### **ICPSR 22626**

# India Human Development Survey (IHDS), 2005

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Medical Questionnaire

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## HUMAN DEVELOPMENT PROFILE OF INDIA - II 2004-05

## NATIONAL COUNCIL OF APPLIED ECONOMIC RESEARCH & UNIVERSITY OF MARYLAND, COLLEGE PARK

### **MEDICAL FACILITY QUESTIONNAIRE**

1. STUDY CODE 0 2	DAY MONTH YEAR YEAR  INTERVIEW DATE:  MCDATE
2. Deck Number	TIME INTERVIEW BEGAN: HOUR HOUR: MIN MIN MIN MCT1h PM=2 MCT1a
Interviewer ID  Interviewer Name	8. Number of visits to complete questionnaire
4. Interviewer Signature	9. Completion Status  Complete = 1 Incomplete = 2
5. Supervisor ID	10. Data Entry ID
6. Supervisor Name	11. Data Entry Name
7. Supervisor Signature	12. Data Entry Signature

ART A: BASIC CHARACTE	RISTICS		
1. What type of facility is this?			
1= PUBLIC HOSPITAL 5= PUBL	LIC FAMILY PLANNING CENTRE		
2= PHC 6= PRIV	ATE HOSPITAL		
3= COMMUNITY HEALTH C 7= PRIV 4= SUBCENTRE 8= PRIV	ATE CLINIC OR POLYCLINIC ATE DOCTOR		TYPE: MF1
			NO= 0
2. Does this facility practice	allo	pathic medicine?	YES= 1 MF2
RECORD ALL THAT APPLY			NO= 0
	ауц	urvedic medicine?	YES= 1 MF2
			NO= 0
		homeopathy?	YES= 1 MF2
			NO= 0
		unani?	YES= 1 MF2
			NO= 0
		other ?	YES= 1MF2
. Does this medical facility receive t	unding or other support from .		NO= 0
		the government?	YES= 1 MF3
			NO= 0
	a religio	ous organization?	YES= 1 MF3
			NO= 0
	a non-religiou	us charity or NRI?	YES= 1MF3
. In what year did this medical facili	ty open?		
·	, ,	YEA	AR: MF4
		_	
. How far is this facility from the Dis	strict Hospital?	17	
		Kms.	MF5
. Does this facility have beds for ov			
IF YES: How many beds are available	le? IF NONE, WRITE 0	BEDS:	MF6
6b. IF YES: On an average day, ho	w many of these beds		
are occupied?	IF NONE, WRITE 0	BEDS:	MF6
. On average, how many out-patient	ts does the facility treat each w	eek?	
(OUT-PATIENTS ARE TREATED BU		NUMBER:	MF6
	2		
. What days of the week is the clinic For how many hours is the clinic of		Mondays? HOUF	RS: MF7
IF CLINIC IS CLOSED ON A DAY, W	•	Mondays? HOUF	(S. MIF
IF CLINIC IS CLOSED ON A DAY, W	RITE ZERO.	Tuesdays? HOUF	RS: MF7
		ruesuays : 11001	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	W	ednesdays? HOUF	RS: MF7
		Thursdays? HOUF	RS: MF7
		mursuays:	
		Fridays? HOUF	RS: MF7
		Saturdays? HOUF	RS: MF7
		0	
		Sundays? HOUF	RS: MF7
B. Does this medical facility have ele	ctricity?	NONE, WRITE 0	
IF YES: How many hours per day is		DAY, WRITE 24 HOUF	RS: MF8
available?		Almost eve	erv dav- 1
8b. IF YES: How often is electric s	ervice interrunted?	Once or twice	· · ·
8b. IF YES: <b>How often is electric s</b> IF NO ELECTRICITY, WRITE 0	ervice interrupteu :	Less than once	
IF INO ELECTRICITY, WRITE U		Less than once	a week= 3
8c. Does this facility have its ow	n electric generator?		No= 0
	as the main source of electricity	y, Yes, for	backup= 1 MF8
or is it used only as a b		Yes, as main electricity	source= 2

#### PART A: BASIC CHARACTERISTICS (continued) 9. What is the main source of drinking water in this medical facility? 1= PIPED INSIDE THE FACILITY 5= DUG, OPEN WELL 9= TANKER TRUCK 2= PIPED OUTSIDE THE FACILITY 6= HAND PUMP 10= RAINWATER 3= TUBE WELL 7= RIVER, CANAL, STREAM 11= BOTTLED 4= COVERED WELL 8= POND 12= OTHER 10. What toilet facilities are available for the use of patients in the clinic? 0= No toilet belonging to the facility 2= Ventilated Improved Pit Latrine 4= Other 1= Traditional Pit Latrine 3= Flush Toilet 10b. IF FACILITY HAS A TOILET: Is there a wash basin next to the toilet NO= C IF NO TOILET, WRITE 0 for washing hands? YES= 1 11. Is there a fee for patients to register at this facility the first time they come? IF YES: How much is that registration fee? IF NO REGISTRATION FEE, WRITE 0 12. What is the usual visit fee charged for a routine visit, for instance, for an infant with diarrhea? 12b. Does this fee include basic medicine that would be given for diarrhea? IF MEDICINE INCLUDED IN FEE, WRITE 0. IF MEDICINE IS NOT INCLUDED: How much would the medicine cost that is most oten prescribed for diarrhea?

### PART B: SERVICES PROVIDED

Now I would like to ask you about what medical services are available at this facility.

Does this clinic provide....

No=	) Yes=1
13a. Child immunizations?	MF10a
13b. Contraception: Oral pills?	MF10b
13c. Contraception: IUD insertion?	MF10c
13d. Contraception: Male sterilisation?	MF10d
13e. Contraception: Female sterilisation?	MF10e
13f. Contraception: Injection?	MF10f
13g. Incision of abcess/ piercing of boils?	MF10g
13h. Saline I V?	MF10h
13i. Setting broken bones?	MF10i
13j. Treatment of gynecological conditions	
such as white discharge?	MF10j
13k. Treatment of STDs such as gonorrhea?	MF10k
13l. Treatment for tuberculosis?	MF10I

		No=0	Yes=	<u>-</u> 1
13m.	Prenatal care?			MF10m
13n.	Eye exam?			MF10n
130.	Treatment for diarrhea?			MF10o
13p.	Change a wound dressing?			MF10p
13q.	Stitching wounds?			MF10q
13r.	Treatment of malaria?			MF10r
13s.	Minor Illnesses like fever			MF10s
13t.	Treatment for Rabies			MF10t
13u.	Childbirth delivery?			MF10u
13v.	D&C or abortions?			MF10v
13w.	Blood transfusion?			MF10w
13x.	Cataract surgery?			MF10x
13y.	Abdominal surgery?			MF10y
13z.	Heart surgery?			MF10z

## PART B: SERVICES (continued)

### 14. Does the clinic do tests for ...

14a. Blood test: hemoglobin	NO= 0 / YES, collects & sends out= 1, YES, analyses here= 2	MF14a
14b. Blood test: leukemia	NO= 0 / YES, collects & sends out= 1, YES, analyses here= 2	MF14b
14c. Blood test: AIDS	NO= 0 / YES, collects & sends out= 1, YES, analyses here= 2	MF14c
14d. TLC Total lymphocyte count	NO= 0 / YES, collects & sends out= 1, YES, analyses here= 2	MF14d
14e. Urinanalysis:Routine	NO= 0 / YES, collects & sends out= 1, YES, analyses here= 2	MF14e
14f. Urinanalysis: Culture	NO= 0 / YES, collects & sends out= 1, YES, analyses here= 2	MF14f
14g. Stool test	NO= 0 / YES, collects & sends out= 1, YES, analyses here= 2	MF14g
14h. Pregnancy test	NO= 0 / YES, collects & sends out= 1, YES, analyses here= 2	MF14h
14i. Malarial parasite	NO= 0 / YES, collects & sends out= 1, YES, analyses here= 2	MF14i
14j. Cerebral Malarial parasite	NO= 0 / YES, collects & sends out= 1, YES, analyses here= 2	MF14j
14k. <b>TB</b>	NO= 0 / YES, collects & sends out= 1, YES, analyses here= 2	MF14k

15. Now I would like to ask you about what medical equipment is in this medical facility. Does the facility have in good working order a ...

15a. Stethoscope	NO= 0 / YES= 1	MF15a
15b. Sterilisation / autoclaves	NO= 0 / YES= 1	MF15b
15c. Weighing scale for adults	NO= 0 / YES= 1	MF15c
15d. Weighing scale for infants	NO= 0 / YES= 1	MF15d
15e. Thermometer	NO= 0 / YES= 1	MF15e
15f. Vaginal speculum	NO= 0 / YES= 1	MF15f
15g. Sonograph	NO= 0 / YES= 1	MF15g
15h. Xray machine	NO= 0 / YES= 1	MF15h
15i. Blood Pressure Gauge	NO= 0 / YES= 1	MF15i
15j. Oxygen	NO= 0 / YES= 1	MF15j

15k. Ear exam	NO= 0 / YES= 1		MF15k
15I. Delivery kit	NO= 0 / YES= 1		MF15I
15m. Forceps	NO= 0 / YES= 1		MF15m
15n. Microscope	NO= 0 / YES= 1		MF15n
150. Centrifuge	NO= 0 / YES= 1		MF15o
15p. Refrigerator	NO= 0 / YES= 1		MF15p
15q. Cold chest	NO= 0 / YES= 1		MF15q
15r. ECG Monitor	NO= 0 / YES= 1		MF15r
15s. Ambulance	NO= 0 / YES= 1	·	MF15s
15t. Wheelchair	NO= 0 / YES= 1		MF15t

16. Now I would like to ask you about the medicines you *currently* have in stock at this facility.

Do you usually have ...

16a. Penicillin	NO= 0 / YES= 1	MF16a
16b. Ampicillin	NO= 0 / YES= 1	MF16b
16c. Tetracycline	NO= 0 / YES= 1	MF16c
16d. Streptomicyn	NO= 0 / YES= 1	MF16d
16e. Any other antibiotics	NO= 0 / YES= 1	MF16e
16f. Iron tablets or Folic Acid	NO= 0 / YES= 1	MF16f
16g. Vitamin A	NO= 0 / YES= 1	MF16g
16h. BCG vaccination	NO= 0 / YES= 1	MF16h
16i. Polio immunization	NO= 0 / YES= 1	MF16i
16j. Hepatitis B vaccine	NO= 0 / YES= 1	MF16j
16k. Anti-malarial medicine	NO= 0 / YES= 1	MF16k
16l. DPT vaccination	NO= 0 / YES= 1	MF16I
16m. MMR vaccination	NO= 0 / YES= 1	MF16m

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Part	<b>^</b> .	<b>┌</b> ∧		$\sim$	/ -	
Jan		r	ואוי		Y	-,7

Now I would like to ask you about the people who work at this health facility.

17. How many people currently work at this clinic/center?

NUMBER N	
	ΛE

18. Are there any sanctioned positions that are curently vacant?
IF YES, How many?

NUMBER	MF18

ASK ONLY IF STAFF SIZE IS LESS THAN 13 PEOPLE

WRITE DOWN ALL THE NAMES, THEN ASK QUESTIONS 23 TO 28 FOR EACH PERSON BEFORE GOING ON TO THE NEXT PERSON.

loo	
Was NAME	
at	
rview?	
MF22a	
MF22b	
MF22c	
MF22d	
MF22e	
MF22f	
MF22g	
MF22h	
MF22i	
MF22i	
MF22k	
MF22I	
primary	
pondant	
Present	

23	24	25		26		27	28	29	30	
Sex	Religion	Caste	Does	NAME live in	ı	For how	What kind	Does NAME	Is	
			th	is village /	m	any years	of degree	have a	NAME	
			neig	hborhood?	h	as NAME	does NAME	private	present	
			IF N	IO: How far		worked	have?	medical	today?	
			does	s NAME live		here?			practice?	1 -
			fr	om here?				0= No		
			KILOMETERS			YEARS		1= Yes		
MF23a	MF24a	MF25a		MF26a		MF27a	MF28a	MF29a	MF30a	
MF23b	MF24b	MF25b		MF26b		MF27b	MF28b	MF29b	MF30b	
MF23c	MF24c	MF25c		MF26c		MF27c	MF28c	MF29c	MF30c	
MF23d	MF24d	MF25d		MF26d		MF27d	MF28d	MF29d	MF30d	
MF23e	MF24e	MF25e		MF26e		MF27e	MF28e	MF29e	MF30e	
MF23f	MF24f	MF25f		MF26f		MF27f	MF28f	MF29f	MF30f	
1011 231	IVII Z4I	IVII ZOI		Wii ZOI		WII 271	WII ZOI	WII 231	IVII 30I	
MF23g	MF24g	MF25g		MF26g		MF27g	MF28g	MF29g	MF30g	
MF23h	MF24h	MF25h		MF26h		MF27h	MF28h	MF29h	MF30h	
WIFZSII	IVIF 2411	WIFZSII		IVIFZOII		IVIF2711	IVIFZOII	WEZSII	IVIF-3011	
MF23i	MF24i	MF25i		MF26i		MF27i	MF28i	MF29i	MF30i	
MEGG	MEO	MEGE		MEGG		MEOZ:	MEGO	MEOO	MEGO	
MF23j	MF24j	MF25j		MF26j		MF27j	MF28j	MF29j	MF30j	
MF23k	MF24k	MF25k		MF26k		MF27k	MF28k	MF29k	MF30k	
MF23I	MF24I	MF25I		MF26I		MF27I	MF28I	MF29I	MF30I	
1= Male	1 Hindu	1=Brahmin				0= None	5= R.N.		0=No	
2= Female	2 Muslim	2=OBC				1= Xth	6= MBBS		1=No, but	
	3 Christian	3=SC				2= XIIth	7= Ayurvedic		expected	
	4 Sikh	4=ST				3= BSc., BA	8= Homeopath	ny	2=Yes	
	5 Buddhist	5=Other				4= Masters	9= Other			
	6 Jain					- <del></del>	<del></del>			
	7 Other									

#### **HDPI-2 (Medical)**

#### Part D: MEDICAL FACILITY OBSERVATION Special refrigerator for vaccines= 1 Now I would like to look at some of the rooms in this health Can you please show me where Regrigerator used for other purposes= 2 MESO facility and take some notes. Could you please take me to the vaccines are stored? Cold chain box or other non-electric refrigerator= 3 Not refrigerated storage space= 4 the rooms where patients are examined? ONCE YOU ARRIVE IN THE ROOM, WRITE DOWN THE ANSWERS TO QUESTIONS 26 TO No regular storage space= 5 WITHOUT ASKING ANY QUESTIONS DIRECTLY. No vaccinations given here= 9 END OF INTERVIEW. IS THE EXAMINATION ROOM A SEPARATE ROOM Separate exam room= 1 THANK THE RESPONDENT FOR HIS OR HER COOPERATION THAT PROVIDES PRIVACY FROM OTHER PATIENTS? Same room, with curtains= 2 IF NO: ARE THERE CURTAINS FOR CLOSING Same room, No curtains= 3 MF26a THE EXAMINATION AREA TO PROVIDE PRIVACY? CLINIC'S PREDOMINANT FLOOR TYPE: No curtains= 0 1= MUD 5= CEMENT 26b. IF YES TO CURTAINS: ARE THE CURTAINS CLEAN, OR DO Clean= 1 2= WOOD, BAMBOO 6= TILES, MOSAIC YOU SEE BLOODSTAINS OR OTHER DROPPINGS? MF26b Dirty= 3= BRICK 7= OTHER 4= STONE Clean= IS THE FLOOR CLEAN, OR DO YOU SEE A LOT OF DUST. Dirty= 2 MF26c CLINIC'S PREDOMINANT WALL TYPE: OR FOOD REMNANTS, OR GARBAGE ON THE FLOOR? 1= GRASS, THATCH 6= GI SHEETS, OTHER METAL Clean= 2= MUD. UNBURNT BRICKS 7= STONE MF31 26d. ARE THE WALLS CLEAN, OR DO YOU SEE SPIDER WEBS, Dirty= 2 MF26d 3= PLASTIC 8= CEMENT. CONCRETE OR SCRIBBLING, OR MOISTURE, OR PEELED OFF PAINT? 4= WOOD 9= OTHER No sink or basin= 0 5= BURN BRICKS IS THERE A SINK OR BASIN IN or NEAR THE ROOM Sink or basin with no piped water= 1 Sink or basin with piped water= 2 MF26e CLINIC'S PREDOMINANT ROOF TYPE: FOR WASHING HANDS? 1= GRASS, THATCH, MUD, WOOD 6= CEMENT IS THERE AN EXAMINATION TABLE IN THIS ROOM? No exam table= 0 2= TILE 7= BRICK MF26f Yes exam table= 3= SLATE 8= STONE 4= PLASTIC 9= CONCRETE Can I see what you use to give patients injections and immunizations? Disposable needle= 1 5= GI METAL, ASBESTOS 10= OTHER WRITE DOWN THE TYPE OF NEEDLE Non-disposable neede= 2 MF27 OBSERVATION OF OUTSIDE OF MEDICAL FACILITY: Both kinds of needles= 3 TYPE OF APPROACH ROAD TO THE HOSPITAL No needles= 4 Footpath= 1 IF NON-DISPOSABLE NEEDLES ARE USED: Kutcha= 2 MF33 Pucca= 3 Can you show me how you sterilize your non-disposable needles? ALLOW UP TO THREE RESPONSES Sterilizer= IS THERE AN ADVERTISEMENT ON THE BUILDING Puts needle in boiling water= 2 MF28a THAT THIS CLINIC DOES SONOGRAMS? (OR A PRACTICE No=0 Rinses with alcohol= 3 THAT MIGHT DETERMINE THE SEX OF A FETUS)? Yes= Puts needle in flame= MF28b Other= 5 TIME INTERVIEW FINISHED: AM=1 Not sterilized= 6 MF28c MFT2h COMMENTS: Not applicable= 9 HOUR HOUR : MIN