

4 Months Child Health Consult Questionnaires

As a parent, please answer all questions (within the thick lined box,) and bring to the 4 months health consultation.

Baby Name	Birthday(Year/month/date)	/	/
Name of Parents/Guardians			Male/Female
Address	Phone Number		

1. Did you receive enough advice/care from midwife and/or health nurse during the first month after giving birth?	1. Yes 2. No 3. Neither
2. Did the baby's mother smoke during pregnancy?	1. No 2. Yes(/day)
3. Does the baby's mother smoke currently?	1. No 2. Yes(/day)
4. Does the baby's father smoke currently?	1. No 2. Yes(/day)
5. Was the baby's mother drinking alcohol during pregnancy?	1. No 2. Yes
6. Was the baby's mother working at during pregnancy?	1. Yes 2. No
If you answered "Yes" in the previous questions: Did you feel that your workplace to be followed by a work during pregnancy?	1. Yes 2. No
7. Did you know about maternity symbol mark during the pregnancy?	1. Yes 2. No
If you answered "Yes" in the previous questions : Did you use it during pregnancy?	1. Yes 2. No
8. Do you know phone consultation of Pediatric emergency?	1. Yes 2. No
9. Does your baby have a regular doctor?	1. Yes 2. No 3. Not sure
10. How was nutrition method after first month?	1. Breast milk 2. Formula 3. Both
11. Is the baby's father involved in childcare/upbringings?	1. Often 2. Sometimes 3. Hardly any 4. Hard to say
12. Does the baby's mother have plenty of relaxed time to spend with her baby?	1. Yes 2. No 3. Hard to say
13. Do you feel any difficulties with childcare /upbringings?	1. Always 2. Sometimes 3. Not at all
If you answer 1 or 2 in the previous questions : Do you know any solutions, for example you know where to get help?	1. Yes 2. No
14. Are you aware of the fact that most children between the age of 6 Months and 1 year always try to follow you everywhere?	1. Yes 2. No
15. Please circle any of the events below which apply to your family within the last few months. 1. Gave too much discipline 2. Smacked baby when angry 3. Left baby home alone 4. Did not give any meal for a prolonged time 5. Yelled at baby emotionally 6. Covered baby's mouth 7. Shook baby hard 8. None of the above	
16. Are you aware of the fact that if you keep shaking the baby so strong that his/her head wobbles when crying, it may cause brain damage?	1. Yes 2. No
17. Would you like to raise your baby in this area in the future?	1. Yes 2. Probably 3. Unlikely 4. No