

**ALPHABETICAL LISTING OF VARIABLES THAT ARE NOT AVAILABLE IN ALL
PUBLIC-USE DATA FILES, NATIONAL IMMUNIZATION SURVEY, 1995-2004**

VARIABLE NAME	VARIABLE LABEL*	YEAR OF DATA COLLECTION										NOTES (See NIS PUF Code Books)	
		95	96	97	98	99	00	01	02	03	04		
BFENDFL	Flag: Duration of breast feeding exceeds child age in days										Y	Y	SEE APPENDIX F OF 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
BFEXCLFL	Flag: Duration of exclusive breast feeding exceeds total breast feeding										Y	Y	SEE APPENDIX F OF 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
BF_ENDR	Duration of breast feeding in days (Recode)										Y	Y	SEE APPENDIX F OF 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
BF_EXCLR	Duration of exclusive breast feeding in days (Recode)										Y	Y	SEE APPENDIX F OF 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
CARTYP1	Child's providers offer routine well care	Y	Y										SEE NCARER1 TO NCARER6 FOR 1997-2003.
CARTYP2	Child's providers offer sick/emergency visits	Y	Y										SEE NCARER1 TO NCARER6 FOR 1997-2003.
CARTYP3	Child's providers offer vaccination visits	Y	Y										SEE NCARER1 TO NCARER6 FOR 1997-2003.
CARTYP4	Child's providers offer other services	Y	Y										SEE NCARER1 TO NCARER6 FOR 1997-2003.
CARTYP5	Child's providers offer WIC program/services	Y	Y										SEE NCARER1 TO NCARER6 FOR 1997-2003.
CBF_01	Was child ever breast fed or fed breast milk?										Y	Y	
CWIC_01	Child ever received WIC benefits										Y	Y	
CWIC_02	Child currently receiving WIC benefits										Y	Y	
C_VRC	Household report of 1+ Varicella up-to-date by shot card use			Y	Y	Y	Y	Y	Y	Y	Y	Y	
D7	Consent to obtain child's immunization records from vaccination providers identified in Question D6 in the interview			Y	Y	Y	Y	Y	Y	Y	Y	Y	
DDTAH1 – DDTAH8	Age in days of PROVIDER-REPORTED DTaP/Hib (marked) shot #1 - #8				Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
DDTAP1 – DDTAP8	Age in days of PROVIDER-REPORTED DTaP (marked) shot #1 - #8		Y	Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
DDTHM1 – DDTHM8	Age in days of PROVIDER-REPORTED DTP/Hib (marked) shot #1 - #8				Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
DDTHN1 – DDTHN8	Age in days of PROVIDER-REPORTED DTP/Hib (unmarked) shot #1 - #8				Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
DDTM1 – DDTM8	Age in days of PROVIDER-REPORTED DT (marked) shot #1 - #8			Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
DDTPHB1 – DDTPHB8	Age in days of PROVIDER-REPORTED DTP/Hib (All types) shot #1 - #8	Y	Y	Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
DDTPM1 – DDTPM8	Age in days of PROVIDER-REPORTED DTP (marked) #1 - #8			Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
DDTPN1 – DDTPN8	Age in days of PROVIDER-REPORTED DTP (unmarked) shot #1 - #8			Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
DFLU1 – DFLU8	Age in days of PROVIDER-REPORTED Flu shot #1 - #8										Y	Y	SEE SECTION 7 OF 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
DHA1_AGE – DHA8_AGE	Age in months of PROVIDER-REPORTED DTaP/HIB (marked) shot #1 - #8				Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
DHB1_AGE – DHB8_AGE	Age in months of PROVIDER-REPORTED DTP/HIB (All types) shot #1 - #8	Y	Y	Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
DHEPA1-DHEPA8	Age in days of PROVIDER-REPORTED Hepatitis A shot #1 - #8										Y	Y	
DHEPX1 – DHEPX8	Age in days of PROVIDER-REPORTED Hepatitis B-Only shot #1 - #8					Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
DHIBN1 –	Age in days of PROVIDER-REPORTED					Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.

* Y = included. "Marked" indicates that the provider checked a box on the Immunization History Questionnaire (IHQ) to identify the specific type of vaccination (e.g., Polio - IPV); "unmarked" or "unknown type" indicates that the provider did not check a box on the IHQ to identify the specific type of vaccination (e.g., Polio – unknown whether IPV or OPV). See the NIS Data User's Guides for the respective survey years for more information.

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		95	96	97	98	99	00	01	02	03	04		
DHIBN8	Hib (unknown type) shot #1 - #8												
DHIBO1 – DHIBO8	Age in days of PROVIDER-REPORTED Hib other shot #1 - #8					Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DHIBP1 – DHIBP8	Age in days of PROVIDER-REPORTED Pedvax Hib shot #1 - #8					Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DHIBX1 – DHIBX8	Age in days of PROVIDER-REPORTED Hib-Only shot #1 - #8					Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DHM1_AGE – DHM8_AGE	Age in months of PROVIDER-REPORTED DTP/Hib (marked) shot #1 - #8				Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DHN1_AGE – DHN8_AGE	Age in months of PROVIDER-REPORTED DTP/Hib (unmarked) shot #1 - #8				Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DHPHB1 – DHPHB8	Age in days of PROVIDER-REPORTED Hepatitis B/Hib (Comvax) shot #1 - #8					Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DIPVM1 – DIPVM8	Age in days of PROVIDER-REPORTED Polio/IPV shot (marked) #1 - #8			Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DMMRX1 – DMMRX4	Age in days of PROVIDER-REPORTED MMR shot #1 - #4	Y	Y	Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DMS1 – DMS4	Age in days of PROVIDER-REPORTED Measles shot #1 - #4	Y	Y	Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DMSMP1 – DMSMP4	Age in days of PROVIDER-REPORTED Measles/Mumps shot #1 - #4	Y	Y	Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DMSRB1 – DMSMB4	Age in days of PROVIDER-REPORTED Measles/Rubella shot #1 - #4	Y	Y	Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DOPVM1 – DOPVM8	Age in days of PROVIDER-REPORTED Polio/OPV shot #1 - #8			Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DPCV1 – DPCV8	Age in days of PROVIDER-REPORTED Pneumococcal shot #1 - #8							Y	Y	Y	Y		SEE SECTIONS 1 AND 7 OF 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DPM1_AGE – DPM8_AGE	Age in months of PROVIDER-REPORTED DTP (marked) shot #1 - #8			Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DPN1_AGE – DPN8_AGE	Age in months of PROVIDER-REPORTED DTP (unmarked) shot #1 - #8			Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DPOLN1 – DPOLN8	Age in days of PROVIDER-REPORTED Polio (unmarked) shot #1 - #8			Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DROT1 – DROT8	Age in days of PROVIDER-REPORTED Rotavirus shot #1 - #8					Y	Y	Y	Y	Y	Y		
DTA1_AGE – DTA8_AGE	Age in months of PROVIDER-REPORTED DTaP (marked) shot #1 - #8		Y	Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DTM1_AGE – DTM8_AGE	Age in months of PROVIDER-REPORTED DT (marked) shot #1 - #8			Y	Y	Y							SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
DVRC1 – DVRC4	Age in days of PROVIDER-REPORTED Varicella shot #1 - #4		Y	Y	Y	Y	Y	Y	Y	Y	Y		
ENTRY	Child lives in state with Hepatitis B state entry law for day care/Head Start, 1996- 1997 school year	Y	Y	Y	Y	Y							
ENTRY2	Child lives in state with Hepatitis B state entry law for day care/Head Start, 2001- 2000 school year						Y	Y	Y	Y	Y		
FLU1_AGE – FLU8_AGE	Age in months of PROVIDER-REPORTED Flu shot #1 - #8									Y	Y		SEE SECTION 7 OF 2004 DATA USER’S GUIDE FOR MORE INFORMATION.
FRSTBRN	Firstborn status of child			Y	Y	Y	Y	Y	Y	Y	Y		
FULL_CPO	Household report of 1+ Varicella at any age			Y	Y	Y	Y	Y	Y	Y	Y		

* Y = included. “Marked” indicates that the provider checked a box on the Immunization History Questionnaire (IHQ) to identify the specific type of vaccination (e.g., Polio - IPV); “unmarked” or “unknown type” indicates that the provider did not check a box on the IHQ to identify the specific type of vaccination (e.g., Polio – unknown whether IPV or OPV). See the NIS Data User’s Guides for the respective survey years for more information.

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FULL_PCV	Household report of 4+ Pneumococcal							Y	Y	Y	Y	SEE SECTION 1 OF 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
FULL_RV	Household report of 3+ Rotavirus						Y	Y	Y			
HEA1_AGE – HEA8_AGE	Age in months of PROVIDER-REPORTED Hepatitis A shot #1 -#8									Y	Y	
HEP_BRTH	Hepatitis B given at birth flag			Y	Y	Y	Y	Y	Y	Y	Y	NOT INCLUDED PRIOR TO 1997 BECAUSE THE IMMUNIZATION HISTORY QUESTIONNAIRE DID NOT CONTAIN A CHECK BOX FOR HEPATITIS B ADMINISTERED AT BIRTH. SEE SECTION 4 OF 1997, 1998, 1999, 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDES FOR MORE INFORMATION.
HEP_FLAG	Hepatitis B shot date imputation flag						Y	Y	Y	Y	Y	SEE SECTION 4 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
HHB1_AGE – HHB8_AGE	Age in months of PROVIDER-REPORTED HEPATITIS B-Hib shot #1 - #8					Y						SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
HIN1_AGE – HIN8_AGE	Age in months of PROVIDER-REPORTED Hib (unmarked) shot #1 - #8					Y						SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
HIO1_AGE – HIO8_AGE	Age in months of PROVIDER-REPORTED Hib other shot #1 - #8					Y						SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
HIP1_AGE – HIP8_AGE	Age in months of PROVIDER-REPORTED Pedvax Hib shot #1 - #8					Y						SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
HY_WGT	Modified poststratification household interview weight for child	Y	Y	Y	Y	Y	Y	Y				REPLACED BY RDD_WT IN 2002. SEE SECTION 6 OF 2002 DATA USER'S GUIDE.
IAGECPXR	Age in months when child had chicken pox (Recode)					Y	Y	Y	Y	Y	Y	
ICONTWIC	Did child have continuous WIC participation from birth?					Y	Y					
INCOMER	Family income categories (Recode)	Y	Y	Y	Y							SEE INCQ298. CONTAINS 9 FAMILY INCOME INTERVALS CONSTRUCTED FROM A SET OF INCOME CASCADING QUESTIONS.
INCPORAT	Income-to-poverty ratio					Y	Y	Y	Y	Y	Y	NOT INCLUDED PRIOR TO 1999 BECAUSE INCOMER CONTAINS ONLY 9 INCOME INTERVALS.
INCQ298R	Family income categories (Recode)					Y	Y	Y	Y	Y	Y	SEE INCOMER. CONTAINS 15 FAMILY INCOME INTERVALS CONSTRUCTED FROM INITIAL QUESTION ASKING FOR TOTAL INCOME FOLLOWED BY A SET OF INCOME CASCADING QUESTIONS.
INOPHONR	Length of interruption in telephone service in days (recode)					Y	Y	Y	Y	Y	Y	
INTRP	Interruption in phone service of 7 days or more					Y	Y	Y	Y	Y	Y	
IPV1_AGE – IPV8_AGE	Age in months of PROVIDER-REPORTED Polio/IPV (marked) shot #1 - #8			Y	Y	Y						SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
I_CWIC01	Child ever received WIC benefits					Y	Y					
I_CWIC03	Child is currently getting WIC benefits					Y	Y					
I_CWIC05	Spell of more than 6 months with no WIC benefits					Y	Y					
I_CWIC07	At last WIC certification visit did anyone ask to check child's shot record or vaccine information					Y	Y					
I_HADCPX	Did child ever have chicken pox?					Y	Y	Y	Y	Y	Y	
I_HISP_M	Hispanic origin of mother	Y	Y	Y	Y	Y	Y	Y				STARTING IN 2002 HISPANIC ORIGIN OF THE MOTHER IS NO LONGER INCLUDED IN NIS PUFs.
I_RACEKR	Race of child (recode)	Y	Y	Y	Y	Y	Y	Y				REPLACED BY RACE_K. SEE SECTION 4 OF 2002, 2003 OR 2004 DATA USER'S GUIDE.
I_RACEMR	Race of mother (recode)	Y	Y	Y	Y	Y	Y	Y				STARTING IN 2002 RACE OF THE MOTHER IS NO LONGER INCLUDED IN NIS PUFs.
LANGUAGE	Language the interview was conducted in				Y	Y	Y	Y	Y	Y	Y	
MEDHOME	Was this facility ever child's medical home for primary care?			Y	Y							
MMX1_AGE – MMX4_AGE	Age in months of PROVIDER-REPORTED MMR shot #1 - #4	Y	Y	Y	Y	Y						SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
MS1_AGE – MS4_AGE	Age in months of PROVIDER-REPORTED Measles shot #1 - #4	Y	Y	Y	Y	Y						SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.

* Y = included. "Marked" indicates that the provider checked a box on the Immunization History Questionnaire (IHQ) to identify the specific type of vaccination (e.g., Polio - IPV); "unmarked" or "unknown type" indicates that the provider did not check a box on the IHQ to identify the specific type of vaccination (e.g., Polio – unknown whether IPV or OPV). See the NIS Data User's Guides for the respective survey years for more information.

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MSM1_AGE – MSM4_AGE	Age in months of PROVIDER-REPORTED Measles/Mumps shot #1 - #4	Y	Y	Y	Y	Y						SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
MSR1_AGE – MSR4_AGE	Age in months of PROVIDER-REPORTED Measles/Rubella shot #1 - #4	Y	Y	Y	Y	Y						SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
M_AGEGRP	Age of mother categories			Y	Y	Y	Y	Y	Y	Y	Y	
NCARER1	Child's providers offer comprehensive child care			Y	Y	Y	Y	Y	Y	Y		SEE CARTYP1 TO CARTYP5 FOR 1995-1996.
NCARER2	Child's providers offer acute illness care			Y	Y	Y	Y	Y	Y	Y		SEE CARTYP1 TO CARTYP5 FOR 1995-1996.
NCARER3	Child's providers offer follow-up visits			Y	Y	Y	Y	Y	Y	Y		SEE CARTYP1 TO CARTYP5 FOR 1995-1996.
NCARER4	Child's providers offer after-hours telephone coverage			Y	Y	Y	Y	Y	Y	Y		SEE CARTYP1 TO CARTYP5 FOR 1995-1996.
NCARER5	Child's providers offer WIC program/services			Y	Y	Y	Y	Y	Y	Y		SEE CARTYP1 TO CARTYP5 FOR 1995-1996.
NCARER6	Child's providers offer other services			Y	Y	Y	Y	Y	Y	Y		SEE CARTYP1 TO CARTYP5 FOR 1995-1996.
OPV1_AGE – OPV8_AGE	Age in months of PROVIDER-REPORTED Polio/OPV (marked) shot #1 - #8			Y	Y	Y						SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
PCV1_AGE – PCV8_AGE	Age in months of PROVIDER-REPORTED Pneumococcal shot #1 - #8							Y	Y	Y	Y	SEE SECTIONS 1 AND 7 OF 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
PERSP	Clinical specialty of person(s) who ordered child's vaccinations						Y	Y				
PLN1_AGE – PLN8_AGE	Age in months of PROVIDER-REPORTED Polio (unmarked) shot #1 - #8			Y	Y	Y						SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
PU431331	UTD (up-to-date) flag for provider 4:3:1:3:3:1 (includes 1+ Varicella at age 12+ months)								Y	Y	Y	
P_NUHEPX	Number of Hepatitis B-Only shots, as determined from provider information.					Y	Y	Y	Y	Y	Y	
P_NUHIBN	Number of Hib (unmarked) shots, as determined from provider information.					Y	Y	Y	Y			
P_NUHIBO	Number of Hib (other) shots, as determined from provider information.					Y	Y	Y	Y			
P_NUHIBP	Number of Pedvax Hib shots, as determined from provider information.					Y	Y	Y	Y			
P_NUHIBX	Number of Hib-Only shots, as determined from provider information.					Y	Y	Y	Y			
P_NUHPHB	Number of Hepatitis B/Hib (Comvax) shots, as determined from provider information.					Y	Y	Y	Y	Y	Y	
P_NUMDAH	Number of DTaP/Hib (marked) shots, as determined from provider information.				Y	Y	Y	Y	Y	Y	Y	
P_NUMDHM	Number of DTP/Hib (marked) shots, as determined from provider information.				Y	Y	Y	Y	Y	Y	Y	
P_NUMDHN	Number of DTP/Hib (unmarked) shots, as determined from provider information.				Y	Y	Y	Y	Y			
P_NUMDTA	Number of DTaP (marked) shots, as determined from provider information.		Y	Y	Y	Y	Y	Y	Y	Y	Y	
P_NUMDTM	Number of DT (marked) shots, as determined from provider information.			Y	Y	Y	Y	Y	Y	Y	Y	
P_NUMFLU	Number of Flu shots, as determined from provider information. Does not include shots reported by the provider(s) as occurring after the RDD interview date.									Y	Y	

* Y = included. "Marked" indicates that the provider checked a box on the Immunization History Questionnaire (IHQ) to identify the specific type of vaccination (e.g., Polio - IPV); "unmarked" or "unknown type" indicates that the provider did not check a box on the IHQ to identify the specific type of vaccination (e.g., Polio – unknown whether IPV or OPV). See the NIS Data User's Guides for the respective survey years for more information.

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P_NUMHEA	Number of Hepatitis A shots, as determined from provider information. Does not include shots reported by the provider(s) as occurring after the RDD interview date.										Y	Y	
P_NUMIPV	Number of IPV (marked) shots, as determined from provider information.			Y	Y	Y	Y	Y	Y	Y	Y	Y	
P_NUMMMP	Number of Mumps shots, as determined from provider information.						Y	Y	Y	Y	Y	Y	
P_NUMMMP R	Number of Mumps/Rubella shots, as determined from provider information.						Y	Y	Y	Y	Y	Y	
P_NUMMS	Number of Measles-only shots, as determined from provider information.						Y	Y	Y	Y	Y	Y	
P_NUMMSM	Number of Measles/Mumps shots, as determined from provider information.						Y	Y	Y	Y	Y	Y	
P_NUMMSR	Number of Measles/Rubella shots, as determined from provider information.						Y	Y	Y	Y	Y	Y	
P_NUMOLN	Number of Polio (unmarked) shots, as determined from provider information.			Y	Y	Y	Y	Y	Y	Y	Y	Y	
P_NUMOPV	Number of OPV (marked) shots, as determined from provider information.			Y	Y	Y	Y	Y	Y	Y	Y	Y	
P_NUMPCC	Number of CONJUGATE (marked) shots, as determined from provider information.							Y	Y	Y	Y	Y	SEE SECTION 1 OF 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
P_NUMPCN	Number of PNEUMOCOCCAL (unmarked) shots, as determined from provider information.							Y	Y	Y	Y	Y	SEE SECTION 1 OF 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
P_NUMPCP	Number of POLYSACCHARIDE (marked) shots, as determined from provider information.							Y	Y	Y	Y	Y	SEE SECTION 1 OF 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
P_NUMPCV	Number of PNEUMOCOCCAL (all types) shots, as determined from provider information.							Y	Y	Y	Y	Y	SEE SECTION 1 OF 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
P_NUMROT	Number of Rotavirus shots, as determined from provider information.					Y	Y	Y	Y	Y	Y	Y	
P_NUMTPM	Number of DTP (marked) shots, as determined from provider information.			Y	Y	Y	Y	Y	Y	Y	Y	Y	
P_NUMTPN	Number of DTP (unmarked) shots, as determined from provider information.			Y	Y	Y	Y	Y	Y	Y	Y	Y	
P_NUMVRC	Number of Varicella (chicken pox) shots, as determined from provider information.		Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
P_U12VRC	UTD (up-to-date) flag for provider-reported 1+ Varicella at 12+ months		Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
P_UTDFL1 - P_UTDFL2	UTD (Up-to-date) flag for provider Influenza variable 1-2									Y	Y	Y	
P_UTDPC3	UTD (up-to-date) flag for provider-reported 3+ Pneumococcal.									Y	Y	Y	
P_UTDPCV	UTD (up-to-date) flag for provider-reported 4+ Pneumococcal.							Y	Y	Y	Y	Y	SEE SECTION 1 OF 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
RACEETHK	Race/ethnicity of child (recode)									Y	Y	Y	REPLACED RACEKIDR IN 2002 AND 2003. SEE SECTION 4 OF 2002, 2003 OR 2004 DATA USER'S GUIDE.
RACEKIDR	Race/ethnicity of child (recode)	Y	Y	Y	Y	Y	Y	Y	Y				REPLACED BY RACEETHK IN 2002 AND 2003. SEE SECTION 4 OF 2002, 2003 OR 2004 DATA USER'S GUIDE.
RACEMOMR	Race/ethnicity of mother (recode)	Y	Y	Y	Y	Y	Y	Y	Y				STARTING IN 2002 RACE/ETHNICITY OF THE MOTHER IS NO LONGER INCLUDED IN NIS PUFs.
RACE_K	Race of child (recode)									Y	Y	Y	REPLACED I_RACEKR IN 2002. SEE SECTION 4 OF 2002, 2003 OR 2004 DATA USER'S GUIDE.
RDD_WT	Weight for children with completed									Y			REPLACED HY_WGT IN 2002. SEE SECTION 6 OF 2002 DATA USER'S GUIDE.

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		95	96	97	98	99	00	01	02	03	04		
	household interviews												
REGISTRY	Child's providers reported child's vaccinations to Immunization Registry					Y	Y	Y	Y	Y	Y		
ROT1_AGE – ROT8_AGE	Age in months of PROVIDER-REPORTED Rotavirus shot #1 - #8					Y	Y	Y	Y	Y	Y		
VB11 – VB13	Verbatim text for first other shot reported by provider #1 - #3	Y	Y	Y	Y	Y							STARTING IN 2000 VERBATIM TEXT FOR OTHER SHOTS IS NO LONGER INCLUDED IN NIS PUF.
VB21 – VB23	Verbatim text for second other shot reported by provider #1 - #3	Y	Y	Y	Y	Y							STARTING IN 2000 VERBATIM TEXT FOR OTHER SHOTS IS NO LONGER INCLUDED IN NIS PUF.
VB31 – VB33	Verbatim text for third other shot reported by provider #1 - #3	Y	Y	Y	Y	Y							STARTING IN 2000 VERBATIM TEXT FOR OTHER SHOTS IS NO LONGER INCLUDED IN NIS PUF.
VB41 – VB43	Verbatim text for fourth other shot reported by provider #1 - #3	Y	Y	Y	Y	Y							STARTING IN 2000 VERBATIM TEXT FOR OTHER SHOTS IS NO LONGER INCLUDED IN NIS PUF.
VB51 – VB53	Verbatim text for fifth other shot reported by first provider #1 - #3	Y	Y	Y	Y	Y							STARTING IN 2000 VERBATIM TEXT FOR OTHER SHOTS IS NO LONGER INCLUDED IN NIS PUF.
VFC_PRO	Participation of child's providers in Vaccines for Children program			Y	Y	Y	Y	Y	Y	Y	Y		
VRC1_AGE – VRC4_AGE	Age in months of PROVIDER-REPORTED Varicella shot #1 - #4		Y	Y	Y	Y	Y	Y	Y	Y	Y		
W0	Overall vaccination history nonresponse adjusted weight for children with adequate provider data	Y	Y	Y	Y	Y	Y	Y					REPLACED BY WT IN 2002. SEE SECTION 6 OF 2002 DATA USER'S GUIDE.
WGT	New weight for children with adequate provider data and unvaccinated children									Y	Y		REPLACED WT IN 2003. SEE SECTION 6 OF 2003 OR 2004 DATA USER'S GUIDE.
WGT_RDD	RDD child interview weight									Y	Y		REPLACED BY RDD_WT IN 2003. SEE SECTION 6 OF 2003 OR 2004 DATA USER'S GUIDE.
WT	Weight for children with adequate provider data								Y				REPLACED W0 IN 2002. SEE SECTION 6 OF 2002 DATA USER'S GUIDE.
XDTPTY1 – XDTPTY8	DTP-containing vaccination type code #1 - #8						Y	Y	Y	Y	Y		SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
XHEPTY1 – XHEPTY8	Hepatitis B-containing vaccination type code #1 - #8						Y	Y	Y	Y	Y		SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
XHIBTY1 – XHIBTY8	Hib-containing vaccination type code #1 - #8						Y	Y	Y	Y	Y		SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
XMMRTY1 – XMMRTY4	MCV-containing vaccination type code #1 - #4						Y	Y	Y	Y	Y		SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.
XPCVTY1 – XPCVTY8	Pneumococcal-containing vaccination type code #1 - #8							Y	Y	Y	Y		SEE SECTIONS 1 AND 7 OF 2001 DATA USER'S GUIDE FOR MORE INFORMATION.

* Y = included. "Marked" indicates that the provider checked a box on the Immunization History Questionnaire (IHQ) to identify the specific type of vaccination (e.g., Polio - IPV); "unmarked" or "unknown type" indicates that the provider did not check a box on the IHQ to identify the specific type of vaccination (e.g., Polio – unknown whether IPV or OPV). See the NIS Data User's Guides for the respective survey years for more information.

**ALPHABETICAL LISTING OF VARIABLES THAT ARE NOT AVAILABLE IN ALL
PUBLIC-USE DATA FILES, NATIONAL IMMUNIZATION SURVEY, 1995-2004**

VARIABLE NAME	VARIABLE LABEL*	YEAR OF DATA COLLECTION										NOTES (See NIS PUF Code Books)
		95	96	97	98	99	00	01	02	03	04	
XPOLTY1 – XPOLTY8	Polio-containing vaccination type code #1 - #8						Y	Y	Y	Y	Y	SEE SECTION 7 OF 2000, 2001, 2002, 2003 OR 2004 DATA USER'S GUIDE FOR MORE INFORMATION.

* Y = included. “Marked” indicates that the provider checked a box on the Immunization History Questionnaire (IHQ) to identify the specific type of vaccination (e.g., Polio - IPV); “unmarked” or “unknown type” indicates that the provider did not check a box on the IHQ to identify the specific type of vaccination (e.g., Polio – unknown whether IPV or OPV). See the NIS Data User’s Guides for the respective survey years for more information.