

Codebook ▾

Data Dictionary Codebook

01/24/2022 1:28pm

[^ Collapse all instruments](#)

#	Variable / Field Name	Field Label <i>Field Note</i>	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)												
Instrument: Educate to Vaccinate (educate_to_vaccinate) Enabled as survey ^ Collapse															
1	participant_id	Participant ID	text												
2	start	Are you interested in participating in the survey?	yesno <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table> <p>Custom alignment: RH Stop actions on 0</p>	1	Yes	0	No								
1	Yes														
0	No														
3	duration_employment	Section Header: <i>Work Experience</i> How long have you been working for Northwell Health?	radio <table border="1"> <tr> <td>1</td> <td>0-2 years</td> </tr> <tr> <td>2</td> <td>3-5 years</td> </tr> <tr> <td>3</td> <td>5-10 years</td> </tr> <tr> <td>4</td> <td>10-20 years</td> </tr> <tr> <td>5</td> <td>20-30 years</td> </tr> <tr> <td>6</td> <td>>30 years</td> </tr> </table> <p>Question number: 1</p>	1	0-2 years	2	3-5 years	3	5-10 years	4	10-20 years	5	20-30 years	6	>30 years
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2	3-5 years														
3	5-10 years														
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6	>30 years														
4	duration_healthcare	How long have you been working in the healthcare industry?	radio <table border="1"> <tr> <td>1</td> <td>0-2 years</td> </tr> <tr> <td>2</td> <td>3-5 years</td> </tr> <tr> <td>3</td> <td>5-10 years</td> </tr> <tr> <td>4</td> <td>10-20 years</td> </tr> <tr> <td>5</td> <td>20-30 years</td> </tr> <tr> <td>6</td> <td>>30 years</td> </tr> </table> <p>Question number: 2</p>	1	0-2 years	2	3-5 years	3	5-10 years	4	10-20 years	5	20-30 years	6	>30 years
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5	job_function	What is your PRIMARY job function?	<p>dropdown</p> <table border="1"> <tr><td>1</td><td>Academia and Research</td></tr> <tr><td>2</td><td>Administrative Support</td></tr> <tr><td>3</td><td>Advanced Clinical Providers</td></tr> <tr><td>4</td><td>Analytics and Business Insights</td></tr> <tr><td>5</td><td>Business Services</td></tr> <tr><td>6</td><td>Business Strategy</td></tr> <tr><td>7</td><td>Clinical Care</td></tr> <tr><td>8</td><td>Clinical Laboratory</td></tr> <tr><td>9</td><td>Clinical Support</td></tr> <tr><td>10</td><td>Facilities and Support Services</td></tr> <tr><td>11</td><td>Finance</td></tr> <tr><td>12</td><td>Foundation</td></tr> <tr><td>13</td><td>General Management</td></tr> <tr><td>14</td><td>Hospitality</td></tr> <tr><td>15</td><td>Human Resources</td></tr> <tr><td>16</td><td>Information Technology and Services</td></tr> <tr><td>17</td><td>Legal and Compliance</td></tr> <tr><td>18</td><td>Marketing and Communications</td></tr> <tr><td>19</td><td>Nursing</td></tr> <tr><td>20</td><td>Patient and Customer Experience</td></tr> <tr><td>21</td><td>Pharmacy</td></tr> <tr><td>22</td><td>Provider</td></tr> <tr><td>23</td><td>Quality, Patient Safety and Infection Prevention</td></tr> <tr><td>24</td><td>Rehabilitation Services</td></tr> <tr><td>25</td><td>Revenue Cycle</td></tr> <tr><td>26</td><td>Risk Management</td></tr> <tr><td>27</td><td>Social Services</td></tr> <tr><td>28</td><td>Supply Chain</td></tr> </table> <p>Question number: 3</p>	1	Academia and Research	2	Administrative Support	3	Advanced Clinical Providers	4	Analytics and Business Insights	5	Business Services	6	Business Strategy	7	Clinical Care	8	Clinical Laboratory	9	Clinical Support	10	Facilities and Support Services	11	Finance	12	Foundation	13	General Management	14	Hospitality	15	Human Resources	16	Information Technology and Services	17	Legal and Compliance	18	Marketing and Communications	19	Nursing	20	Patient and Customer Experience	21	Pharmacy	22	Provider	23	Quality, Patient Safety and Infection Prevention	24	Rehabilitation Services	25	Revenue Cycle	26	Risk Management	27	Social Services	28	Supply Chain
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6	job_location	Where is your PRIMARY job location?	<p>dropdown</p> <table border="1"> <tr><td>1</td><td>Ambulatory/NHPP - Anesthesia</td></tr> <tr><td>2</td><td>Ambulatory/NHPP - Behavioral Health</td></tr> <tr><td>3</td><td>Ambulatory/NHPP - Cancer</td></tr> <tr><td>4</td><td>Ambulatory/NHPP - Cardiology</td></tr> <tr><td>5</td><td>Ambulatory/NHPP - Cardiothoracic Surgery</td></tr> <tr><td>6</td><td>Ambulatory/NHPP - Concorde Medical Group</td></tr> <tr><td>7</td><td>Ambulatory/NHPP - Dental Medicine</td></tr> <tr><td>8</td><td>Ambulatory/NHPP - Dermatology</td></tr> <tr><td>9</td><td>Ambulatory/NHPP - Emergency Medicine</td></tr> <tr><td>10</td><td>Ambulatory/NHPP - Feinstein Institutes</td></tr> <tr><td>11</td><td>Ambulatory/NHPP - Imaging</td></tr> <tr><td>12</td><td>Ambulatory/NHPP - Mather Harborview</td></tr> <tr><td>13</td><td>Ambulatory/NHPP - Medicine</td></tr> <tr><td>14</td><td>Ambulatory/NHPP - Neurology</td></tr> <tr><td>15</td><td>Ambulatory/NHPP - Neurosurgery</td></tr> <tr><td>16</td><td>Ambulatory/NHPP - Obstetrics and Gynecology</td></tr> </table>	1	Ambulatory/NHPP - Anesthesia	2	Ambulatory/NHPP - Behavioral Health	3	Ambulatory/NHPP - Cancer	4	Ambulatory/NHPP - Cardiology	5	Ambulatory/NHPP - Cardiothoracic Surgery	6	Ambulatory/NHPP - Concorde Medical Group	7	Ambulatory/NHPP - Dental Medicine	8	Ambulatory/NHPP - Dermatology	9	Ambulatory/NHPP - Emergency Medicine	10	Ambulatory/NHPP - Feinstein Institutes	11	Ambulatory/NHPP - Imaging	12	Ambulatory/NHPP - Mather Harborview	13	Ambulatory/NHPP - Medicine	14	Ambulatory/NHPP - Neurology	15	Ambulatory/NHPP - Neurosurgery	16	Ambulatory/NHPP - Obstetrics and Gynecology																								
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17	Ambulatory/NHPP - Ophthalmology
18	Ambulatory/NHPP - Orlin & Cohen
19	Ambulatory/NHPP - Orthopedics
20	Ambulatory/NHPP - Otolaryngology
21	Ambulatory/NHPP - Pathology
22	Ambulatory/NHPP - Peconic Bay Medical Group
23	Ambulatory/NHPP - Pediatrics
24	Ambulatory/NHPP - Phelps Medical Associates
25	Ambulatory/NHPP - PM&R
26	Ambulatory/NHPP - Surgery
27	Ambulatory/NHPP - University Physicians Group
28	Ambulatory/NHPP - Urology
29	Ambulatory/NHPP - Westchester Health
30	Central - Cohen Children's Medical Center
31	Central - CFAM - Ambulatory Surgery
32	Central - LIJ Forest Hills
33	Central - LIJ Medical Center
34	Central - LIJ Valley Stream
35	Central - North Shore University Hospital
36	Central - Zucker Hillside Hospital
37	Corporate - Brooklyn Region
38	Corporate - CEMS
39	Corporate - Centralized Business Services
40	Corporate - Centralized Policy Procedure
41	Corporate - Chief Med Officer
42	Corporate - CLI
43	Corporate - Community Health
44	Corporate - Community Relations
45	Corporate - Corporate Facilities Services
46	Corporate - Corporate Real Estate
47	Corporate - Corporate Security
48	Corporate - Digital Pt Exp Transformation
49	Corporate - Emergency Management
50	Corporate - Executives
51	Corporate - Finance
52	Corporate - FlexStaff
53	Corporate - Foundation
54	Corporate - FPP Administration
55	Corporate - Health Solutions
56	Corporate - HR
57	Corporate - Katz Institute for Women's Health
58	Corporate - Legal
59	Corporate - Managed Care
60	Corporate - Marketing & Communications
61	Corporate - Medical Group IPA
62	Corporate - MGCOR - Finance

63	Corporate - Northwell Direct
64	Corporate - Northwell Holdings
65	Corporate - Nursing
66	Corporate - OCIO
67	Corporate - Other Administration
68	Corporate - Patient Access Services
69	Corporate - Patient Experience
70	Corporate - Revenue Cycle
71	Corporate - Risk Management
72	Corporate - Strategic Planning
73	Corporate - Syst Administration
74	Corporate - System Perioperative Services
75	Corporate - System Project Mgmt Office
76	Corporate - The Center for Equity of Care
77	Corporate - Vanguard
78	Corporate - Workforce Safety
79	Eastern - Glen Cove Hospital
80	Eastern - Huntington Hospital
81	Eastern - Mather Hospital
82	Eastern - Peconic Bay Medical Center
83	Eastern - Plainview Hospital
84	Eastern - South Oaks Hospital
85	Eastern - South Shore University Hospital
86	Eastern - Syosset Hospital
87	Post Acute - Hospice
88	Post Acute - LIJ Medical Center - Homecare
89	Post Acute - Northwell - Homecare Corporate
90	Post Acute - Northwell Laboratories
91	Post Acute - NSUH at Manhasset - Homecare
92	Post Acute - Orzac Rehab
93	Post Acute - Regioncare
94	Post Acute - Rehab at Home Manhasset
95	Post Acute - STARS
96	Post Acute - Stern Rehab
97	Post Acute - Transition Program
98	Post Acute - VNA Hospice
99	Post Acute - VNA HV Putnam
100	Post Acute - VNA Licensed Agency
101	Western - Lenox Health Greenwich Village
102	Western - Lenox Hill Hospital
103	Western - Manhattan Eye, Ear & Throat Hospital
104	Western - Northern Westchester Hospital
105	Western - Phelps Memorial Hospital
106	Western - Staten Island University Hospital - North
107	Western - Staten Island University Hospital - South
108	Other

			Question number: 4																		
7	age	Section Header: <i>Demographic information</i> Age:	dropdown <table border="1"> <tr><td>1</td><td>18-25 years</td></tr> <tr><td>2</td><td>26-35 years</td></tr> <tr><td>3</td><td>36-45 years</td></tr> <tr><td>4</td><td>46-55 years</td></tr> <tr><td>5</td><td>55-65 years</td></tr> <tr><td>6</td><td>>65 years</td></tr> </table>	1	18-25 years	2	26-35 years	3	36-45 years	4	46-55 years	5	55-65 years	6	>65 years						
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6	>65 years																				
8	sex	Sex:	dropdown <table border="1"> <tr><td>1</td><td>Female</td></tr> <tr><td>2</td><td>Male</td></tr> <tr><td>3</td><td>Prefer not to answer</td></tr> </table>	1	Female	2	Male	3	Prefer not to answer												
1	Female																				
2	Male																				
3	Prefer not to answer																				
9	gender	Gender:	dropdown <table border="1"> <tr><td>1</td><td>Identify as female</td></tr> <tr><td>2</td><td>Identify as male</td></tr> <tr><td>3</td><td>Non-binary</td></tr> <tr><td>4</td><td>Prefer not to answer</td></tr> </table>	1	Identify as female	2	Identify as male	3	Non-binary	4	Prefer not to answer										
1	Identify as female																				
2	Identify as male																				
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4	Prefer not to answer																				
10	ethnicity	Ethnicity:	dropdown <table border="1"> <tr><td>1</td><td>Hispanic or Latinx</td></tr> <tr><td>2</td><td>Not Hispanic or Latinx</td></tr> </table>	1	Hispanic or Latinx	2	Not Hispanic or Latinx														
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2	Not Hispanic or Latinx																				
11	race	Race:	dropdown <table border="1"> <tr><td>1</td><td>African American or Black</td></tr> <tr><td>2</td><td>Caucasian or White</td></tr> <tr><td>3</td><td>Asian American</td></tr> <tr><td>4</td><td>American Indian/Alaska Native</td></tr> <tr><td>5</td><td>Native Hawaiian/Pacific Islander</td></tr> <tr><td>6</td><td>Multi-racial</td></tr> </table>	1	African American or Black	2	Caucasian or White	3	Asian American	4	American Indian/Alaska Native	5	Native Hawaiian/Pacific Islander	6	Multi-racial						
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12	income	Income Range:	dropdown <table border="1"> <tr><td>1</td><td>less than \$30,000</td></tr> <tr><td>2</td><td>\$30,000-49,999</td></tr> <tr><td>3</td><td>\$50,000-74,999</td></tr> <tr><td>4</td><td>\$75,000-99,999</td></tr> <tr><td>5</td><td>\$100,000-149,999</td></tr> <tr><td>6</td><td>\$150,000-199,999</td></tr> <tr><td>7</td><td>\$200,000-249,999</td></tr> <tr><td>8</td><td>\$250,000-299,999,</td></tr> <tr><td>9</td><td>greater than \$300,000</td></tr> </table>	1	less than \$30,000	2	\$30,000-49,999	3	\$50,000-74,999	4	\$75,000-99,999	5	\$100,000-149,999	6	\$150,000-199,999	7	\$200,000-249,999	8	\$250,000-299,999,	9	greater than \$300,000
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9	greater than \$300,000																				
13	zip_code	Zip code at primary residence:	text (zipcode) Question number: 7																		

14	languages_spoken	Languages spoken (may choose more than one):	checkbox <table border="1"> <tr><td>1</td><td>languages_spoken__1</td><td>English</td></tr> <tr><td>2</td><td>languages_spoken__2</td><td>Spanish</td></tr> <tr><td>3</td><td>languages_spoken__3</td><td>Mandarin</td></tr> <tr><td>4</td><td>languages_spoken__4</td><td>Cantonese</td></tr> <tr><td>5</td><td>languages_spoken__5</td><td>Korean</td></tr> <tr><td>6</td><td>languages_spoken__6</td><td>Hindi</td></tr> <tr><td>7</td><td>languages_spoken__7</td><td>Punjabi</td></tr> <tr><td>8</td><td>languages_spoken__8</td><td>Bengali</td></tr> <tr><td>9</td><td>languages_spoken__9</td><td>Russian</td></tr> <tr><td>10</td><td>languages_spoken__10</td><td>French/Creole</td></tr> <tr><td>11</td><td>languages_spoken__11</td><td>Other</td></tr> </table> Question number: 8	1	languages_spoken__1	English	2	languages_spoken__2	Spanish	3	languages_spoken__3	Mandarin	4	languages_spoken__4	Cantonese	5	languages_spoken__5	Korean	6	languages_spoken__6	Hindi	7	languages_spoken__7	Punjabi	8	languages_spoken__8	Bengali	9	languages_spoken__9	Russian	10	languages_spoken__10	French/Creole	11	languages_spoken__11	Other			
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11	languages_spoken__11	Other																																					
15	languages_other Show the field ONLY if: [languages_spoken(11)] = '1'	If other, which language?	text (alpha_only) Question number: 9																																				
16	immunocompromised	Do you have a compromised immune system? (therefore eligible for a third dose of COVID-19 vaccine 28 days after your second dose?)	yesno <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Question number: 10 Stop actions on 1	1	Yes	0	No																																
1	Yes																																						
0	No																																						
17	chronic	Please check all the medical conditions that apply to you.	checkbox <table border="1"> <tr><td>1</td><td>chronic__1</td><td>Heart disease</td></tr> <tr><td>2</td><td>chronic__2</td><td>Diabetes</td></tr> <tr><td>3</td><td>chronic__3</td><td>High blood pressure</td></tr> <tr><td>4</td><td>chronic__4</td><td>Chronic lung disease</td></tr> <tr><td>5</td><td>chronic__5</td><td>Obesity</td></tr> <tr><td>6</td><td>chronic__6</td><td>Pregnancy</td></tr> <tr><td>7</td><td>chronic__7</td><td>Chronic kidney disease,</td></tr> <tr><td>8</td><td>chronic__8</td><td>Sickle cell disease</td></tr> <tr><td>9</td><td>chronic__9</td><td>Neurodevelopmental disorders</td></tr> <tr><td>10</td><td>chronic__10</td><td>Medically complex (eg. cerebral palsy, genetic syndrome, severe congenital anomalies)</td></tr> <tr><td>11</td><td>chronic__11</td><td>Use medical technology such as g-tube, tracheostomy, ventilation machines such as CPAP</td></tr> <tr><td>12</td><td>chronic__12</td><td>None of the above</td></tr> </table> Question number: 11	1	chronic__1	Heart disease	2	chronic__2	Diabetes	3	chronic__3	High blood pressure	4	chronic__4	Chronic lung disease	5	chronic__5	Obesity	6	chronic__6	Pregnancy	7	chronic__7	Chronic kidney disease,	8	chronic__8	Sickle cell disease	9	chronic__9	Neurodevelopmental disorders	10	chronic__10	Medically complex (eg. cerebral palsy, genetic syndrome, severe congenital anomalies)	11	chronic__11	Use medical technology such as g-tube, tracheostomy, ventilation machines such as CPAP	12	chronic__12	None of the above
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18	covid19vaccinemonth	When did you receive your first COVID-19 vaccine?	<p>dropdown</p> <table border="1"> <tr><td>1</td><td>December 2020</td></tr> <tr><td>2</td><td>January 2021</td></tr> <tr><td>3</td><td>February 2021</td></tr> <tr><td>4</td><td>March 2021</td></tr> <tr><td>5</td><td>April 2021</td></tr> <tr><td>6</td><td>May 2021</td></tr> <tr><td>7</td><td>June 2021</td></tr> <tr><td>8</td><td>July 2021</td></tr> <tr><td>9</td><td>August 2021</td></tr> <tr><td>10</td><td>September 2021</td></tr> <tr><td>11</td><td>October 2021</td></tr> <tr><td>12</td><td>November 2021</td></tr> <tr><td>13</td><td>December 2021</td></tr> <tr><td>14</td><td>January 2022</td></tr> </table> <p>Question number: 12</p>	1	December 2020	2	January 2021	3	February 2021	4	March 2021	5	April 2021	6	May 2021	7	June 2021	8	July 2021	9	August 2021	10	September 2021	11	October 2021	12	November 2021	13	December 2021	14	January 2022		
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19	covid19vaccinemonth_2	When did you receive your second COVID-19 vaccine?	<p>dropdown</p> <table border="1"> <tr><td>1</td><td>December 2020</td></tr> <tr><td>2</td><td>January 2021</td></tr> <tr><td>3</td><td>February 2021</td></tr> <tr><td>4</td><td>March 2021</td></tr> <tr><td>5</td><td>April 2021</td></tr> <tr><td>6</td><td>May 2021</td></tr> <tr><td>7</td><td>June 2021</td></tr> <tr><td>8</td><td>July 2021</td></tr> <tr><td>9</td><td>August 2021</td></tr> <tr><td>10</td><td>September 2021</td></tr> <tr><td>11</td><td>October 2021</td></tr> <tr><td>12</td><td>November 2021</td></tr> <tr><td>13</td><td>December 2021</td></tr> <tr><td>14</td><td>January 2022</td></tr> <tr><td>15</td><td>Not applicable (received J&J vaccine)</td></tr> </table> <p>Question number: 13</p>	1	December 2020	2	January 2021	3	February 2021	4	March 2021	5	April 2021	6	May 2021	7	June 2021	8	July 2021	9	August 2021	10	September 2021	11	October 2021	12	November 2021	13	December 2021	14	January 2022	15	Not applicable (received J&J vaccine)
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14	January 2022																																
15	Not applicable (received J&J vaccine)																																
20	covid19vaccine6months	Has it been least six months since your received the COVID-19 vaccine series (PfizerBioNTech or Moderna mRNA vaccine) or two months after a single dose (Johnson & Johnson/Janssen)?	<p>yesno</p> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																										
1	Yes																																
0	No																																
21	boostersched Show the field ONLY if: [covid19vaccine6months] = '1'	Are you scheduled to get or already got a COVID-19 vaccine booster dose?	<p>yesno</p> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																										
1	Yes																																
0	No																																
22	boosterrecent Show the field ONLY if: [covid19vaccine6months] = '0'	Is your most recent vaccination a COVID-19 booster dose?	<p>yesno</p> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																										
1	Yes																																
0	No																																
23	boosterreceived	When it was allowed (at least six months after the Pfizer-BioNTech or Moderna mRNA vaccine series or two months after a single dose Johnson & Johnson/Janssen), did you receive a COVID-19 booster vaccine?	<p>yesno</p> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No																										
1	Yes																																
0	No																																

24	parentguardian	Are you a parent or guardian of a child 17 years old or younger?	yesno <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No						
1	Yes												
0	No												
25	numberchildren Show the field ONLY if: [parentguardian] = '1'	How many children do you have?	dropdown <table border="1"> <tr> <td>1</td> <td>1</td> </tr> <tr> <td>2</td> <td>2</td> </tr> <tr> <td>3</td> <td>3</td> </tr> <tr> <td>4</td> <td>4</td> </tr> <tr> <td>5</td> <td>5</td> </tr> </table> <p>Question number: 20</p>	1	1	2	2	3	3	4	4	5	5
1	1												
2	2												
3	3												
4	4												
5	5												
26	child_1 Show the field ONLY if: [numberchildren] = '1' or [numberchildren] = '2' or [numberchildren] = '3' or [numberchildren] = '4' or [numberchildren] = 5	Section Header: <i>Please enter the following information for each child</i> Child 1	radio (Matrix) <table border="1"> <tr> <td>1</td> <td>less than 5 years old</td> </tr> <tr> <td>2</td> <td>5-11 years old</td> </tr> <tr> <td>3</td> <td>12-17 years old</td> </tr> <tr> <td>4</td> <td>greater than 18 years old</td> </tr> </table>	1	less than 5 years old	2	5-11 years old	3	12-17 years old	4	greater than 18 years old		
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4	greater than 18 years old												
27	child_2 Show the field ONLY if: [numberchildren] = '2' or [numberchildren] = '3' or [numberchildren] = '4' or [numberchildren] = 5	Child 2	radio (Matrix) <table border="1"> <tr> <td>1</td> <td>less than 5 years old</td> </tr> <tr> <td>2</td> <td>5-11 years old</td> </tr> <tr> <td>3</td> <td>12-17 years old</td> </tr> <tr> <td>4</td> <td>greater than 18 years old</td> </tr> </table>	1	less than 5 years old	2	5-11 years old	3	12-17 years old	4	greater than 18 years old		
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28	child_3 Show the field ONLY if: [numberchildren] = '3' or [numberchildren] = '4' or [numberchildren] = 5	Child 3	radio (Matrix) <table border="1"> <tr> <td>1</td> <td>less than 5 years old</td> </tr> <tr> <td>2</td> <td>5-11 years old</td> </tr> <tr> <td>3</td> <td>12-17 years old</td> </tr> <tr> <td>4</td> <td>greater than 18 years old</td> </tr> </table>	1	less than 5 years old	2	5-11 years old	3	12-17 years old	4	greater than 18 years old		
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29	child_4 Show the field ONLY if: [numberchildren] = '4' or [numberchildren] = 5	Child 4	radio (Matrix) <table border="1"> <tr> <td>1</td> <td>less than 5 years old</td> </tr> <tr> <td>2</td> <td>5-11 years old</td> </tr> <tr> <td>3</td> <td>12-17 years old</td> </tr> <tr> <td>4</td> <td>greater than 18 years old</td> </tr> </table>	1	less than 5 years old	2	5-11 years old	3	12-17 years old	4	greater than 18 years old		
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30	child_5 Show the field ONLY if: [numberchildren] = 5	Child 5	radio (Matrix) <table border="1"> <tr> <td>1</td> <td>less than 5 years old</td> </tr> <tr> <td>2</td> <td>5-11 years old</td> </tr> <tr> <td>3</td> <td>12-17 years old</td> </tr> <tr> <td>4</td> <td>greater than 18 years old</td> </tr> </table>	1	less than 5 years old	2	5-11 years old	3	12-17 years old	4	greater than 18 years old		
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4	greater than 18 years old												
31	child_1_rec_firstdose_5 Show the field ONLY if: [child_1] = '2'	Has your child aged 5-11 years old received their first dose of COVID-19 vaccine?	yesno <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No						
1	Yes												
0	No												
32	child_1_compl_series_5 Show the field ONLY if: [child_1_rec_firstdose_5] = '1'	Has your child aged 5-11 years old completed the COVID-19 vaccine series?	yesno <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No						
1	Yes												
0	No												
33	child_1_intent_5 Show the field ONLY if: [child_1_rec_firstdose_5] = '0'	Are you planning to get your 5-11 year old child COVID-19 vaccinated?	yesno <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No						
1	Yes												
0	No												
34	child_2_rec_firstdose_5 Show the field ONLY if: [child_2] = '2'	Has your second child aged 5-11 years old received their first dose of COVID-19 vaccine?	yesno <table border="1"> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>0</td> <td>No</td> </tr> </table>	1	Yes	0	No						
1	Yes												
0	No												

35	child_2_compl_series_5 Show the field ONLY if: [child_2_rec_firstdose_5] = '1'	Has your second child aged 5-11 years old completed the COVID-19 vaccine series?	yesno 1 Yes 0 No
36	child_2_intent_5 Show the field ONLY if: [child_2_rec_firstdose_5] = '0'	Are you planning to get your second 5-11 year old child COVID-19 vaccinated?	yesno 1 Yes 0 No
37	child_3_rec_firstdose_5 Show the field ONLY if: [child_3] = '2'	Has your third child aged 5-11 years old received their first dose of COVID-19 vaccine?	yesno 1 Yes 0 No
38	child_3_compl_series_5 Show the field ONLY if: [child_3_rec_firstdose_5] = '1'	Has your third child aged 5-11 years old completed the COVID-19 vaccine series?	yesno 1 Yes 0 No
39	child_3_intent_5 Show the field ONLY if: [child_3_rec_firstdose_12] = '0'	Are you planning to get your third 5-11 year old child COVID-19 vaccinated?	yesno 1 Yes 0 No
40	child_4_rec_firstdose_5 Show the field ONLY if: [child_4] = '2'	Has your fourth child aged 5-11 years old received their first dose of COVID-19 vaccine?	yesno 1 Yes 0 No
41	child_4_compl_series_5 Show the field ONLY if: [child_4_rec_firstdose_5] = '1'	Has your fourth child aged 5-11 years old completed the COVID-19 vaccine series?	yesno 1 Yes 0 No
42	child_4_intent_5 Show the field ONLY if: [child_4_rec_firstdose_12] = '0'	Are you planning to get your fourth 5-11 year old child COVID-19 vaccinated?	yesno 1 Yes 0 No
43	child_5_rec_firstdose_5 Show the field ONLY if: [child_5] = '2'	Has your fifth child aged 5-11 years old received their first dose of COVID-19 vaccine?	yesno 1 Yes 0 No
44	child_5_compl_series_5 Show the field ONLY if: [child_5_rec_firstdose_5] = '1'	Has your fifth child aged 5-11 years old completed the COVID-19 vaccine series?	yesno 1 Yes 0 No
45	child_5_intent_5 Show the field ONLY if: [child_5_rec_firstdose_5] = '0'	Are you planning to get your fifth 5-11 year old child COVID-19 vaccinated?	yesno 1 Yes 0 No
46	child_1_rec_firstdose_12 Show the field ONLY if: [child_1] = '3'	Has your child aged 12-17 years old received their first dose of COVID-19 vaccine?	yesno 1 Yes 0 No
47	child_1_compl_series_12 Show the field ONLY if: [child_1_rec_firstdose_12] = '1'	Has your 12-17 year old child completed the COVID-19 vaccine series?	yesno 1 Yes 0 No
48	child_1_intent_12 Show the field ONLY if: [child_1_rec_firstdose_12] = '0'	Are you planning to get your 12-17 year old child COVID-19 vaccinated?	yesno 1 Yes 0 No
49	child_2_rec_firstdose_12 Show the field ONLY if: [child_2] = '3'	Has your second child aged 12-17 years old received their first dose of COVID-19 vaccine?	yesno 1 Yes 0 No

50	child_2_compl_series_12 Show the field ONLY if: [child_2_rec_firstdose_12] = '1'	Has your second 12-17 year old child completed the COVID-19 vaccine series?	yesno 1 Yes 0 No
51	child_2_intent_12 Show the field ONLY if: [child_2_rec_firstdose_12] = '0'	Are you planning to get your second 12-17 year old child COVID-19 vaccinated?	yesno 1 Yes 0 No
52	child_3_rec_firstdose_12 Show the field ONLY if: [child_3] = '3'	Has your third child aged 12-17 years old received their first dose of COVID-19 vaccine?	yesno 1 Yes 0 No
53	child_3_compl_series_12 Show the field ONLY if: [child_3_rec_firstdose_12] = '1'	Has your third 12-17 year old child completed the COVID-19 vaccine series?	yesno 1 Yes 0 No
54	child_3_intent_12 Show the field ONLY if: [child_3_rec_firstdose_12] = '0'	Are you planning to get your third 12-17 year old child COVID-19 vaccinated?	yesno 1 Yes 0 No
55	child_4_rec_firstdose_12 Show the field ONLY if: [child_4] = '3'	Has your fourth child aged 12-17 years old received their first dose of COVID-19 vaccine?	yesno 1 Yes 0 No
56	child_4_compl_series_12 Show the field ONLY if: [child_4_rec_firstdose_5] = '1'	Has your fourth 12-17 year old child completed the COVID-19 vaccine series?	yesno 1 Yes 0 No
57	child_4_intent_12 Show the field ONLY if: [child_4_rec_firstdose_5] = '0'	Are you planning to get your fourth 12-17 year old child COVID-19 vaccinated?	yesno 1 Yes 0 No
58	child_5_rec_firstdose_12 Show the field ONLY if: [child_5] = '3'	Has your fifth child aged 12-17 years old received their first dose of COVID-19 vaccine?	yesno 1 Yes 0 No
59	child_5_compl_series_12 Show the field ONLY if: [child_5_rec_firstdose_12] = '1'	Has your fifth 12-17 year old child completed the COVID-19 vaccine series?	yesno 1 Yes 0 No
60	child_5_intent_12 Show the field ONLY if: [child_5_rec_firstdose_12] = '0'	Are you planning to get your fifth 12-17 year old child COVID-19 vaccinated?	yesno 1 Yes 0 No

61	<p>chronic_child</p> <p>Show the field ONLY if: [parentguardian] = '1'</p>	<p>Please check all the medical conditions that apply to your child(ren).</p>	<p>checkbox</p> <table border="1"> <tr><td>1</td><td>chronic_child__1</td><td>Heart disease</td></tr> <tr><td>2</td><td>chronic_child__2</td><td>Diabetes</td></tr> <tr><td>3</td><td>chronic_child__3</td><td>High blood pressure</td></tr> <tr><td>4</td><td>chronic_child__4</td><td>Chronic lung disease</td></tr> <tr><td>5</td><td>chronic_child__5</td><td>Obesity</td></tr> <tr><td>6</td><td>chronic_child__6</td><td>Pregnancy,</td></tr> <tr><td>7</td><td>chronic_child__7</td><td>Chronic kidney disease,</td></tr> <tr><td>8</td><td>chronic_child__8</td><td>Sickle cell disease</td></tr> <tr><td>9</td><td>chronic_child__9</td><td>Neurodevelopmental disorders</td></tr> <tr><td>10</td><td>chronic_child__10</td><td>Medically complex (eg. CP, genetic syndrome, severe congenital anomalies)</td></tr> <tr><td>11</td><td>chronic_child__11</td><td>Medical-related technologic dependence (g-tube, trach, ventilation)</td></tr> <tr><td>12</td><td>chronic_child__12</td><td>None of the above</td></tr> </table>	1	chronic_child__1	Heart disease	2	chronic_child__2	Diabetes	3	chronic_child__3	High blood pressure	4	chronic_child__4	Chronic lung disease	5	chronic_child__5	Obesity	6	chronic_child__6	Pregnancy,	7	chronic_child__7	Chronic kidney disease,	8	chronic_child__8	Sickle cell disease	9	chronic_child__9	Neurodevelopmental disorders	10	chronic_child__10	Medically complex (eg. CP, genetic syndrome, severe congenital anomalies)	11	chronic_child__11	Medical-related technologic dependence (g-tube, trach, ventilation)	12	chronic_child__12	None of the above
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12	chronic_child__12	None of the above																																					
62	<p>safe</p>	<p>Section Header: <i>Section 1: Please rate your level of agreement to each statement below.</i></p> <p>Routine childhood vaccines are safe</p>	<p>radio (Matrix)</p> <table border="1"> <tr><td>0</td><td>Strongly disagree</td></tr> <tr><td>1</td><td>Disagree</td></tr> <tr><td>2</td><td>Neutral</td></tr> <tr><td>3</td><td>Agree</td></tr> <tr><td>4</td><td>Strongly agree</td></tr> </table>	0	Strongly disagree	1	Disagree	2	Neutral	3	Agree	4	Strongly agree																										
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63	<p>benefitrisk</p>	<p>For a majority of the population, the protective benefits obtained from vaccinating outweigh the possible risks that may occur as a result of vaccinating (e.g. side effects, adverse events).</p>	<p>radio (Matrix)</p> <table border="1"> <tr><td>0</td><td>Strongly disagree</td></tr> <tr><td>1</td><td>Disagree</td></tr> <tr><td>2</td><td>Neutral</td></tr> <tr><td>3</td><td>Agree</td></tr> <tr><td>4</td><td>Strongly agree</td></tr> </table>	0	Strongly disagree	1	Disagree	2	Neutral	3	Agree	4	Strongly agree																										
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64	<p>prevent</p>	<p>Vaccines are an effective way to prevent many different diseases, such as COVID-19, measles, hepatitis B, and polio.</p>	<p>radio (Matrix)</p> <table border="1"> <tr><td>0</td><td>Strongly disagree</td></tr> <tr><td>1</td><td>Disagree</td></tr> <tr><td>2</td><td>Neutral</td></tr> <tr><td>3</td><td>Agree</td></tr> <tr><td>4</td><td>Strongly agree</td></tr> </table>	0	Strongly disagree	1	Disagree	2	Neutral	3	Agree	4	Strongly agree																										
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65	<p>recommendations</p>	<p>The current number of recommended childhood vaccines, when received in accordance with the Advisory Committee on Immunization Practices (ACIP) and the Center for Disease Control and Prevention (CDC) recommended schedule, place an undue burden on a child's immune system.</p>	<p>radio (Matrix)</p> <table border="1"> <tr><td>0</td><td>Strongly disagree</td></tr> <tr><td>1</td><td>Disagree</td></tr> <tr><td>2</td><td>Neutral</td></tr> <tr><td>3</td><td>Agree</td></tr> <tr><td>4</td><td>Strongly agree</td></tr> </table>	0	Strongly disagree	1	Disagree	2	Neutral	3	Agree	4	Strongly agree																										
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66	<p>influence</p>	<p>Parents and caregivers should have influence over what vaccines are given to their children, even if their opinion and beliefs are counter to scientific evidence currently available regarding vaccination.</p>	<p>radio (Matrix)</p> <table border="1"> <tr><td>0</td><td>Strongly disagree</td></tr> <tr><td>1</td><td>Disagree</td></tr> <tr><td>2</td><td>Neutral</td></tr> <tr><td>3</td><td>Agree</td></tr> <tr><td>4</td><td>Strongly agree</td></tr> </table>	0	Strongly disagree	1	Disagree	2	Neutral	3	Agree	4	Strongly agree																										
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67	spread	Spreading out recommended vaccines over several visits versus following the Advisory Committee on Immunization Practices (ACIP) and the Center for Disease Control and Prevention (CDC) recommended vaccine schedule is an acceptable approach to reducing parental stress about vaccinating.	radio (Matrix) <table border="1"> <tr><td>0</td><td>Strongly disagree</td></tr> <tr><td>1</td><td>Disagree</td></tr> <tr><td>2</td><td>Neutral</td></tr> <tr><td>3</td><td>Agree</td></tr> <tr><td>4</td><td>Strongly agree</td></tr> </table>	0	Strongly disagree	1	Disagree	2	Neutral	3	Agree	4	Strongly agree
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68	requirements	State and local vaccination requirements for school and daycare entry are important tools for reducing vaccine preventable diseases in the community.	radio (Matrix) <table border="1"> <tr><td>0</td><td>Strongly disagree</td></tr> <tr><td>1</td><td>Disagree</td></tr> <tr><td>2</td><td>Neutral</td></tr> <tr><td>3</td><td>Agree</td></tr> <tr><td>4</td><td>Strongly agree</td></tr> </table>	0	Strongly disagree	1	Disagree	2	Neutral	3	Agree	4	Strongly agree
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69	exemptions	Parents and caregivers should have the right to request non-medical exemptions (philosophical, moral, and/or religious exemptions) from state and local vaccination requirements for school entry.	radio (Matrix) <table border="1"> <tr><td>0</td><td>Strongly disagree</td></tr> <tr><td>1</td><td>Disagree</td></tr> <tr><td>2</td><td>Neutral</td></tr> <tr><td>3</td><td>Agree</td></tr> <tr><td>4</td><td>Strongly agree</td></tr> </table>	0	Strongly disagree	1	Disagree	2	Neutral	3	Agree	4	Strongly agree
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70	responsible	As a healthcare worker, I believe that I am responsible for advocating the benefit of vaccines and educating patients on the diseases they prevent.	radio (Matrix) <table border="1"> <tr><td>0</td><td>Strongly disagree</td></tr> <tr><td>1</td><td>Disagree</td></tr> <tr><td>2</td><td>Neutral</td></tr> <tr><td>3</td><td>Agree</td></tr> <tr><td>4</td><td>Strongly agree</td></tr> </table>	0	Strongly disagree	1	Disagree	2	Neutral	3	Agree	4	Strongly agree
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71	strongrec	As a healthcare worker, I believe that my strong recommendation for a vaccination will impact a patient's decision on whether or not to vaccinate.	radio (Matrix) <table border="1"> <tr><td>0</td><td>Strongly disagree</td></tr> <tr><td>1</td><td>Disagree</td></tr> <tr><td>2</td><td>Neutral</td></tr> <tr><td>3</td><td>Agree</td></tr> <tr><td>4</td><td>Strongly agree</td></tr> </table>	0	Strongly disagree	1	Disagree	2	Neutral	3	Agree	4	Strongly agree
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72	authorization	I believe that the COVID-19 vaccine, with the emergency use approval for children, is safe for all to use.	radio (Matrix) <table border="1"> <tr><td>0</td><td>Strongly disagree</td></tr> <tr><td>1</td><td>Disagree</td></tr> <tr><td>2</td><td>Neutral</td></tr> <tr><td>3</td><td>Agree</td></tr> <tr><td>4</td><td>Strongly agree</td></tr> </table>	0	Strongly disagree	1	Disagree	2	Neutral	3	Agree	4	Strongly agree
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73	beliefs	I believe and trust the words of my fellow health care workers regarding the safety of the COVID-19 vaccine.	radio (Matrix) <table border="1"> <tr><td>0</td><td>Strongly disagree</td></tr> <tr><td>1</td><td>Disagree</td></tr> <tr><td>2</td><td>Neutral</td></tr> <tr><td>3</td><td>Agree</td></tr> <tr><td>4</td><td>Strongly agree</td></tr> </table>	0	Strongly disagree	1	Disagree	2	Neutral	3	Agree	4	Strongly agree
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74	important	Section Header: <i>Section 2: Please rate the following statements based on the level of importance to you.</i> Getting my COVID-19 vaccine is important to me.	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not important at all</td></tr> <tr><td>2</td><td>Slightly important</td></tr> <tr><td>3</td><td>Moderately important</td></tr> <tr><td>4</td><td>Very important</td></tr> <tr><td>5</td><td>Extremely important</td></tr> </table>	1	Not important at all	2	Slightly important	3	Moderately important	4	Very important	5	Extremely important
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75	encouragehcw	It is important to actively engage and encourage all healthcare workers to be immunized with the COVID-19 vaccine.	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not important at all</td></tr> <tr><td>2</td><td>Slightly important</td></tr> <tr><td>3</td><td>Moderately important</td></tr> <tr><td>4</td><td>Very important</td></tr> <tr><td>5</td><td>Extremely important</td></tr> </table>	1	Not important at all	2	Slightly important	3	Moderately important	4	Very important	5	Extremely important		
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76	encouragepat	It is important to actively engage and encourage all patients to be immunized with the COVID-19 vaccine.	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not important at all</td></tr> <tr><td>2</td><td>Slightly important</td></tr> <tr><td>3</td><td>Moderately important</td></tr> <tr><td>4</td><td>Very important</td></tr> <tr><td>5</td><td>Extremely important</td></tr> </table>	1	Not important at all	2	Slightly important	3	Moderately important	4	Very important	5	Extremely important		
1	Not important at all														
2	Slightly important														
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4	Very important														
5	Extremely important														
77	discussbenefit	Section Header: <i>Section 3: Rate the following statements based on your level of confidence.</i> Discussing the benefits of vaccines.	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not confident at all</td></tr> <tr><td>2</td><td>Somewhat confident</td></tr> <tr><td>3</td><td>Moderately confident</td></tr> <tr><td>4</td><td>Very confident</td></tr> <tr><td>5</td><td>Extremely confident</td></tr> <tr><td>6</td><td>Not applicable</td></tr> </table>	1	Not confident at all	2	Somewhat confident	3	Moderately confident	4	Very confident	5	Extremely confident	6	Not applicable
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6	Not applicable														
78	discussrisk	Discussing the risks of vaccines.	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not confident at all</td></tr> <tr><td>2</td><td>Somewhat confident</td></tr> <tr><td>3</td><td>Moderately confident</td></tr> <tr><td>4</td><td>Very confident</td></tr> <tr><td>5</td><td>Extremely confident</td></tr> <tr><td>6</td><td>Not applicable</td></tr> </table>	1	Not confident at all	2	Somewhat confident	3	Moderately confident	4	Very confident	5	Extremely confident	6	Not applicable
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79	discussdialogue	Establishing ongoing dialogue about vaccines.	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not confident at all</td></tr> <tr><td>2</td><td>Somewhat confident</td></tr> <tr><td>3</td><td>Moderately confident</td></tr> <tr><td>4</td><td>Very confident</td></tr> <tr><td>5</td><td>Extremely confident</td></tr> <tr><td>6</td><td>Not applicable</td></tr> </table>	1	Not confident at all	2	Somewhat confident	3	Moderately confident	4	Very confident	5	Extremely confident	6	Not applicable
1	Not confident at all														
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80	discussafety	Discussing concerns about the safety of COVID-19 vaccines.	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not confident at all</td></tr> <tr><td>2</td><td>Somewhat confident</td></tr> <tr><td>3</td><td>Moderately confident</td></tr> <tr><td>4</td><td>Very confident</td></tr> <tr><td>5</td><td>Extremely confident</td></tr> <tr><td>6</td><td>Not applicable</td></tr> </table>	1	Not confident at all	2	Somewhat confident	3	Moderately confident	4	Very confident	5	Extremely confident	6	Not applicable
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81	discusseffectiveness	Discussing concerns about the effectiveness of COVID-19 vaccines.	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not confident at all</td></tr> <tr><td>2</td><td>Somewhat confident</td></tr> <tr><td>3</td><td>Moderately confident</td></tr> <tr><td>4</td><td>Very confident</td></tr> <tr><td>5</td><td>Extremely confident</td></tr> <tr><td>6</td><td>Not applicable</td></tr> </table>	1	Not confident at all	2	Somewhat confident	3	Moderately confident	4	Very confident	5	Extremely confident	6	Not applicable
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3	Moderately confident														
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5	Extremely confident														
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82	discussinfertility	Discussing concerns about COVID-19 vaccines and infertility.	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not confident at all</td></tr> <tr><td>2</td><td>Somewhat confident</td></tr> <tr><td>3</td><td>Moderately confident</td></tr> <tr><td>4</td><td>Very confident</td></tr> <tr><td>5</td><td>Extremely confident</td></tr> <tr><td>6</td><td>Not applicable</td></tr> </table>	1	Not confident at all	2	Somewhat confident	3	Moderately confident	4	Very confident	5	Extremely confident	6	Not applicable
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4	Very confident														
5	Extremely confident														
6	Not applicable														
83	discussmyocarditis	Discussing concerns about COVID-19 vaccines and myocarditis (heart inflammation).	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not confident at all</td></tr> <tr><td>2</td><td>Somewhat confident</td></tr> <tr><td>3</td><td>Moderately confident</td></tr> <tr><td>4</td><td>Very confident</td></tr> <tr><td>5</td><td>Extremely confident</td></tr> <tr><td>6</td><td>Not applicable</td></tr> </table>	1	Not confident at all	2	Somewhat confident	3	Moderately confident	4	Very confident	5	Extremely confident	6	Not applicable
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5	Extremely confident														
6	Not applicable														
84	discussimmune	Discussing concerns about COVID-19 vaccines and whether or not they overwhelm the immune system.	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not confident at all</td></tr> <tr><td>2</td><td>Somewhat confident</td></tr> <tr><td>3</td><td>Moderately confident</td></tr> <tr><td>4</td><td>Very confident</td></tr> <tr><td>5</td><td>Extremely confident</td></tr> <tr><td>6</td><td>Not applicable</td></tr> </table>	1	Not confident at all	2	Somewhat confident	3	Moderately confident	4	Very confident	5	Extremely confident	6	Not applicable
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6	Not applicable														
85	discussminority	Discussing the COVID-19 vaccine with someone from a underrepresented racial or ethnic group.	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not confident at all</td></tr> <tr><td>2</td><td>Somewhat confident</td></tr> <tr><td>3</td><td>Moderately confident</td></tr> <tr><td>4</td><td>Very confident</td></tr> <tr><td>5</td><td>Extremely confident</td></tr> <tr><td>6</td><td>Not applicable</td></tr> </table>	1	Not confident at all	2	Somewhat confident	3	Moderately confident	4	Very confident	5	Extremely confident	6	Not applicable
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86	discuss_immunization	Discussing the COVID-19 vaccine with a parent about their decision to vaccinate their child.	radio (Matrix) <table border="1"> <tr><td>1</td><td>Not confident at all</td></tr> <tr><td>2</td><td>Somewhat confident</td></tr> <tr><td>3</td><td>Moderately confident</td></tr> <tr><td>4</td><td>Very confident</td></tr> <tr><td>5</td><td>Extremely confident</td></tr> <tr><td>6</td><td>Not applicable</td></tr> </table>	1	Not confident at all	2	Somewhat confident	3	Moderately confident	4	Very confident	5	Extremely confident	6	Not applicable
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4	Very confident														
5	Extremely confident														
6	Not applicable														
87	myocarditis	Section Header: Section 4: Please respond to the following statements with either TRUE or FALSE or NOT SURE. Current scientific evidence supports associations between the COVID-19 vaccines and myocarditis (heart inflammation).	radio <table border="1"> <tr><td>1</td><td>True</td></tr> <tr><td>2</td><td>False</td></tr> <tr><td>3</td><td>Not sure</td></tr> </table> Custom alignment: RH	1	True	2	False	3	Not sure						
1	True														
2	False														
3	Not sure														
88	infertility	Current scientific evidence supports associations between COVID-19 vaccines and infertility.	radio <table border="1"> <tr><td>1</td><td>True</td></tr> <tr><td>2</td><td>False</td></tr> <tr><td>3</td><td>Not sure</td></tr> </table> Custom alignment: RH	1	True	2	False	3	Not sure						
1	True														
2	False														
3	Not sure														

89	miscarriage	Current scientific evidence supports associations between COVID-19 vaccines and miscarriage.	radio <table border="1"> <tr><td>1</td><td>True</td></tr> <tr><td>2</td><td>False</td></tr> <tr><td>3</td><td>Not sure</td></tr> </table> <p>Custom alignment: RH</p>	1	True	2	False	3	Not sure																
1	True																								
2	False																								
3	Not sure																								
90	dna	COVID-19 mRNA-based vaccines can alter your DNA.	radio <table border="1"> <tr><td>1</td><td>True</td></tr> <tr><td>2</td><td>False</td></tr> <tr><td>3</td><td>Not sure</td></tr> </table> <p>Custom alignment: RH</p>	1	True	2	False	3	Not sure																
1	True																								
2	False																								
3	Not sure																								
91	minority	Underrepresented racial and ethnic groups are more likely to be hesitant about COVID-19 vaccines.	radio <table border="1"> <tr><td>1</td><td>True</td></tr> <tr><td>2</td><td>False</td></tr> <tr><td>3</td><td>Not sure</td></tr> </table> <p>Custom alignment: RH</p>	1	True	2	False	3	Not sure																
1	True																								
2	False																								
3	Not sure																								
92	immuneresponse	Vaccines interact with the immune system and often produce an immune response similar to that produced by the natural infection, but they do not subject the recipient to the disease and its potential complications.	radio <table border="1"> <tr><td>1</td><td>True</td></tr> <tr><td>2</td><td>False</td></tr> <tr><td>3</td><td>Not sure</td></tr> </table> <p>Custom alignment: RH</p>	1	True	2	False	3	Not sure																
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93	pacv_1delay Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'	Section Header: <i>Section 5: For parents of children 17 years old or younger, please answer the questions below.</i> Have you ever delayed having your child get a shot (not including flu/COVID-19 vaccine) for reasons other than illness or allergy?	radio <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>No</td></tr> <tr><td>3</td><td>Don't know</td></tr> </table> <p>Custom alignment: RH Question number: 1</p>	1	Yes	2	No	3	Don't know																
1	Yes																								
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94	pacv_2decide Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'	Have you ever decided not to have your child get a shot (not including flu/COVID-19 vaccine) for reasons other than illness or allergy?	radio <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>No</td></tr> <tr><td>3</td><td>Don't know</td></tr> </table> <p>Custom alignment: RH Question number: 2</p>	1	Yes	2	No	3	Don't know																
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2	No																								
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95	sure Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'	Section Header: <i>Please answer on a scale of 0 to 10, where 0 is Not at all sure and 10 is Completely sure.</i> How sure are you that following the recommended shot schedule is a good idea for your child?	radio (Matrix) <table border="1"> <tr><td>1</td><td>0</td></tr> <tr><td>2</td><td>1</td></tr> <tr><td>3</td><td>2</td></tr> <tr><td>4</td><td>3</td></tr> <tr><td>5</td><td>4</td></tr> <tr><td>6</td><td>5</td></tr> <tr><td>7</td><td>6</td></tr> <tr><td>8</td><td>7</td></tr> <tr><td>9</td><td>8</td></tr> <tr><td>10</td><td>9</td></tr> <tr><td>11</td><td>10</td></tr> </table>	1	0	2	1	3	2	4	3	5	4	6	5	7	6	8	7	9	8	10	9	11	10
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96	<p>moreshots</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>Section Header: <i>For the following statements, choose: strongly agree, agree, not sure, disagree, strongly disagree.</i></p> <p>Children get more shots than are good for them.</p>	<p>radio (Matrix)</p> <table border="1"> <tr><td>1</td><td>Strongly agree</td></tr> <tr><td>2</td><td>Agree</td></tr> <tr><td>3</td><td>Not sure</td></tr> <tr><td>4</td><td>Disagree</td></tr> <tr><td>5</td><td>Strongly disagree</td></tr> </table>	1	Strongly agree	2	Agree	3	Not sure	4	Disagree	5	Strongly disagree
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3	Not sure												
4	Disagree												
5	Strongly disagree												
97	<p>shotsprevent</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>I believe many of the illnesses that shots prevent are severe.</p>	<p>radio (Matrix)</p> <table border="1"> <tr><td>1</td><td>Strongly agree</td></tr> <tr><td>2</td><td>Agree</td></tr> <tr><td>3</td><td>Not sure</td></tr> <tr><td>4</td><td>Disagree</td></tr> <tr><td>5</td><td>Strongly disagree</td></tr> </table>	1	Strongly agree	2	Agree	3	Not sure	4	Disagree	5	Strongly disagree
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98	<p>naturalinfection</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>It is better for my child to develop immunity by getting sick than by getting a shot.</p>	<p>radio (Matrix)</p> <table border="1"> <tr><td>1</td><td>Strongly agree</td></tr> <tr><td>2</td><td>Agree</td></tr> <tr><td>3</td><td>Not sure</td></tr> <tr><td>4</td><td>Disagree</td></tr> <tr><td>5</td><td>Strongly disagree</td></tr> </table>	1	Strongly agree	2	Agree	3	Not sure	4	Disagree	5	Strongly disagree
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99	<p>fewervaccines</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>It is better for children to get fewer vaccines at the same time.</p>	<p>radio (Matrix)</p> <table border="1"> <tr><td>1</td><td>Strongly agree</td></tr> <tr><td>2</td><td>Agree</td></tr> <tr><td>3</td><td>Not sure</td></tr> <tr><td>4</td><td>Disagree</td></tr> <tr><td>5</td><td>Strongly disagree</td></tr> </table>	1	Strongly agree	2	Agree	3	Not sure	4	Disagree	5	Strongly disagree
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100	<p>sideeffect</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>Section Header: <i>For the following statements, choose: not at all concerned, not too concerned, not sure, somewhat concerned, very concerned</i></p> <p>How concerned are you that your child may have a serious side effect from a shot?</p>	<p>radio (Matrix)</p> <table border="1"> <tr><td>1</td><td>not at all concerned</td></tr> <tr><td>2</td><td>not too concerned</td></tr> <tr><td>3</td><td>not sure</td></tr> <tr><td>4</td><td>somewhat concerned</td></tr> <tr><td>5</td><td>very concerned</td></tr> </table>	1	not at all concerned	2	not too concerned	3	not sure	4	somewhat concerned	5	very concerned
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101	<p>notsafe</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>How concerned are you that one of the childhood shots may not be safe?</p>	<p>radio (Matrix)</p> <table border="1"> <tr><td>1</td><td>not at all concerned</td></tr> <tr><td>2</td><td>not too concerned</td></tr> <tr><td>3</td><td>not sure</td></tr> <tr><td>4</td><td>somewhat concerned</td></tr> <tr><td>5</td><td>very concerned</td></tr> </table>	1	not at all concerned	2	not too concerned	3	not sure	4	somewhat concerned	5	very concerned
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102	<p>notprevent</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>How concerned are you that the shot may not prevent the disease?</p>	<p>radio (Matrix)</p> <table border="1"> <tr><td>1</td><td>not at all concerned</td></tr> <tr><td>2</td><td>not too concerned</td></tr> <tr><td>3</td><td>not sure</td></tr> <tr><td>4</td><td>somewhat concerned</td></tr> <tr><td>5</td><td>very concerned</td></tr> </table>	1	not at all concerned	2	not too concerned	3	not sure	4	somewhat concerned	5	very concerned
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103	<p>pacv_6</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>If you had another infant today, would you want him/her to get all the recommended shots?</p>	<p>radio</p> <table border="1" data-bbox="1040 111 1190 233"> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>No</td></tr> <tr><td>3</td><td>Don't know</td></tr> </table> <p>Custom alignment: RH</p>	1	Yes	2	No	3	Don't know																
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104	<p>pacv_7</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>Overall, how hesitant about childhood shots would you consider yourself to be?</p>	<p>radio</p> <table border="1" data-bbox="1040 380 1260 581"> <tr><td>1</td><td>not at all hesitant</td></tr> <tr><td>2</td><td>not too hesitant</td></tr> <tr><td>3</td><td>not sure</td></tr> <tr><td>4</td><td>somewhat hesitant</td></tr> <tr><td>5</td><td>very hesitant</td></tr> </table> <p>Custom alignment: RH</p>	1	not at all hesitant	2	not too hesitant	3	not sure	4	somewhat hesitant	5	very hesitant												
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105	<p>pacv_modified</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>Overall, how hesitant about COVID-19 vaccine for children would you consider yourself to be?</p>	<p>radio</p> <table border="1" data-bbox="1040 674 1260 875"> <tr><td>1</td><td>not at all hesitant</td></tr> <tr><td>2</td><td>not too hesitant</td></tr> <tr><td>3</td><td>not sure</td></tr> <tr><td>4</td><td>somewhat hesitant</td></tr> <tr><td>5</td><td>very hesitant</td></tr> </table> <p>Custom alignment: RH</p>	1	not at all hesitant	2	not too hesitant	3	not sure	4	somewhat hesitant	5	very hesitant												
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4	somewhat hesitant																								
5	very hesitant																								
106	<p>trust</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>Section Header: <i>For the following statements, choose: strongly agree, agree, not sure, disagree, strongly disagree.</i></p> <p>I trust the information I receive about shots.</p>	<p>radio (Matrix)</p> <table border="1" data-bbox="1040 968 1247 1169"> <tr><td>1</td><td>strongly agree</td></tr> <tr><td>2</td><td>agree</td></tr> <tr><td>3</td><td>not sure</td></tr> <tr><td>4</td><td>disagree</td></tr> <tr><td>5</td><td>strongly disagree.</td></tr> </table>	1	strongly agree	2	agree	3	not sure	4	disagree	5	strongly disagree.												
1	strongly agree																								
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5	strongly disagree.																								
107	<p>opendoctor</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>I am able to openly discuss my concerns about shots with my child's doctor.</p>	<p>radio (Matrix)</p> <table border="1" data-bbox="1040 1236 1247 1438"> <tr><td>1</td><td>strongly agree</td></tr> <tr><td>2</td><td>agree</td></tr> <tr><td>3</td><td>not sure</td></tr> <tr><td>4</td><td>disagree</td></tr> <tr><td>5</td><td>strongly disagree.</td></tr> </table>	1	strongly agree	2	agree	3	not sure	4	disagree	5	strongly disagree.												
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108	<p>pacv_9</p> <p>Show the field ONLY if: [parentguardian] = '1' or [child_1] = '2' or [child_1] = '3' or [child_2] = '2' or [child_2] = '3' or [child_3] = '2' or [child_3] = '3' or [child_4] = '2' or [child_4] = '3' or [child_5] = '2' or [child_5] = '3'</p>	<p>Section Header: <i>Please answer on a scale of 0 to 10, where 0 is Do not trust at all and 10 is Completely trust.</i></p> <p>All things considered, how much do you trust your child's doctor?</p>	<p>radio (Matrix)</p> <table border="1" data-bbox="1040 1505 1122 1942"> <tr><td>1</td><td>0</td></tr> <tr><td>2</td><td>1</td></tr> <tr><td>3</td><td>2</td></tr> <tr><td>4</td><td>3</td></tr> <tr><td>5</td><td>4</td></tr> <tr><td>6</td><td>5</td></tr> <tr><td>7</td><td>6</td></tr> <tr><td>8</td><td>7</td></tr> <tr><td>9</td><td>8</td></tr> <tr><td>10</td><td>9</td></tr> <tr><td>11</td><td>10</td></tr> </table>	1	0	2	1	3	2	4	3	5	4	6	5	7	6	8	7	9	8	10	9	11	10
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109	overall	Section Header: <i>Final section: Please answer the questions below.</i> Overall, how hesitant about COVID-19 vaccines would you consider yourself to be?	radio <table border="1"> <tr><td>1</td><td>not at all hesitant</td></tr> <tr><td>2</td><td>not too hesitant</td></tr> <tr><td>3</td><td>not sure</td></tr> <tr><td>4</td><td>somewhat hesitant</td></tr> <tr><td>5</td><td>very hesitant</td></tr> </table> Custom alignment: RH	1	not at all hesitant	2	not too hesitant	3	not sure	4	somewhat hesitant	5	very hesitant
1	not at all hesitant												
2	not too hesitant												
3	not sure												
4	somewhat hesitant												
5	very hesitant												
110	overall_slider	Using the sliding scale, please rate overall, how hesitant about COVID-19 vaccines would you consider yourself to be?	slider (number) Slider labels: not at all hesitant, not sure, very hesitant Custom alignment: RH										
111	interestedbooster Show the field ONLY if: [boosterreceived] = '0' or [boostersched] = '0' or [boosterevent] = '0'	How likely are you to get the COVID-19 booster shot?	radio <table border="1"> <tr><td>0</td><td>very likely</td></tr> <tr><td>1</td><td>likely</td></tr> <tr><td>2</td><td>not sure</td></tr> <tr><td>3</td><td>unlikely</td></tr> <tr><td>4</td><td>very unlikely</td></tr> </table>	0	very likely	1	likely	2	not sure	3	unlikely	4	very unlikely
0	very likely												
1	likely												
2	not sure												
3	unlikely												
4	very unlikely												
112	f_groups	Are you interested in participating in focus groups related to topics covered in this survey?	yesno <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No						
1	Yes												
0	No												
113	email Show the field ONLY if: [f_groups] = '1'	Please enter your Northwell email address so we can contact you (your responses to this survey will still be anonymous):	text (email)										
114	raffle	Are you interested in participating in a raffle?	yesno <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table>	1	Yes	0	No						
1	Yes												
0	No												
115	email_raffle Show the field ONLY if: [raffle] = '1'	Please enter your Northwell email address so we can contact you (your responses to this survey will still be anonymous):	text (email)										
116	educate_to_vaccinate_complete	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete				
0	Incomplete												
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