



Subject Code: _____	Interviewer Code: _____	Date: _____
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Healthcare Utilization History—Injury Prevention

Ask these questions every 3 months for all enrolled subjects. Use the phrase, “try to remember back in the last 3 months...” to anchor them in this time frame.

Question #	Question Item	Frequency Of Occurrence	Comments (Can include dates, names, details)
1	Was your child admitted to a hospital or an ICU because of an injury that occurred in the home?		
2	Did your child go to the emergency room because of an injury that occurred in the home?		
3	Did your child have a visit to the urgent care or an after hours clinic visit because of an injury that occurred in the home?		
4	Did your child miss at least a ½ day of school because of an injury that occurred in the home?		
5	Did you miss at least a ½ day of work or school because your child had an injury that occurred in the home?		
6	Did your child have a scheduled check-up or well-child visit with a doctor?		
6a	If yes to 6, did the doctor talk to you about injury prevention behaviors and safety in the home?		
6b	If yes to 6a, what did the doctor mention about injury prevention and home safety?		
7	Have you purchased or installed any home safety equipment (smoke alarm, cabinet locks)?		
7a	If yes to 7, were any of the devices supplied by the Healthy Homes Project		
8	Have you purchased or received other safety items, such as a bike helmet, car seat, etc?		
8a	If yes to 8, were any of these provided by the Healthy Homes Project?		

Entered by: _____

Date entered: _____