week	1	33.33	54.40
BLANK	Skip filled	2,297		

BUDESONIDE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1029-1030   **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	2,300		

COMBIVENT: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1031   **SAS Variable Name:** ILP01_12
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

COMBIVENT: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1032 **SAS Variable Name:** ILP02_12
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	2	22.22	32.58
2	6 months to 1 year	1	11.11	2.78
3	Longer than 1 year	4	44.44	47.35
7	Don´t know/Not sure	2	22.22	17.28
BLANK	Skip filled	2,291		

COMBIVENT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1033 **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	6	66.67	56.52
2	No	2	22.22	35.04
7	Don´t know/Not sure	1	11.11	8.44
BLANK	Skip filled	2,291		

COMBIVENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1034 **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	6	66.67	79.02
3	No attack in past 3 months	1	11.11	3.70
7	Don´t know/Not sure	2	22.22	17.28
BLANK	Skip filled	2,291		

COMBIVENT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1035 **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	3	33.33	22.70
2	No	5	55.56	68.86
7	Don´t know/Not sure	1	11.11	8.44
BLANK	Skip filled	2,291		

COMBIVENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1036   **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	2	22.22	13.86
2	No	6	66.67	77.70
7	Don´t know/Not sure	1	11.11	8.44
BLANK	Skip filled	2,291		

COMBIVENT: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1037-1038   **SAS Variable Name:** ILP07_12
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	8	88.89	91.56
77	Don´t know	1	11.11	8.44
BLANK	Skip filled	2,291		

COMBIVENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1039-1041   **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	22.22	13.86
401 – 499	Weeks	3	33.33	25.99
666	Less often than once a week	2	22.22	42.87
777	Don´t know	2	22.22	17.28
BLANK	Skip filled	2,291		

COMBIVENT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1042-1043   **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	2,300		

CROMOLYN: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1044   **SAS Variable Name:** ILP01_13
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

CROMOLYN: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1045 **SAS Variable Name:** ILP02_13
Prologue:
Description: Q8.12 How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

CROMOLYN: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1046 **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	2,300		

CROMOLYN: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1047 **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	2,300		

CROMOLYN: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1048 **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	2,300		

CROMOLYN: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1049 **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	2,300		

CROMOLYN: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1050-1051 **SAS Variable Name:** ILP07_13
Prologue:
Description: Q8.17 On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

CROMOLYN: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1052-1054
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	2,300		

CROMOLYN: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 1055-1056
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	2,300		

FLOVENT: SIZE

Survey: CHILD Asthma Call-Back
Column: 1057
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Type: NUM
SAS Variable Name: ILP01_14

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

FLOVENT: HOW LONG USED

Survey: CHILD Asthma Call-Back
Column: 1058
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Type: NUM
SAS Variable Name: ILP02_14

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	30	17.65	15.42
2	6 months to 1 year	37	21.76	26.49
3	Longer than 1 year	96	56.47	56.15
7	Don´t know/Not sure	7	4.12	1.94
BLANK	Skip filled	2,130		

FLOVENT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back
Column: 1059
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	121	71.18	78.54
2	No	43	25.29	20.47
7	Don´t know/Not sure	6	3.53	0.98
BLANK	Skip filled	2,130		

FLOVENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1060   **SAS Variable Name:** ILP04_14
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	75	44.12	49.14
2	No	68	40.00	35.54
3	No attack in past 3 months	21	12.35	14.37
7	Don´t know/Not sure	6	3.53	0.94
BLANK	Skip filled	2,130		

FLOVENT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1061   **SAS Variable Name:** ILP05_14
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	54	31.76	39.44
2	No	106	62.35	52.45
3	Didn't exercise in past 3 months	4	2.35	7.05
7	Don´t know/Not sure	6	3.53	1.05
BLANK	Skip filled	2,130		

FLOVENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1062   **SAS Variable Name:** ILP06_14
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	128	75.29	76.74
2	No	37	21.76	22.56
7	Don´t know/Not sure	5	2.94	0.70
BLANK	Skip filled	2,130		

FLOVENT: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1063-1064   **SAS Variable Name:** ILP07_14
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 76	01-76 puffs	165	97.06	99.30
77	Don´t know	5	2.94	0.70
BLANK	Skip filled	2,130		

FLOVENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1065-1067   **SAS Variable Name:** ILP08_14
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	130	76.47	75.46
401 – 499	Weeks	18	10.59	11.79
666	Less often than once a week	14	8.24	11.42
777	Don´t know	7	4.12	1.27
999	Refused	1	0.59	0.07
BLANK	Skip filled	2,130		

FLOVENT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1068-1069   **SAS Variable Name:** ILP10_14
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

FLOVENT ROTADISK: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1070   **SAS Variable Name:** ILP01_15
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

FLOVENT ROTADISK: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1071   **SAS Variable Name:** ILP02_15
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	1	16.67	15.25
2	6 months to 1 year	2	33.33	56.30
3	Longer than 1 year	2	33.33	23.49
7	Don´t know/Not sure	1	16.67	4.96
BLANK	Skip filled	2,294		

FLOVENT ROTADISK: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1072   **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	2,300		

FLOVENT ROTADISK: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1073   **SAS Variable Name:** ILP04_15
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	5	83.33	95.04
7	Don´t know/Not sure	1	16.67	4.96
BLANK	Skip filled	2,294		

FLOVENT ROTADISK: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1074   **SAS Variable Name:** ILP05_15
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	5	83.33	95.04
7	Don´t know/Not sure	1	16.67	4.96
BLANK	Skip filled	2,294		

FLOVENT ROTADISK: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1075   **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	2	33.33	30.57
2	No	3	50.00	64.47
7	Don´t know/Not sure	1	16.67	4.96
BLANK	Skip filled	2,294		

FLOVENT ROTADISK: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1076-1077   **SAS Variable Name:** ILP07_15
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	5	83.33	95.04
77	Don´t know	1	16.67	4.96
BLANK	Skip filled	2,294		

FLOVENT ROTADISK: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1078-1080   **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	4	66.67	54.06
401 – 499	Weeks	1	16.67	40.98
777	Don´t know	1	16.67	4.96
BLANK	Skip filled	2,294		

FLOVENT ROTADISK: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1081-1082   **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	2,300		

FLUNISOLIDE: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1083   **SAS Variable Name:** ILP01_16
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

FLUNISOLIDE: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1084   **SAS Variable Name:** ILP02_16
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	6 months to 1 year	1	100.00	100.00
BLANK	Skip filled	2,299		

FLUNISOLIDE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1085   **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
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

FLUNISOLIDE: WHEN ATTACK

Survey: CHILD Asthma Call-Back	**Type:** NUM
Column: 1086	**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
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

FLUNISOLIDE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back	**Type:** NUM
Column: 1087	**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
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

FLUNISOLIDE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back	**Type:** NUM
Column: 1088	**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
7	Don´t know/Not sure	1	100.00	100.00
BLANK	Skip filled	2,299		

FLUNISOLIDE: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back	**Type:** NUM
Column: 1089-1090	**SAS Variable Name:** ILP07_16

Prologue:

Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 76	01-76 puffs	1	100.00	100.00
BLANK	Skip filled	2,299		

FLUNISOLIDE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back	**Type:** NUM
Column: 1091-1093	**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
777	Don´t know	1	100.00	100.00
BLANK	Skip filled	2,299		

FLUNISOLIDE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1094-1095   **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	2,300		

FLUTICASONE: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1096   **SAS Variable Name:** ILP01_17
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

FLUTICASONE: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1097   **SAS Variable Name:** ILP02_17
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	2	66.67	87.81
2	6 months to 1 year	1	33.33	12.19
BLANK	Skip filled	2,297		

FLUTICASONE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1098   **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	70.95
2	No	2	66.67	29.05
BLANK	Skip filled	2,297		

FLUTICASONE: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1099   **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	16.86
2	No	2	66.67	83.14
BLANK	Skip filled	2,297		

FLUTICASONE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back		**Type:** NUM
Column: 1100		**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
2	No	2	66.67	87.81
3	Didn't exercise in past 3 months	1	33.33	12.19
BLANK	Skip filled	2,297		

FLUTICASONE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back		**Type:** NUM
Column: 1101		**SAS Variable Name:** ILP06_17

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	3	100.00	100.00
BLANK	Skip filled	2,297		

FLUTICASONE: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back		**Type:** NUM
Column: 1102-1103		**SAS Variable Name:** ILP07_17

Prologue:

Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	3	100.00	100.00
BLANK	Skip filled	2,297		

FLUTICASONE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back		**Type:** NUM
Column: 1104-1106		**SAS Variable Name:** ILP08_17

Prologue:

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	3	100.00	100.00
BLANK	Skip filled	2,297		

FLUTICASONE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back		**Type:** NUM
Column: 1107-1108		**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	2,300		

INTAL: SIZE

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

Column: 1109   **SAS Variable Name:** ILP01_18

Prologue:

Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

INTAL: HOW LONG USED

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

Column: 1110   **SAS Variable Name:** ILP02_18

Prologue:

Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	Longer than 1 year	1	100.00	100.00
BLANK	Skip filled	2,299		

INTAL: WHETHER SPACER USED

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

Column: 1111   **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
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

INTAL: WHEN ATTACK

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

Column: 1112   **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
3	No attack in past 3 months	1	100.00	100.00
BLANK	Skip filled	2,299		

INTAL: BEFORE EXERCISING

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

Column: 1113   **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	2,299		

INTAL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1114   **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
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

INTAL: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1115-1116   **SAS Variable Name:** ILP07_18
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 76	01-76 puffs	1	100.00	100.00
BLANK	Skip filled	2,299		

INTAL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1117-1119   **SAS Variable Name:** ILP08_18
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
401 - 499	Weeks	1	100.00	100.00
BLANK	Skip filled	2,299		

INTAL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1120-1121   **SAS Variable Name:** ILP10_18
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

IPRATROPIUM BROMIDE: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1122   **SAS Variable Name:** ILP01_19
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

IPRATROPIUM BROMIDE: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1123 **SAS Variable Name:** ILP02_19
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

IPRATROPIUM BROMIDE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1124 **SAS Variable Name:** ILP03_19
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

IPRATROPIUM BROMIDE: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1125 **SAS Variable Name:** ILP04_19
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

IPRATROPIUM BROMIDE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1126 **SAS Variable Name:** ILP05_19
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

IPRATROPIUM BROMIDE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1127 **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
BLANK	Skip filled	2,300		

IPRATROPIUM BROMIDE: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1128-1129 **SAS Variable Name:** ILP07_19
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

IPRATROPIUM BROMIDE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1130-1132   **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
BLANK	Skip filled	2,300		

IPRATROPIUM BROMIDE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1133-1134   **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	2,300		

MAXAIR: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1135   **SAS Variable Name:** ILP01_20
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

MAXAIR: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1136   **SAS Variable Name:** ILP02_20
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	6 months to 1 year	1	10.00	3.47
3	Longer than 1 year	9	90.00	96.53
BLANK	Skip filled	2,290		

MAXAIR: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1137   **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
1	Yes	1	10.00	16.40
2	No	8	80.00	80.12
3	Medication is a disk inhaler, not a canister inhaler	1	10.00	3.47
BLANK	Skip filled	2,290		

MAXAIR: WHEN ATTACK

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

Column: 1138   **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	7	70.00	52.31
2	No	3	30.00	47.69
BLANK	Skip filled	2,290		

MAXAIR: BEFORE EXERCISING

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

Column: 1139   **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	7	70.00	78.93
2	No	2	20.00	17.59
3	Didn't exercise in past 3 months	1	10.00	3.47
BLANK	Skip filled	2,290		

MAXAIR: REGULAR SCHEDULE

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

Column: 1140   **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	4	40.00	22.49
2	No	6	60.00	77.51
BLANK	Skip filled	2,290		

MAXAIR: NUMBER OF PUFFS

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

Column: 1141-1142   **SAS Variable Name:** ILP07_20

Prologue:

Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	10	100.00	100.00
BLANK	Skip filled	2,290		

MAXAIR: TIMES PER DAY/WEEK

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

Column: 1143-1145   **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	6	60.00	57.03
401 – 499	Weeks	2	20.00	24.20
666	Less often than once a week	2	20.00	18.77
BLANK	Skip filled	2,290		

MAXAIR: NUMBER OF CANISTERS

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

    Column: 1146-1147   **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	8	80.00	81.23
88	None/Less than 1 full canister	2	20.00	18.77
BLANK	Skip filled	2,290		

METAPROTERONOL: SIZE

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

    Column: 1148   **SAS Variable Name:** ILP01_21

    Prologue:

Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

METAPROTERONOL: HOW LONG USED

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

    Column: 1149   **SAS Variable Name:** ILP02_21

    Prologue:

Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

METAPROTERONOL: WHETHER SPACER USED

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

    Column: 1150   **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	2,300		

METAPROTERONOL: WHEN ATTACK

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

    Column: 1151   **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	2,300		

METAPROTERONOL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Column: 1152
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_21

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

METAPROTERONOL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1153
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_21

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

METAPROTERONOL: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back
Column: 1154-1155
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Type: NUM
SAS Variable Name: ILP07_21

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

METAPROTERONOL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1156-1158
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_21

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

METAPROTERONOL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 1159-1160
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_21

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

NEDOCROMIL: SIZE

Survey: CHILD Asthma Call-Back
Column: 1161
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Type: NUM
SAS Variable Name: ILP01_22

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

NEDOCROMIL: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1162 **SAS Variable Name:** ILP02_22
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

NEDOCROMIL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1163 **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	2,300		

NEDOCROMIL: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1164 **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	2,300		

NEDOCROMIL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1165 **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	2,300		

NEDOCROMIL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1166 **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	2,300		

NEDOCROMIL: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1167-1168 **SAS Variable Name:** ILP07_22
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

NEDOCROMIL: TIMES PER DAY/WEEK
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1169-1171   **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	2,300		

NEDOCROMIL: NUMBER OF CANISTERS
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1172-1173   **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	2,300		

PIRBUTEROL: SIZE
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1174   **SAS Variable Name:** ILP01_23
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PIRBUTEROL: HOW LONG USED
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1175   **SAS Variable Name:** ILP02_23
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	6 months to 1 year	1	100.00	100.00
BLANK	Skip filled	2,299		

PIRBUTEROL: WHETHER SPACER USED
Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1176   **SAS Variable Name:** ILP03_23
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

PIRBUTEROL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1177   **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
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

PIRBUTEROL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1178   **SAS Variable Name:** ILP05_23
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	100.00	100.00
BLANK	Skip filled	2,299		

PIRBUTEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1179   **SAS Variable Name:** ILP06_23
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

PIRBUTEROL: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1180-1181   **SAS Variable Name:** ILP07_23
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	1	100.00	100.00
BLANK	Skip filled	2,299		

PIRBUTEROL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1182-1184   **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
301 – 399	Days	1	100.00	100.00
BLANK	Skip filled	2,299		

PIRBUTEROL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1185-1186   **SAS Variable Name:** ILP10_23
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 76	01-76 canisters	1	100.00	100.00
BLANK	Skip filled	2,299		

PROVENTIL: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1187   **SAS Variable Name:** ILP01_24
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	80 puffs	9	19.15	19.28
2	100 puffs	6	12.77	3.31
3	200 puffs	19	40.43	39.89
4	Other number of puffs	3	6.38	13.99
7	Don´t know/Not sure	10	21.28	23.52
BLANK	Skip filled	2,253		

PROVENTIL: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1188   **SAS Variable Name:** ILP02_24
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	7	14.89	8.67
2	6 months to 1 year	9	19.15	23.50
3	Longer than 1 year	30	63.83	66.99
7	Don´t know/Not sure	1	2.13	0.84
BLANK	Skip filled	2,253		

PROVENTIL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1189   **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	21	44.68	45.67
2	No	26	55.32	54.33
BLANK	Skip filled	2,253		

PROVENTIL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1190   **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	37	78.72	80.32
2	No	7	14.89	16.71
3	No attack in past 3 months	3	6.38	2.97
BLANK	Skip filled	2,253		

PROVENTIL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1191   **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	27	57.45	47.32
2	No	17	36.17	49.99
3	Didn't exercise in past 3 months	2	4.26	2.15
7	Don´t know/Not sure	1	2.13	0.53
BLANK	Skip filled	2,253		

PROVENTIL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1192   **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	10	21.28	29.80
2	No	37	78.72	70.20
BLANK	Skip filled	2,253		

PROVENTIL: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1193-1194   **SAS Variable Name:** ILP07_24
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	47	100.00	100.00
BLANK	Skip filled	2,253		

PROVENTIL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1195-1197 **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	12	25.53	30.03
401 – 499	Weeks	16	34.04	15.19
666	Less often than once a week	17	36.17	52.63
777	Don´t know	2	4.26	2.15
BLANK	Skip filled	2,253		

PROVENTIL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1198-1199 **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	30	63.83	77.18
77	Don´t know	4	8.51	3.02
88	None/Less than 1 full canister	13	27.66	19.80
BLANK	Skip filled	2,253		

PULMICORT TURBUHALER: SIZE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1200 **SAS Variable Name:** ILP01_25
Prologue:
Description: Q8.11 Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PULMICORT TURBUHALER: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1201 **SAS Variable Name:** ILP02_25
Prologue:
Description: Q8.12 How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	4	14.81	9.13
2	6 months to 1 year	3	11.11	7.57
3	Longer than 1 year	19	70.37	81.33
7	Don´t know/Not sure	1	3.70	1.96
BLANK	Skip filled	2,273		

PULMICORT TURBUHALER: WHETHER SPACER USED

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

Column: 1202   **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
1	Yes	6	22.22	24.43
2	No	19	70.37	59.34
3	Medication is a disk inhaler, not a canister inhaler	1	3.70	14.27
7	Don´t know/Not sure	1	3.70	1.96
BLANK	Skip filled	2,273		

PULMICORT TURBUHALER: WHEN ATTACK

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

Column: 1203   **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	15	55.56	53.83
2	No	9	33.33	38.46
3	No attack in past 3 months	2	7.41	5.74
7	Don´t know/Not sure	1	3.70	1.96
BLANK	Skip filled	2,273		

PULMICORT TURBUHALER: BEFORE EXERCISING

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

Column: 1204   **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	10	37.04	29.65
2	No	16	59.26	68.39
7	Don´t know/Not sure	1	3.70	1.96
BLANK	Skip filled	2,273		

PULMICORT TURBUHALER: REGULAR SCHEDULE

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

Column: 1205   **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	20	74.07	68.41
2	No	6	22.22	29.62
7	Don´t know/Not sure	1	3.70	1.96
BLANK	Skip filled	2,273		

PULMICORT TURBUHALER: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1206-1207   **SAS Variable Name:** ILP07_25
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	25	92.59	90.90
77	Don´t know	2	7.41	9.10
BLANK	Skip filled	2,273		

PULMICORT TURBUHALER: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1208-1210   **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	21	77.78	75.10
401 – 499	Weeks	3	11.11	8.72
666	Less often than once a week	2	7.41	14.21
777	Don´t know	1	3.70	1.96
BLANK	Skip filled	2,273		

PULMICORT TURBUHALER: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1211-1212   **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	2,300		

SALMETEROL: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1213   **SAS Variable Name:** ILP01_26
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

SALMETEROL: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1214   **SAS Variable Name:** ILP02_26
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

SALMETEROL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1215   **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	2,300		

SALMETEROL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1216   **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	2,300		

SALMETEROL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1217   **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	2,300		

SALMETEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1218   **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	2,300		

SALMETEROL: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1219-1220   **SAS Variable Name:** ILP07_26
Prologue:
Description: Q8.17　On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

SALMETEROL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1221-1223   **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	2,300		

SALMETEROL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1224-1225   **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	2,300		

SEREVENT: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1226   **SAS Variable Name:** ILP01_27
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

SEREVENT: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1227   **SAS Variable Name:** ILP02_27
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	6 months to 1 year	1	50.00	89.99
3	Longer than 1 year	1	50.00	10.01
BLANK	Skip filled	2,298		

SEREVENT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1228   **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
1	Yes	1	50.00	89.99
2	No	1	50.00	10.01
BLANK	Skip filled	2,298		

SEREVENT: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1229   **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
1	Yes	1	50.00	89.99
2	No	1	50.00	10.01
BLANK	Skip filled	2,298		

SEREVENT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1230   **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
2	No	2	100.00	100.00
BLANK	Skip filled	2,298		

SEREVENT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1231   **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
1	Yes	1	50.00	10.01
2	No	1	50.00	89.99
BLANK	Skip filled	2,298		

SEREVENT: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1232-1233   **SAS Variable Name:** ILP07_27
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	2	100.00	100.00
BLANK	Skip filled	2,298		

SEREVENT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1234-1236   **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
301 – 399	Days	1	50.00	10.01
401 – 499	Weeks	1	50.00	89.99
BLANK	Skip filled	2,298		

SEREVENT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1237-1238   **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	2,300		

TERBUTALINE (+ T. SULFATE): SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1239   **SAS Variable Name:** ILP01_28
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TERBUTALINE (+ T. SULFATE): HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1240   **SAS Variable Name:** ILP02_28
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TERBUTALINE (+ T. SULFATE): WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1241   **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	2,300		

TERBUTALINE (+ T. SULFATE): WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1242   **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	2,300		

TERBUTALINE (+ T. SULFATE): BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1243   **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	2,300		

TERBUTALINE (+ T. SULFATE): REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1244   **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	2,300		

TERBUTALINE (+ T. SULFATE): NUMBER OF PUFFS

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

Column: 1245-1246   **SAS Variable Name:** ILP07_28

Prologue:

Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TERBUTALINE (+ T. SULFATE): TIMES PER DAY/WEEK

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

Column: 1247-1249   **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	2,300		

TERBUTALINE (+ T. SULFATE): NUMBER OF CANISTERS

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

Column: 1250-1251   **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	2,300		

TILADE: SIZE

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

Column: 1252   **SAS Variable Name:** ILP01_29

Prologue:

Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TILADE: HOW LONG USED

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

Column: 1253   **SAS Variable Name:** ILP02_29

Prologue:

Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TILADE: WHETHER SPACER USED

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

Column: 1254   **SAS Variable Name:** ILP03_29

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

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

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TILADE: WHEN ATTACK

Survey: CHILD Asthma Call-Back
Column: 1255
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	2,300		

TILADE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Column: 1256
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	2,300		

TILADE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1257
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	2,300		

TILADE: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back
Column: 1258-1259
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TILADE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1260-1262
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	2,300		

TILADE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 1263-1264
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	2,300		

Type: NUM
SAS Variable Name: ILP04_29

TORNALATE: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1265   **SAS Variable Name:** ILP01_30
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TORNALATE: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1266   **SAS Variable Name:** ILP02_30
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TORNALATE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1267   **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	2,300		

TORNALATE: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1268   **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	2,300		

TORNALATE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1269   **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	2,300		

TORNALATE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1270
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_30

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TORNALATE: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back
Column: 1271-1272
Prologue:
Description: Q8.17 On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Type: NUM
SAS Variable Name: ILP07_30

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TORNALATE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1273-1275
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_30

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TORNALATE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 1276-1277
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	2,300		

TRIAMCINOLONE ACETONIDE: SIZE

Survey: CHILD Asthma Call-Back
Column: 1278
Prologue:
Description: Q8.11 Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Type: NUM
SAS Variable Name: ILP01_31

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TRIAMCINOLONE ACETONIDE: HOW LONG USED

Survey: CHILD Asthma Call-Back
Column: 1279
Prologue:
Description: Q8.12 How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Type: NUM
SAS Variable Name: ILP02_31

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TRIAMCINOLONE ACETONIDE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1280 **SAS Variable Name:** ILP03_31
Prologue: A spacer is a small attachment for an inhaler that makes it easier to use.
Description: Q8.13   Does [he/she] use a spacer with [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TRIAMCINOLONE ACETONIDE: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1281 **SAS Variable Name:** ILP04_31
Prologue:
Description: Q8.14   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] when [he/she] had an asthma episode or attack?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TRIAMCINOLONE ACETONIDE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1282 **SAS Variable Name:** ILP05_31
Prologue:
Description: Q8.15   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] before exercising?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TRIAMCINOLONE ACETONIDE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1283 **SAS Variable Name:** ILP06_31
Prologue:
Description: Q8.16   In the past 3 months, did [he/she] take [MEDICINE FROM INH_MEDS SERIES] on a regular schedule every day?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TRIAMCINOLONE ACETONIDE: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1284-1285 **SAS Variable Name:** ILP07_31
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TRIAMCINOLONE ACETONIDE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1286-1288 **SAS Variable Name:** ILP08_31
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

TRIAMCINOLONE ACETONIDE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1289-1290   **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	2,300		

VANCERIL: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1291   **SAS Variable Name:** ILP01_32
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

VANCERIL: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1292   **SAS Variable Name:** ILP02_32
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

VANCERIL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1293   **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	2,300		

VANCERIL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1294   **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	2,300		

VANCERIL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1295   **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	2,300		

VANCERIL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1296   **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	2,300		

VANCERIL: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1297-1298   **SAS Variable Name:** ILP07_32
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

VANCERIL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1299-1301   **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	2,300		

VANCERIL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1302-1303   **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	2,300		

VENTOLIN: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1304   **SAS Variable Name:** ILP01_33
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	80 puffs	9	9.28	10.32
2	100 puffs	3	3.09	2.20
3	200 puffs	64	65.98	44.92
4	Other number of puffs	13	13.40	37.06
7	Don´t know/Not sure	8	8.25	5.49
BLANK	Skip filled	2,203		

VENTOLIN: HOW LONG USED

Survey: CHILD Asthma Call-Back
Column: 1305

Type: NUM
SAS Variable Name: ILP02_33

Prologue:

Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	23	23.71	41.77
2	6 months to 1 year	15	15.46	10.31
3	Longer than 1 year	56	57.73	47.75
7	Don´t know/Not sure	3	3.09	0.16
BLANK	Skip filled	2,203		

VENTOLIN: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back
Column: 1306

Type: NUM
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	54	55.67	73.51
2	No	39	40.21	25.15
7	Don´t know/Not sure	4	4.12	1.34
BLANK	Skip filled	2,203		

VENTOLIN: WHEN ATTACK

Survey: CHILD Asthma Call-Back
Column: 1307

Type: NUM
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	75	77.32	83.33
2	No	11	11.34	12.87
3	No attack in past 3 months	6	6.19	3.07
7	Don´t know/Not sure	5	5.15	0.73
BLANK	Skip filled	2,203		

VENTOLIN: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Column: 1308

Type: NUM
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	53	54.64	41.84
2	No	38	39.18	55.09
3	Didn't exercise in past 3 months	1	1.03	1.09
7	Don´t know/Not sure	5	5.15	1.98
BLANK	Skip filled	2,203		

VENTOLIN: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1309 **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	25	25.77	21.05
2	No	68	70.10	77.00
7	Don´t know/Not sure	4	4.12	1.95
BLANK	Skip filled	2,203		

VENTOLIN: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1310-1311 **SAS Variable Name:** ILP07_33
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	91	93.81	97.27
77	Don´t know	6	6.19	2.73
BLANK	Skip filled	2,203		

VENTOLIN: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1312-1314 **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	29	29.90	22.65
401 – 499	Weeks	33	34.02	26.73
666	Less often than once a week	31	31.96	49.75
777	Don´t know	4	4.12	0.87
BLANK	Skip filled	2,203		

VENTOLIN: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1315-1316 **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	70	72.16	59.85
77	Don´t know	5	5.15	0.77
88	None/Less than 1 full canister	22	22.68	39.39
BLANK	Skip filled	2,203		

FORADIL: SIZE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1317 **SAS Variable Name:** ILP01_34
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

FORADIL: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1318 **SAS Variable Name:** ILP02_34
Prologue:
Description: Q8.12 How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	Longer than 1 year	2	100.00	100.00
BLANK	Skip filled	2,298		

FORADIL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1319 **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
1	Yes	1	50.00	40.46
2	No	1	50.00	59.54
BLANK	Skip filled	2,298		

FORADIL: WHEN ATTACK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1320 **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
1	Yes	2	100.00	100.00
BLANK	Skip filled	2,298		

FORADIL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1321 **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
1	Yes	1	50.00	59.54
2	No	1	50.00	40.46
BLANK	Skip filled	2,298		

FORADIL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1322 **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
1	Yes	1	50.00	59.54
2	No	1	50.00	40.46
BLANK	Skip filled	2,298		

FORADIL: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1323-1324   **SAS Variable Name:** ILP07_34
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	2	100.00	100.00
BLANK	Skip filled	2,298		

FORADIL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1325-1327   **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
301 – 399	Days	1	50.00	59.54
555	Never	1	50.00	40.46
BLANK	Skip filled	2,298		

FORADIL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1328-1329   **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	2,300		

FORMOTEROL: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1330   **SAS Variable Name:** ILP01_35
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

FORMOTEROL: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1331   **SAS Variable Name:** ILP02_35
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	1	100.00	100.00
BLANK	Skip filled	2,299		

FORMOTEROL: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1332   **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
1	Yes	1	100.00	100.00
BLANK	Skip filled	2,299		

FORMOTEROL: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1333   **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
1	Yes	1	100.00	100.00
BLANK	Skip filled	2,299		

FORMOTEROL: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1334   **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
3	Didn't exercise in past 3 months	1	100.00	100.00
BLANK	Skip filled	2,299		

FORMOTEROL: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1335   **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
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

FORMOTEROL: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1336-1337   **SAS Variable Name:** ILP07_35
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 76	01-76 puffs	1	100.00	100.00
BLANK	Skip filled	2,299		

FORMOTEROL: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1338-1340

Type: NUM
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
301 – 399	Days	1	100.00	100.00
BLANK	Skip filled	2,299		

FORMOTEROL: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 1341-1342

Type: NUM
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	2,300		

QVAR: SIZE

Survey: CHILD Asthma Call-Back
Column: 1343

Type: NUM
SAS Variable Name: ILP01_36

Prologue:
Description: Q8.11　Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

QVAR: HOW LONG USED

Survey: CHILD Asthma Call-Back
Column: 1344

Type: NUM
SAS Variable Name: ILP02_36

Prologue:
Description: Q8.12　How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	5	17.24	27.45
2	6 months to 1 year	8	27.59	17.90
3	Longer than 1 year	16	55.17	54.64
BLANK	Skip filled	2,271		

QVAR: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back
Column: 1345

Type: NUM
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	20	68.97	69.67
2	No	8	27.59	20.22
9	Refused	1	3.45	10.12
BLANK	Skip filled	2,271		

QVAR: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1346   **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	16	55.17	43.07
2	No	10	34.48	36.97
3	No attack in past 3 months	3	10.34	19.96
BLANK	Skip filled	2,271		

QVAR: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1347   **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	9	31.03	26.21
2	No	19	65.52	70.35
3	Didn't exercise in past 3 months	1	3.45	3.44
BLANK	Skip filled	2,271		

QVAR: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1348   **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	22	75.86	73.03
2	No	7	24.14	26.97
BLANK	Skip filled	2,271		

QVAR: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1349-1350   **SAS Variable Name:** ILP07_36
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	28	96.55	97.50
77	Don´t know	1	3.45	2.50
BLANK	Skip filled	2,271		

QVAR: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　**Type:** NUM
Column: 1351-1353　　　　　　　　　　　　　　**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		21	72.41	77.08
401 – 499	Weeks	5	17.24	7.00
666	Less often than once a week	2	6.90	13.42
777	Don´t know	1	3.45	2.50
BLANK	Skip filled	2,271		

QVAR: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　**Type:** NUM
Column: 1354-1355　　　　　　　　　　　　　　**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	2,300		

LEVALBUTEROL TARTRATE: SIZE

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　**Type:** NUM
Column: 1356　　　　　　　　　　　　　　**SAS Variable Name:** ILP01_37
Prologue:
Description: Q8.11　　Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

LEVALBUTEROL TARTRATE: HOW LONG USED

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　**Type:** NUM
Column: 1357　　　　　　　　　　　　　　**SAS Variable Name:** ILP02_37
Prologue:
Description: Q8.12　　How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	Longer than 1 year	1	100.00	100.00
BLANK	Skip filled	2,299		

LEVALBUTEROL TARTRATE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back　　　　　　　　　　　　　　**Type:** NUM
Column: 1358　　　　　　　　　　　　　　**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
1	Yes	1	100.00	100.00
BLANK	Skip filled	2,299		

LEVALBUTEROL TARTRATE: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1359   **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
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

LEVALBUTEROL TARTRATE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1360   **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
1	Yes	1	100.00	100.00
BLANK	Skip filled	2,299		

LEVALBUTEROL TARTRATE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1361   **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
2	No	1	100.00	100.00
BLANK	Skip filled	2,299		

LEVALBUTEROL TARTRATE: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1362-1363   **SAS Variable Name:** ILP07_37
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	1	100.00	100.00
BLANK	Skip filled	2,299		

LEVALBUTEROL TARTRATE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1364-1366   **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
666	Less often than once a week	1	100.00	100.00
BLANK	Skip filled	2,299		

LEVALBUTEROL TARTRATE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back

Column: 1367-1368

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_37

Value	Value Label	Frequency	Percentage	Weighted Percentage
88	None/Less than 1 full canister	1	100.00	100.00
BLANK	Skip filled	2,299		

XOPENEX HFA: SIZE

Survey: CHILD Asthma Call-Back

Column: 1369

Prologue:

Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Type: NUM

SAS Variable Name: ILP01_38

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

XOPENEX HFA: HOW LONG USED

Survey: CHILD Asthma Call-Back

Column: 1370

Prologue:

Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Type: NUM

SAS Variable Name: ILP02_38

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	11	13.58	11.67
2	6 months to 1 year	15	18.52	26.16
3	Longer than 1 year	52	64.20	61.28
7	Don´t know/Not sure	3	3.70	0.88
BLANK	Skip filled	2,219		

XOPENEX HFA: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back

Column: 1371

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_38

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	43	53.09	52.93
2	No	35	43.21	46.20
7	Don´t know/Not sure	3	3.70	0.88
BLANK	Skip filled	2,219		

XOPENEX HFA: WHEN ATTACK

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

Column: 1372   **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	67	82.72	82.89
2	No	6	7.41	12.43
3	No attack in past 3 months	5	6.17	3.81
7	Don´t know/Not sure	3	3.70	0.88
BLANK	Skip filled	2,219		

XOPENEX HFA: BEFORE EXERCISING

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

Column: 1373   **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	43	53.09	51.76
2	No	35	43.21	47.37
7	Don´t know/Not sure	3	3.70	0.88
BLANK	Skip filled	2,219		

XOPENEX HFA: REGULAR SCHEDULE

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

Column: 1374   **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	18	22.22	25.99
2	No	59	72.84	72.86
7	Don´t know/Not sure	4	4.94	1.15
BLANK	Skip filled	2,219		

XOPENEX HFA: NUMBER OF PUFFS

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

Column: 1375-1376   **SAS Variable Name:** ILP07_38

Prologue:

Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	78	96.30	99.12
77	Don´t know	3	3.70	0.88
BLANK	Skip filled	2,219		

XOPENEX HFA: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1377-1379   **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	22	27.16	30.53
401 – 499	Weeks	33	40.74	34.77
555	Never	1	1.23	3.65
666	Less often than once a week	21	25.93	27.86
777	Don´t know	4	4.94	3.18
BLANK	Skip filled	2,219		

XOPENEX HFA: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1380-1381   **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	56	69.14	77.04
77	Don´t know	7	8.64	4.21
88	None/Less than 1 full canister	18	22.22	18.76
BLANK	Skip filled	2,219		

MOMETASONE FUROATE: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1382   **SAS Variable Name:** ILP01_39
Prologue:
Description: Q8.11 Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

MOMETASONE FUROATE: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1383   **SAS Variable Name:** ILP02_39
Prologue:
Description: Q8.12 How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

MOMETASONE FUROATE: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1384   **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	2,300		

MOMETASONE FUROATE: WHEN ATTACK

Survey: CHILD Asthma Call-Back
Column: 1385
Prologue:

Type: NUM
SAS Variable Name: ILP04_39

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	2,300		

MOMETASONE FUROATE: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Column: 1386
Prologue:

Type: NUM
SAS Variable Name: ILP05_39

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	2,300		

MOMETASONE FUROATE: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1387
Prologue:

Type: NUM
SAS Variable Name: ILP06_39

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	2,300		

MOMETASONE FUROATE: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back
Column: 1388-1389
Prologue:

Type: NUM
SAS Variable Name: ILP07_39

Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

MOMETASONE FUROATE: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1390-1392
Prologue:

Type: NUM
SAS Variable Name: ILP08_39

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	2,300		

MOMETASONE FUROATE: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back
Column: 1393-1394
Prologue:

Type: NUM
SAS Variable Name: ILP10_39

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	2,300		

ASMANEX (TWISTHALER): SIZE

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

Column: 1395   **SAS Variable Name:** ILP01_40

Prologue:

Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

ASMANEX (TWISTHALER): HOW LONG USED

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

Column: 1396   **SAS Variable Name:** ILP02_40

Prologue:

Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	3	12.00	10.50
2	6 months to 1 year	5	20.00	31.90
3	Longer than 1 year	14	56.00	50.66
7	Don´t know/Not sure	3	12.00	6.95
BLANK	Skip filled	2,275		

ASMANEX (TWISTHALER): WHETHER SPACER USED

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

Column: 1397   **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	2,300		

ASMANEX (TWISTHALER): WHEN ATTACK

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

Column: 1398   **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	6	24.00	25.66
2	No	13	52.00	58.66
3	No attack in past 3 months	3	12.00	8.73
7	Don´t know/Not sure	3	12.00	6.95
BLANK	Skip filled	2,275		

ASMANEX (TWISTHALER): BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Column: 1399
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_40

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	1	4.00	1.79
2	No	19	76.00	79.66
3	Didn't exercise in past 3 months	2	8.00	11.61
7	Don´t know/Not sure	3	12.00	6.95
BLANK	Skip filled	2,275		

ASMANEX (TWISTHALER): REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1400
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_40

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Yes	20	80.00	82.66
2	No	2	8.00	10.39
7	Don´t know/Not sure	3	12.00	6.95
BLANK	Skip filled	2,275		

ASMANEX (TWISTHALER): NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back
Column: 1401-1402
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Type: NUM
SAS Variable Name: ILP07_40

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 – 76	01-76 puffs	22	88.00	93.05
77	Don´t know	3	12.00	6.95
BLANK	Skip filled	2,275		

ASMANEX (TWISTHALER): TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back
Column: 1403-1405
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_40

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	19	76.00	76.08
401 – 499	Weeks	2	8.00	8.37
666	Less often than once a week	1	4.00	8.60
777	Don´t know	3	12.00	6.95
BLANK	Skip filled	2,275		

ASMANEX (TWISTHALER): NUMBER OF CANISTERS

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

Column: 1406-1407   **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	2,300		

PRO-AIR HFA: SIZE

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

Column: 1408   **SAS Variable Name:** ILP01_41

Prologue:

Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PRO-AIR HFA: HOW LONG USED

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

Column: 1409   **SAS Variable Name:** ILP02_41

Prologue:

Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	27	18.12	17.17
2	6 months to 1 year	20	13.42	15.21
3	Longer than 1 year	96	64.43	66.28
7	Don´t know/Not sure	5	3.36	0.87
9	Refused	1	0.67	0.46
BLANK	Skip filled	2,151		

PRO-AIR HFA: WHETHER SPACER USED

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

Column: 1410   **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	72	48.32	56.25
2	No	72	48.32	42.74
7	Don´t know/Not sure	4	2.68	0.55
9	Refused	1	0.67	0.46
BLANK	Skip filled	2,151		

PRO-AIR HFA: WHEN ATTACK

Survey: CHILD Asthma Call-Back
Column: 1411

Type: NUM
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	129	86.58	94.32
2	No	10	6.71	2.88
3	No attack in past 3 months	6	4.03	1.88
7	Don´t know/Not sure	3	2.01	0.45
9	Refused	1	0.67	0.46
BLANK	Skip filled	2,151		

PRO-AIR HFA: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back
Column: 1412

Type: NUM
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	72	48.32	43.29
2	No	68	45.64	49.21
3	Didn't exercise in past 3 months	2	1.34	2.90
7	Don´t know/Not sure	6	4.03	4.13
9	Refused	1	0.67	0.46
BLANK	Skip filled	2,151		

PRO-AIR HFA: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back
Column: 1413

Type: NUM
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	33	22.15	32.02
2	No	111	74.50	67.04
7	Don´t know/Not sure	4	2.68	0.48
9	Refused	1	0.67	0.46
BLANK	Skip filled	2,151		

PRO-AIR HFA: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back
Column: 1414-1415

Type: NUM
SAS Variable Name: ILP07_41

Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 76	01-76 puffs	143	95.97	98.16
77	Don´t know	5	3.36	1.38
99	Refused	1	0.67	0.46
BLANK	Skip filled	2,151		

PRO-AIR HFA: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1416-1418   **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	48	32.21	37.25
401 – 499	Weeks	46	30.87	32.39
666	Less often than once a week	44	29.53	24.94
777	Don´t know	9	6.04	4.89
999	Refused	2	1.34	0.54
BLANK	Skip filled	2,151		

PRO-AIR HFA: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1419-1420   **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	106	71.14	78.58
77	Don´t know	7	4.70	2.68
88	None/Less than 1 full canister	35	23.49	18.27
99	Refused	1	0.67	0.46
BLANK	Skip filled	2,151		

SYMBICORT: SIZE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1421   **SAS Variable Name:** ILP01_42
Prologue:
Description: Q8.11   Are there 80, 100, or 200 puffs in the [MEDICINE FROM INH_MEDS SERIES] inhaler that [child's name] uses?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

SYMBICORT: HOW LONG USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1422   **SAS Variable Name:** ILP02_42
Prologue:
Description: Q8.12   How long has [he/she] been taking [MEDICINE FROM INH_MEDS SERIES]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	7	33.33	20.14
2	6 months to 1 year	4	19.05	18.68
3	Longer than 1 year	10	47.62	61.18
BLANK	Skip filled	2,279		

SYMBICORT: WHETHER SPACER USED

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1423   **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
1	Yes	11	52.38	59.45
2	No	10	47.62	40.55
BLANK	Skip filled	2,279		

SYMBICORT: WHEN ATTACK

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1424   **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	7	33.33	30.96
2	No	10	47.62	59.65
3	No attack in past 3 months	4	19.05	9.39
BLANK	Skip filled	2,279		

SYMBICORT: BEFORE EXERCISING

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1425   **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	7	33.33	21.38
2	No	14	66.67	78.62
BLANK	Skip filled	2,279		

SYMBICORT: REGULAR SCHEDULE

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1426   **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	16	76.19	85.11
2	No	5	23.81	14.89
BLANK	Skip filled	2,279		

SYMBICORT: NUMBER OF PUFFS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1427-1428   **SAS Variable Name:** ILP07_42
Prologue:
Description: Q8.17   On average, how many puffs did [he/she] take each time [he/she] used [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1 - 76	01-76 puffs	21	100.00	100.00
BLANK	Skip filled	2,279		

SYMBICORT: TIMES PER DAY/WEEK

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1429-1431 **SAS Variable Name:** ILP08_42
Prologue:
Description: Q8.18   How many times per day or per week does [he/she] use [MEDICINE FROM INH_MEDS SERIES]?

Value	Value Label	Frequency	Percentage	Weighted Percentage
301 – 399	Days	17	80.95	89.39
401 – 499	Weeks	2	9.52	5.77
666	Less often than once a week	2	9.52	4.84
BLANK	Skip filled	2,279		

SYMBICORT: NUMBER OF CANISTERS

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1432-1433 **SAS Variable Name:** ILP10_42
Prologue:
Description: Q8.19   How many canisters of this inhaler has [he/she] used in the past 3 months?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL ACCOLATE: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1434 **SAS Variable Name:** PILLX_1
Prologue:
Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL AEROLATE: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1435 **SAS Variable Name:** PILLX_2
Prologue:
Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL ALBUTEROL: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1436 **SAS Variable Name:** PILLX_3
Prologue:
Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	Longer than 1 year	1	50.00	42.35
7	Don´t know/Not sure	1	50.00	57.65
BLANK	Skip filled	2,298		

PILL ALUPENT: HOW LONG USED

Survey: CHILD Asthma Call-Back		**Type:** NUM
Column: 1437		**SAS Variable Name:** PILLX_4
Prologue:		

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL CHOLEDYL (OXTRIPHYLLINE): HOW LONG USED

Survey: CHILD Asthma Call-Back		**Type:** NUM
Column: 1438		**SAS Variable Name:** PILLX_5
Prologue:		

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
3	Longer than 1 year	1	100.00	100.00
BLANK	Skip filled	2,299		

PILL DELTASONE: HOW LONG USED

Survey: CHILD Asthma Call-Back		**Type:** NUM
Column: 1439		**SAS Variable Name:** PILLX_7
Prologue:		

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL ELIXOPHYLLIN: HOW LONG USED

Survey: CHILD Asthma Call-Back		**Type:** NUM
Column: 1440		**SAS Variable Name:** PILLX_8
Prologue:		

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
7	Don´t know/Not sure	1	100.00	100.00
BLANK	Skip filled	2,299		

PILL MEDROL: HOW LONG USED

Survey: CHILD Asthma Call-Back		**Type:** NUM
Column: 1441		**SAS Variable Name:** PILLX_11
Prologue:		

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL METAPREL: HOW LONG USED

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

Column: 1442   **SAS Variable Name:** PILLX_12

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL METAPROTERONOL: HOW LONG USED

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

Column: 1443   **SAS Variable Name:** PILLX_13

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL METHYLPREDNISOLONE: HOW LONG USED

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

Column: 1444   **SAS Variable Name:** PILLX_14

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	1	100.00	100.00
BLANK	Skip filled	2,299		

PILL MONTELUKAST: HOW LONG USED

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

Column: 1445   **SAS Variable Name:** PILLX_15

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL PEDIAPRED: HOW LONG USED

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

Column: 1446   **SAS Variable Name:** PILLX_17

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	1	100.00	100.00
BLANK	Skip filled	2,299		

PILL PREDNISOLONE: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1447 **SAS Variable Name:** PILLX_18
Prologue:
Description: Q8.22 How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL PREDNISONE: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1448 **SAS Variable Name:** PILLX_19
Prologue:
Description: Q8.22 How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	14	63.64	75.16
2	6 months to 1 year	1	4.55	9.71
3	Longer than 1 year	6	27.27	13.64
7	Don´t know/Not sure	1	4.55	1.49
BLANK	Skip filled	2,278		

PILL PROVENTIL: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1449 **SAS Variable Name:** PILLX_21
Prologue:
Description: Q8.22 How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL RESPID: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1450 **SAS Variable Name:** PILLX_23
Prologue:
Description: Q8.22 How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
2	6 months to 1 year	1	100.00	100.00
BLANK	Skip filled	2,299		

PILL SINGULAIR: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1451 **SAS Variable Name:** PILLX_24
Prologue:
Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Less than 6 months	43	13.65	15.43
2	6 months to 1 year	32	10.16	8.00
3	Longer than 1 year	238	75.56	76.45
7	Don´t know/Not sure	2	0.63	0.12
BLANK	Skip filled	1,985		

PILL SLO-PHYLLIN: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1452 **SAS Variable Name:** PILLX_25
Prologue:
Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL SLO-BID: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1453 **SAS Variable Name:** PILLX_26
Prologue:
Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL THEO-24: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1454 **SAS Variable Name:** PILLX_28
Prologue:
Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL THEOCHRON: HOW LONG USED

Survey: CHILD Asthma Call-Back **Type:** NUM
Column: 1455 **SAS Variable Name:** PILLX_30
Prologue:
Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL THEOCLEAR: HOW LONG USED

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

Column: 1456   **SAS Variable Name:** PILLX_31

Prologue:

Description: Q8.22 How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

				Weighted
Value	**Value Label**	**Frequency**	**Percentage**	**Percentage**
BLANK	Skip filled	2,300		

PILL THEODUR: HOW LONG USED

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

Column: 1457   **SAS Variable Name:** PILLX_32

Prologue:

Description: Q8.22 How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

				Weighted
Value	**Value Label**	**Frequency**	**Percentage**	**Percentage**
BLANK	Skip filled	2,300		

PILL THEO-DUR: HOW LONG USED

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

Column: 1458   **SAS Variable Name:** PILLX_33

Prologue:

Description: Q8.22 How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

				Weighted
Value	**Value Label**	**Frequency**	**Percentage**	**Percentage**
BLANK	Skip filled	2,300		

PILL THEOPHYLLINE: HOW LONG USED

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

Column: 1459   **SAS Variable Name:** PILLX_35

Prologue:

Description: Q8.22 How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

				Weighted
Value	**Value Label**	**Frequency**	**Percentage**	**Percentage**
BLANK	Skip filled	2,300		

PILL THEOSPAN: HOW LONG USED

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

Column: 1460   **SAS Variable Name:** PILLX_37

Prologue:

Description: Q8.22 How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]? Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

				Weighted
Value	**Value Label**	**Frequency**	**Percentage**	**Percentage**
BLANK	Skip filled	2,300		

PILL T-PHYL: HOW LONG USED

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

Column: 1461   **SAS Variable Name:** PILLX_40

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL UNIPHYL: HOW LONG USED

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

Column: 1462   **SAS Variable Name:** PILLX_42

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL VENTOLIN: HOW LONG USED

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

Column: 1463   **SAS Variable Name:** PILLX_43

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL VOLMAX: HOW LONG USED

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

Column: 1464   **SAS Variable Name:** PILLX_44

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL ZAFIRLUKAST: HOW LONG USED

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

Column: 1465   **SAS Variable Name:** PILLX_45

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL ZILEUTON: HOW LONG USED

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

Column: 1466   **SAS Variable Name:** PILLX_46

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL ZYFLO FILMTAB: HOW LONG USED

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

Column: 1467   **SAS Variable Name:** PILLX_47

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL TERBUTALINE (+ T. SULFATE): HOW LONG USED

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

Column: 1468   **SAS Variable Name:** PILLX_48

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

PILL BRETHINE: HOW LONG USED

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

Column: 1469   **SAS Variable Name:** PILLX_49

Prologue:

Description: Q8.22   How long has [child's name] been taking [MEDICATION LISTED IN PILLS_MD]?   Would you say less than 6 months, 6 months to 1 year, or longer than 1 year?

Value	Value Label	Frequency	Percentage	Weighted Percentage
BLANK	Skip filled	2,300		

INTERIM CHILD ASTHMA CALL-BACK WEIGHT

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

Column: 1470-1479   **SAS Variable Name:** CWEIGHT_IN

Prologue:

Description: INTERIM CHILD ASTHMA CALL-BACK WEIGHT

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN	Interim child asthma call-back weight	2,300	100.00	100.00

CHILD ASTHMA CALL-BACK POST STRATIFICATION FACTOR

Survey: CHILD Asthma Call-Back
Column: 1480-1489
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	2,300	100.00	100.00

REGIONS COLLAPSED TO 1 REGION FOR ASTHMA CALL-BACK.

Survey: CHILD Asthma Call-Back
Column: 1490
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
1	Regions are collapsed to 1 region	1,291	100.00	100.00
BLANK	No region collapsed	1,009		

CHILD RACE GROUP FOR ASTHMA CALL-BACK POST-STRATIFICATION

Survey: CHILD Asthma Call-Back
Column: 1491
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	1,023	100.00	100.00
BLANK	Missing	1,277		

IMPUTED CHILD AGE FOR ASTHMA CALL-BACK

Survey: CHILD Asthma Call-Back
Column: 1493-1495
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	2,300	100.00	100.00

FINAL CHILD ASTHMA CALL-BACK WEIGHT

Survey: CHILD Asthma Call-Back
Column: 1496-1505
Prologue:
Description: FINAL CHILD ASTHMA CALL-BACK WEIGHT

Type: NUM
SAS Variable Name: CHILDWT_F

Value	Value Label	Frequency	Percentage	Weighted Percentage
HIDDEN	Final child asthma call-back weight	2,300	100.00	100.00

CHILD ASTHMA CALL-BACK AGE GROUPS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1506   **SAS Variable Name:** CAGEG_F4
Prologue:
Description: CHILD ASTHMA CALL-BACK AGE GROUPS

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Age 0 - 4	239	10.39	18.12
2	Age 5 - 9	543	23.61	30.07
3	Age 10 - 14	854	37.13	30.24
4	Age 15 - 17	664	28.87	21.58

CHILD ASTHMA CALL-BACK AGE GROUPS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1507   **SAS Variable Name:** CAGEG_F3
Prologue:
Description: CHILD ASTHMA CALL-BACK AGE GROUPS

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Age 0 - 6	390	18.13	30.38
2	Age 7 - 12	821	38.17	37.87
3	age 13 - 17	940	43.70	31.75
BLANK	Missing	149		

CHILD ASTHMA CALL-BACK AGE GROUPS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1508   **SAS Variable Name:** CAGEG_F2
Prologue:
Description: CHILD ASTHMA CALL-BACK AGE GROUPS

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Age 0 - 9	389	33.56	47.22
2	Age 10 - 17	770	66.44	52.78
BLANK	Missing	1,141		

CHILD ASTHMA CALL-BACK AGE GROUPS

Survey: CHILD Asthma Call-Back   **Type:** NUM
Column: 1509   **SAS Variable Name:** CAGEG_F1
Prologue:
Description: CHILD ASTHMA CALL-BACK AGE GROUPS

Value	Value Label	Frequency	Percentage	Weighted Percentage
1	Age 0 - 17	81	100.00	100.00
BLANK	Missing	2,219		