

Dataset Coding Guide
Project - Raine Study (Pregnancy Cohort Study)
Dataset - Raine Year 5



Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
ID		Study identification number			Text			
Y5_DOB		Date of birth			Date			
Y5_HOMY	Q1	Age of house/flat in years	1		Numeric		999	Not stated
Y5_BEDS	Q2	Number of bedrooms	2		Numeric		9	Not stated
Y5_BATH	Q3	Number of bathrooms	3		Numeric		9	Not stated
Y5_LOOS	Q4	Number of toilets	4		Numeric		9	Not stated
Y5_AIR1	Q5	Home airconditioned	5		Text		9	Not stated
							N	No
							Y	Yes
Y5_AIR2	Q6	How many rooms airconditioned	6		Text		0	One room
							1	Two rooms
							2	Three rooms
							3	More than three rooms
							8	NA
							9	Not stated
Y5_AIR3	Q7	Is it evaporative aircon	7		Text		0	Don't know
							8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_HEA	Q8	Home heating - yes/no	8		Text		9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_HEA1	Q8	Home heating	8		Text		0	Not heated at all
							1	Electric bar radiator, fan or column heater
							2	Kerosene heater
							3	Gas heater
							4	Wood fire/slow combustion heater
							5	Reverse cycle airconditioning
							6	Fully ducted heating
							9	Not stated
							A	1 and 2
							B	1 and 3
							C	1 and 4
							D	1 and 5
							E	2 and 3
							F	2 and 4
							G	2 and 5
							H	3 and 4
							I	3 and 5
J	3 and 6							
K	4 and 5							
L	4 and 6							
M	5 and 6							
P	More than 2 methods of heating (incl gas or kerosene)							
Q	More than 2 methods of heating (excl gas or kerosene)							
Y5_HEA2A	Q8	Home heating - gas heater	8		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_HEA3A	Q8	Home heating - kerosene heater	8		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_HEA4	Q8	Home heating - electric bar	8		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_HEA5	Q8	Home heating - wood fire heater	8		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_HEA6	Q8	Home heating - reverse cycle airconditioning	8		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_HEA7	Q8	Home heating - fully ducted heating	8		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_HEA2	Q9	Gas heater - flued/unflued	9		Text		8	Not applicable - no gas heater
							9	Not stated
							N	No
							Y	Yes
Y5_HEA3	Q10	Kero heater-flued/unflued	10		Text		8	Not applicable - no kerosene heater

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_GAS		Q11 Gas cooking	11		Text		1	Yes
							2	No
							9	Not stated
Y5_HOME		Q12 Have you moved house	12		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_HOMN		Q12 Number of times moved house	12		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_AAG1		Q13 Age of adult 1	13		Numeric		99	Not stated
Y5_AAG2		Q13 Age of adult 2	13		Numeric		99	Not stated
Y5_AAG3		Q13 Age of adult 3	13		Numeric		99	Not stated
Y5_AAG4		Q13 Age of adult 4	13		Numeric		9	Not stated
Y5_AAG5		Q13 Age of adult 5	13		Numeric		99	Not stated
Y5_AAG6		Q13 Age of adult 6	13		Numeric		99	Not stated
Y5_ARL1		Q13 Relship of ad1 to study child	13		Text		9	Not stated
							A	Mother
							B	Father
							C	Sister/half sister
							D	Brother/half brother
							E	Grandmother/great
							F	Grandfather
							G	Step mother/adoptive
							H	Step father/adoptive

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							I	Step sister/foster
							J	Step brother/foster
							K	Foster mother
							L	Foster father
							M	Uncle/Aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child
							R	Adopted sister
							S	Adopted brother
							T	Niece/nephew
Y5_ARL2		Q13 Relship of ad2 to study child	13		Text		9	Not stated
							A	Mother
							B	Father
							C	Sister/half sister
							D	Brother/half brother
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster
							J	Stepbrother/foster
							K	Foster mother
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						Q	5yr old study child
						R	Adopted sister
						S	Adopted brother
						T	Niece/nephew
Y5_ARL3	Q13 Relship of ad3 to study child	13		Text		9	Not stated
						A	Mother
						B	Father
						C	Sister/half sister
						D	Brother/half brother
						E	grandmother/great
						F	Grandfather
						G	Stepmother/adoptive
						H	Stepfather/adoptive
						I	Stepsister/foster
						J	Stepbrother/foster
						K	Foster mother
						L	Foster father
						M	Uncle/aunt
						O	Cousin
						P	No relationship
						Q	5yr old study child
						R	Adopted sister
						S	Adopted brother
						T	Niece/nephew
Y5_ARL4	Q13 Relship of ad4 to study child	13		Text		9	Not stated
						A	Mother
						B	Father
						C	Sister/half sister

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							D	Brother/half brother
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster
							J	Stepbrother/foster
							K	Foster mother
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child
							R	Adopted sister
							S	Adopted brother
							T	Niece/nephew
Y5_ARL5		Q13 Relship of ad5 to study child	13		Text		9	Not stated
							A	Mother
							B	Father
							C	Sister/half sister
							D	Brother/half brother
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster
							J	Stepbrother/foster

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							K	Foster mother
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child
							R	Adopted sister
							S	Adopted brother
							T	Niece/nephew
Y5_ARL6		Q13 Relship of ad6 to study child	13		Text		9	Not stated
							A	Mother
							B	Father
							C	Sister/half sister
							D	Brother/half brother
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster
							J	Stepbrother/foster
							K	Foster mother
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child
							R	Adopted sister
							S	Adopted brother

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							T	Niece/nephew
Y5_ASX1		Q13 Sex of adult 1	13		Text		9	Not stated
							F	Female
							M	Male
Y5_ASX2		Q13 Sex of adult 2	13		Text		9	Not stated
							F	Female
							M	Male
Y5_ASX3		Q13 Sex of adult 3	13		Text		9	Not stated
							F	Female
							M	Male
Y5_ASX4		Q13 Sex of adult 4	13		Text		9	Not stated
							F	Female
							M	Male
Y5_ASX5		Q13 Sex of adult 5	13		Text		9	Not stated
							F	Female
							M	Male
Y5_ASX6		Q13 Sex of adult 6	13		Text		9	Not stated
							F	Female
							M	Male
Y5_CAG1		Q14 Age of child 1	14		Numeric		99	Not stated
Y5_CAG2		Q14 Age of child 2	14		Numeric		99	Not stated
Y5_CAG3		Q14 Age of child 3	14		Numeric		99	Not stated
Y5_CAG4		Q14 Age of child 4	14		Numeric		99	Not stated
Y5_CAG5		Q14 Age of child 5	14		Numeric		99	Not stated
Y5_CAG6		Q14 Age of child 6	14		Numeric		99	Not stated
Y5_CRL1		Q14 Relship of ch1 to study child	14		Text		9	Not stated
							A	Mother

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							B	Father
							C	Sister/half sister
							D	Brother/half brother
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster
							J	Stepbrother/foster
							K	Foster mother
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child
							R	Adopted sister
							S	Adopted brother
							T	Niece/nephew
Y5_CRL2		Q14 Relship of ch2 to study child	14		Text		9	Not stated
							A	Mother
							B	Father
							C	Sister/half sister
							D	Brother/half sister
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							J	Stepbrother/foster
							K	Foster mother
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child
							R	Adopted sister
							S	Adopted brother
							T	Niece/nephew
Y5_CRL3		Q14 Relship of ch3 to study child	14		Text		9	Not stated
							A	Mother
							B	Father
							C	Sister/half sister
							D	Brother/half brother
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster
							J	Stepbrother/foster
							K	Foster mother
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_CRL4	Q14 Relship of ch4 to study child	14		Text		R	Adopted sister
						S	Adopted brother
						T	Niece/nephew
						9	Not stated
						A	Mother
						B	Father
						C	Sister/half sister
						D	Brother/half brother
						E	Grandmother/great
						F	Grandfather
						G	Stepmother/adoptive
						H	Stepfather/adoptive
						I	Stepsister/foster
						J	Stepbrother/foster
						K	Foster mother
						L	Foster father
						M	Uncle/aunt
O	Cousin						
P	No relationship						
Q	5yr old study child						
R	Adopted sister						
S	Adopted brother						
T	Niece/nephew						
Y5_CRL5	Q14 Relship of ch5 to study child	14		Text		9	Not stated
						A	Mother
						B	Father
						C	Sister/half sister
						D	Brother/half brother

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster
							J	Stepbrother/foster
							K	Foster mother
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child
							R	Adopted sister
							S	Adopted brother
							T	Niece/nephew
Y5_CRL6		Q14 Relship of ch6 to study child	14		Text		9	Not stated
							A	Mother
							B	Father
							C	Sister/half sister
							D	Brother/half brother
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster
							J	Stepbrother/foster
							K	Foster mother

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child
							R	Adopted sister
							S	Adopted brother
							T	Niece/nephew
Y5_CSX1		Q14 Sex of child 1	14		Text		9	Not stated
							F	Female
							M	Male
Y5_CSX2		Q14 Sex of child 2	14		Text		9	Not stated
							F	Female
							M	Male
Y5_CSX3		Q14 Sex of child 3	14		Text		9	Not stated
							F	Female
							M	Male
Y5_CSX4		Q14 Sex of child 4	14		Text		9	Not stated
							F	Female
							M	Male
Y5_CSX5		Q14 Sex of child 5	14		Text		9	Not stated
							F	Female
							M	Male
Y5_CSX6		Q14 Sex of child 6	14		Text		9	Not stated
							F	Female
							M	Male
Y5_SIB		Q15 Any siblings living elsewhere	15		Text		9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_OAG1	Q15	Age of other sibling 1	15	1	Numeric		88	NA
							99	Not stated
Y5_OAG2	Q15	Age of other sibling 2	15	2	Numeric		88	NA
							99	Not stated
Y5_OAG3	Q15	Age of other sibling 3	15	3	Numeric		88	NA
							99	Not stated
Y5_OAG4	Q15	Age of other sibling 4	15	4	Numeric		88	NA
							99	Not stated
Y5_OAG5	Q15	Age of other sibling 5	15	5	Numeric		88	NA
							99	Not stated
Y5_OAG6	Q15	Age of other sibling 6	15	6	Numeric		88	NA
							99	Not stated
Y5_ORL1	Q15	Relship of sib1 study child	15	7	Text		8	NA
							9	Not stated
							A	Mother
							B	Father
							C	Sister/half sister
							D	Brother/half brother
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster
							J	Stepbrother/foster
							K	Foster mother
							L	Foster father

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							M	Uncle/aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child
							R	Adopted sister
							S	Adopted brother
							T	Niece/nephew
Y5_ORL2		Q15 Relship of sib2 study child	15	8	Text		8	NA
							9	Not stated
							A	Mother
							B	Father
							C	Sister/half sister
							D	Brother/half brother
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster
							J	Stepbrother/foster
							K	Foster mother
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child
							R	Adopted sister
							S	Adopted brother
							T	Niece/nephew

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ORL3		Q15 Relship of sib3 study child	15	9	Text		8	NA
							9	Not stated
							A	Mother
							B	Father
							C	Sister/half sister
							D	Brother/half brother
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster
							J	Stepbrother/foster
							K	Foster mother
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship
Q	5yr old study child							
R	Adopted sister							
S	Adopted brother							
T	Niece/nephew							
Y5_ORL4		Q15 Relship of sib4 study child	15	10	Text		8	NA
							9	Not stated
							A	Mother
							B	Father
							C	Sister/half sister
D	Brother/half brother							

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						E	Grandmother/great
						F	Grandfather
						G	Stepmother/adoptive
						H	Stepfather/adoptive
						I	Stepsister/foster
						J	Stepbrother/foster
						K	Foster mother
						L	Foster father
						M	Uncle/aunt
						O	Cousin
						P	No relationship
						Q	5yr old study child
						R	Adopted sister
						S	Adopted brother
						T	Niece/nephew
Y5_ORL5	Q15 Relship of sib5 study child	15	11	Text		8	NA
						9	Not stated
						A	Mother
						B	Father
						C	Sister/half sister
						D	Brother/half brother
						E	Grandmother/great
						F	Grandfather
						G	Stepmother/adoptive
						H	Stepfather/adoptive
						I	Stepsister/foster
						J	Stepbrother/foster
						K	Foster mother

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child
							R	Adopted sister
							S	Adopted brother
							T	Niece/nephew
Y5_ORL6		Q15 Relship of sib6 study child	15	12	Text		8	NA
							9	Not stated
							A	Mother
							B	Father
							C	Sister/half sister
							D	Brother/half brother
							E	Grandmother/great
							F	Grandfather
							G	Stepmother/adoptive
							H	Stepfather/adoptive
							I	Stepsister/foster
							J	Stepbrother/foster
							K	Foster mother
							L	Foster father
							M	Uncle/aunt
							O	Cousin
							P	No relationship
							Q	5yr old study child
							R	Adopted sister

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							S	Adopted brother
							T	Niece/nephew
Y5_OSX1		Q15 Sex of other sibling 1	15	13	Text		8	NA
							9	Not stated
							F	Female
							M	Male
Y5_OSX2		Q15 Sex of other sibling 2	15	14	Text		8	NA
							9	Not stated
							F	Female
							M	Male
Y5_OSX3		Q15 Sex of other sibling 3	15	15	Text		8	NA
							9	Not stated
							F	Female
							M	Male
Y5_OSX4		Q15 Sex of other sibling 4	15	16	Text		8	NA
							9	Not stated
							F	Female
							M	Male
Y5_OSX5		Q15 Sex of other sibling 5	15	17	Text		8	NA
							9	Not stated
							F	Female
							M	Male
Y5_OSX6		Q15 Sex of other sibling 6	15	18	Text		8	NA
							9	Not stated
							F	Female
							M	Male
Y5_FHOM		Q16 Father living with family	16		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_FSOC		Q17 Social contact with father	17		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMON		Q18 Financial support from father	18		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PTNR		Q19 Living with another partner	19		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_BNF		Q20 Receive benefit	20		Text		9	Not stated
							N	No
							Y	Yes
Y5_BNF1		Q21 Type of benefit	21		Text		1	Supporting parents benefit
							2	Unemployment benefit
							3	Disability allowance
							4	Workers compensation
							5	Sickness benefit
							6	Austudy
							7	Other
							8	NA
							9	Not stated
Y5_YWK		Q22 Are you employed	22		Text		9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_YHRS	Q23	Hours work	23		Text		88	NA
							99	Not stated
Y5_YJOB	Q23	Occupation	23		Text			Occupation Codes
							88	NA
							90	Housework (wife)
							91	Housework (husband)
							93	Student
							94	Retired/old age pensioner
							95	Unemployed
							96	Invalid pensioner/sickness benefit
							97	Deceased
							98	In prison
							99	Not stated
Y5_PWRK	Q24	Is your partner employed	24		Text		8	Not applicable - no partner
							9	Not stated
							N	No
							Y	Yes
Y5_PHRS	Q25	Partner Hours work	25		Text		88	NA
							99	Not stated
Y5_PJOB	Q25	Partner Occupation	25		Text			Occupation Codes
							88	NA
							90	Housework (wife)
							91	Housework (husband)
							93	Student
							94	Retired/old age pensioner

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						95	Unemployed
						96	Invalid pensioner/sickness benefit/disability allowance
						97	Deceased
						98	In prison
						99	Not stated
Y5_MON1	Q26 Family income	26		Text		0	\$1 - \$8,000
						1	\$8,001 - \$16,000
						2	\$16,001 - \$25,000
						3	\$25,000 - \$40,000
						4	\$40,001 or more
						5	Unknown
						8	NA
						9	Not stated
Y5_MON2	Q26 No. adults income supports	26		Numeric		9	Not stated
Y5_MON3	Q26 No. children income supports	26		Numeric		9	Not stated
Y5_SM2	Q27 Do you smoke cigs	27		Text		9	Not stated
						N	No
						Y	Yes
Y5_SM4	Q28 No. in a day you smoke	28		Text		0	Less than 1 daily
						1	1-5 daily
						2	6-10 daily
						3	11-15 daily
						4	16-20 daily
						5	More than 20 daily
						8	NA
						9	Not stated
Y5_SM12	Q29 You smoke in house	29		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_SM13		Q30 You smoke in car	30		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SM16		Q31 Anyone else smoke cigs	31		Text		9	Not stated
							N	No
							Y	Yes
Y5_SM17		Q32 No. in a day others smoke	32		Text		0	Less than 1 daily
							1	1-5 daily
							2	6-10 daily
							3	11-15 daily
							4	16-20 daily
							5	More than 20 daily
							8	NA
							9	Not stated
Y5_SM18		Q33 Others smoke in house	33		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SM19		Q34 Others smoke in car	34		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SM20		Q35 Anyone smoke other substances	35		Text		0	No
							1	Yes - once a week or less

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						2	Yes - more than once a week but not every day
						3	Yes - every day
						9	Not stated
Y5_FS1	Q36 Father chronic cough	36		Text		3	In the last 5 years
						4	Prior to the last 5 years
						5	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_FS10	Q36 Father whooping cough	36		Text		3	In the last 5 years
						4	Prior to the last 5 years
						5	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_FS11	Q36 Father other respiratory prob	36		Text		3	In the last 5 years
						4	Prior to the last 5 years
						5	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_FS2	Q36 Father seasonal hayfever	36		Text		3	In the last 5 years
						4	Prior to the last 5 years
						5	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_FS3	Q36 Father hayfever all year	36		Text		3	In the last 5 years

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						4	Prior to the last 5 years
						5	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_FS4	Q36 Father bronchitis	36		Text		3	In the last 5 years
						4	Prior to the last 5 years
						5	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_FS5	Q36 Father asthma	36		Text		3	In the last 5 years
						4	Prior to the last 5 years
						5	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_FS6	Q36 Father pneumonia	36		Text		3	In the last 5 years
						4	Prior to the last 5 years
						5	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_FS7	Q36 Father emphysema	36		Text		3	In the last 5 years
						4	Prior to the last 5 years
						5	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_FS8	Q36 Father wheeze with exertion	36		Text		3	In the last 5 years

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						4	Prior to the last 5 years
						5	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_FS9	Q36 Father wheeze temp change	36		Text		3	In the last 5 years
						4	Prior to the last 5 years
						5	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_MS1	Q36 Mother chronic cough	36		Text		0	In the last 5 years
						1	Prior to the last 5 years
						2	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_MS10	Q36 Mother whooping cough	36		Text		0	In the last 5 years
						1	Prior to the last 5 years
						2	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No
Y5_MS11	Q36 Mother other respiratory prob	36		Text		0	In the last 5 years
						1	Prior to the last 5 years
						2	In the last 5 years and prior to the last 5 years
						9	Not stated
						N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_MS2		Q36 Mother seasonal hayfever	36		Text		0	In the last 5 years
							1	Prior to the last 5 years
							2	In the last 5 years and prior to the last 5 years
							9	Not stated
							N	No
Y5_MS3		Q36 Mother hayfever all year	36		Text		0	In the last 5 years
							1	Prior to the last 5 years
							2	In the last 5 years and prior to the last 5 years
							9	Not stated
							N	No
Y5_MS4		Q36 Mother bronchitis	36		Text		0	In the last 5 years
							1	Prior to the last 5 years
							2	In the last 5 years and prior to the last 5 years
							9	Not stated
							N	No
Y5_MS5		Q36 Mother asthma	36		Text		0	In the last 5 years
							1	Prior to the last 5 years
							2	In the last 5 years and prior to the last 5 years
							9	Not stated
							N	No
Y5_MS6		Q36 Mother pneumonia	36		Text		0	In the last 5 years
							1	Prior to the last 5 years
							2	In the last 5 years and prior to the last 5 years
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_MS7		Q36 Mother emphysema	36		Text		0	In the last 5 years
							1	Prior to the last 5 years
							2	In the last 5 years and prior to the last 5 years
							9	Not stated
							N	No
Y5_MS8		Q36 Mother wheeze with exertion	36		Text		0	In the last 5 years
							1	Prior to the last 5 years
							2	In the last 5 years and prior to the last 5 years
							9	Not stated
							N	No
Y5_MS9		Q36 Mother wheeze temp change	36		Text		0	In the last 5 years
							1	Prior to the last 5 years
							2	In the last 5 years and prior to the last 5 years
							9	Not stated
							N	No
Y5_SL1A		Q37 Sibling id-see Q13 etc	37		Text		8	NA
							9	Not stated
Y5_SL1B		Q37 Respiratory problem - croup	37		Text		8	NA
							9	Not stated
							N	No
Y5_SL1C		Q37 Respiratory problem - chronic cough	37		Text		Y	Yes
							8	NA
							9	Not stated
Y5_SL1D		Q37 Respiratory problem - cystic fibrosis	37		Text		N	No
							Y	Yes
							8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_SL1E		Q37 Respiratory problem - hay fever	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL1F		Q37 Respiratory problem - bronchitis	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL1G		Q37 Respiratory problem - bronchiolitis	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL1H		Q37 Respiratory problem - asthma	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL1I		Q37 Respiratory problem - pneumonia	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL1J		Q37 Respiratory problem - wheeze	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_SL1K		Q37 Respiratory problem - whooping cough	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL1L		Q37 Respiratory problem - neonatal resp cond	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL1M		Q37 Respiratory problem - chronic URTIs	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL1N		Q37 Respiratory problem - other resp(sleep apnoea)	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL2A		Q37 Sibling id-see Q13 etc	37		Text		8	NA
							9	Not stated
Y5_SL2B		Q37 Respiratory problem - croup	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL2C		Q37 Respiratory problem - chronic cough	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL2D		Q37 Respiratory problem - cystic fibrosis	37		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_SL2E		Q37 Respiratory problem - hay fever	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL2F		Q37 Respiratory problem - bronchitis	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL2G		Q37 Respiratory problem - bronchiolitis	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL2H		Q37 Respiratory problem - asthma	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL2I		Q37 Respiratory problem - pneumonia	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL2J		Q37 Respiratory problem - wheeze	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL2K		Q37 Respiratory problem - whooping cough	37		Text		8	NA

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						9	Not stated
						N	No
						Y	Yes
Y5_SL2L	Q37 Respiratory problem - neonatal resp cond	37		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_SL2M	Q37 Respiratory problem - chronic URTIs	37		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_SL2N	Q37 Respiratory problem - other resp	37		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_SL3A	Q37 Sibling id-see Q13 etc	37		Text		8	NA
						9	Not stated
Y5_SL3B	Q37 Respiratory problem - croup	37		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_SL3C	Q37 Respiratory problem - chronic cough	37		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_SL3D	Q37 Respiratory problem - cystic fibrosis	37		Text		8	NA
						9	Not stated
						N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_SL3E		Q37 Respiratory problem - hay fever	37		Text		8	NA
							9	Not stated
							N	No
Y5_SL3F		Q37 Respiratory problem - bronchitis	37		Text		8	NA
							9	Not stated
							N	No
Y5_SL3G		Q37 Respiratory problem - bronchiolitis	37		Text		8	NA
							9	Not stated
							N	No
Y5_SL3H		Q37 Respiratory problem - asthma	37		Text		8	NA
							9	Not stated
							N	No
Y5_SL3I		Q37 Respiratory problem - pneumonia	37		Text		8	NA
							9	Not stated
							N	No
Y5_SL3J		Q37 Respiratory problem - wheeze	37		Text		8	NA
							9	Not stated
							N	No
Y5_SL3K		Q37 Respiratory problem - whooping cough	37		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_SL3L		Q37 Respiratory problem - neonatal resp cond	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL3M		Q37 Respiratory problem - chronic URTIs	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL3N		Q37 Respiratory problem - other resp	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL4A		Q37 Sibling id-see Q13 etc	37		Text		8	NA
							9	Not stated
Y5_SL4B		Q37 Respiratory problem - croup	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL4C		Q37 Respiratory problem - chronic cough	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL4D		Q37 Respiratory problem - cystic fibrosis	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_SL4E		Q37 Respiratory problem - hay fever	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL4F		Q37 Respiratory problem - bronchitis	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL4G		Q37 Respiratory problem - bronchiolitis	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL4H		Q37 Respiratory problem - asthma	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL4I		Q37 Respiratory problem - pneumonia	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL4J		Q37 Respiratory problem - wheeze	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL4K		Q37 Respiratory problem - whooping cough	37		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_SL4L		Q37 Respiratory problem - neonatal resp cond	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL4M		Q37 Respiratory problem - chronic URTIs	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL4N		Q37 Respiratory problem - other resp	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL5A		Q37 Sibling id-see Q13 etc	37		Text		8	NA
							9	Not stated
Y5_SL5B		Q37 Respiratory problem - croup	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL5C		Q37 Respiratory problem - chronic cough	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL5D		Q37 Respiratory problem - cystic fibrosis	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL5E		Q37 Respiratory problem - hay fever	37		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_SL5F		Q37 Respiratory problem - bronchitis	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL5G		Q37 Respiratory problem - bronchiolities	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL5H		Q37 Respiratory problem - asthma	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL5I		Q37 Respiratory problem - pneumonia	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL5J		Q37 Respiratory problem - wheeze	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL5K		Q37 Respiratory problem - whooping cough	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_SL5L		Q37 Respiratory problem - neonatal resp cond	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL5M		Q37 Respiratory problem - chronic URTIs	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL5N		Q37 Respiratory problem - other resp	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL6A		Q37 Sibling id-see Q13 etc	37		Text		8	NA
							9	Not stated
Y5_SL6B		Q37 Respiratory problem - croup	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL6C		Q37 Respiratory problem - chronic cough	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL6D		Q37 Respiratory problem - cystic fibrosis	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL6E		Q37 Respiratory problem - hay fever	37		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_SL6F		Q37 Respiratory problem - bronchitis	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL6G		Q37 Respiratory problem - bronchiolitis	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL6H		Q37 Respiratory problem - asthma	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL6I		Q37 Respiratory problem - pneumonia	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL6J		Q37 Respiratory problem - wheeze	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL6K		Q37 Respiratory problem - whooping cough	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL6L		Q37 Respiratory problem - neonatal resp prob	37		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_SL6M		Q37 Respiratory problem - chronic URTIs	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL6N		Q37 Respiratory problem - other resp	37		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SS1		Q37 Sibling ever suffer resp problem	37		Text		9	Not stated
							N	No
							Y	Yes
Y5_SS10		Q37 Siblings respiratory problem	37		Text		8	NA
							9	Not stated
							A	Croup
							B	Chronic cough - nocturnal/temp change
							C	Cystic fibrosis
							D	Hay fever
							E	Bronchitis
							F	Bronchiolitis
							G	Asthma
							H	Pneumonia
							I	Wheeze
							J	Whooping cough
							K	Neonatal respiratory conditions - hvaline membrane disease

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						L	Chronic URTIs
						M	Other respiratory - sleep apnoea/sinusitis
						Y	Yes, but not specified
Y5_SS11	Q37 Siblings respiratory problem	37		Text		8	NA
						9	Not stated
						A	Croup
						B	Chronic cough - nocturnal/temp change
						C	Cystic fibrosis
						D	Hayfever
						E	Bronchitis
						F	Bronchiolitis
						G	Asthma
						H	Pneumonia
						I	Wheeze
						J	Whooping cough
						K	Neonatal respiratory conditions - hyaline membrane disease
						L	Chronic URTIs
						M	Other respiratory - sleep apnoea/sinusitis
						Y	Yes, but not specified
Y5_SS12	Q37 Siblings respiratory problem	37		Text		8	NA
						9	Not stated
						A	Croup
						B	Chronic cough - nocturnal/temp change
						C	Cystic fibrosis

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							D	Hayfever
							E	Bronchitis
							F	Bronchiolitis
							G	Asthma
							H	Pneumonia
							I	Wheeze
							J	Whooping cough
							K	Neonatal respiratory conditions - hyaline membrane disease
							L	Chronic URTIs
							M	Other respiratory - sleep apnoea/sinusitis
							Y	Yes, but not specified
Y5_SS13	Q37	Siblings respiratory problem	37		Text		8	NA
							9	Not stated
							A	Croup
							B	Chronic cough - nocturnal/temp change
							C	Cystic fibrosis
							D	Hayfever
							E	Bronchitis
							F	Bronchiolitis
							G	Asthma
							H	Pneumonia
							I	Wheeze
							J	Whooping cough
							K	Neonatal respiratory conditions - hyaline membrane disease
							L	Chronic URTIs

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						M	Other respiratory - sleep apnoea/sinusitis
						Y	Yes, but not specified
Y5_SS2	Q37 Sibling id-see Q13 etc	37		Text		8	NA
						9	Not stated
Y5_SS3	Q37 Sibling id-see Q13 etc	37		Text		8	NA
						9	Not stated
Y5_SS4	Q37 Sibling id-see Q13 etc	37		Text		8	NA
						9	Not stated
Y5_SS5	Q37 Sibling id-see Q13 etc	37		Text		8	NA
						9	Not stated
Y5_SS6	Q37 Sibling id-see Q13 etc	37		Text		8	NA
						9	Not stated
Y5_SS7	Q37 Sibling id-see Q13 etc	37		Text		8	NA
						9	Not stated
Y5_SS8	Q37 Siblings respiratory problem	37		Text		8	NA
						9	Not stated
						A	Croup
						B	Chronic cough - nocturnal/temp change
						C	Cystic fibrosis
						D	Hayfever
						E	Bronchitis
						F	Bronchiolitis
						G	Asthma
						H	Pneumonia
						I	Wheeze
						J	Whooping cough

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							K	Neonatal respiratory conditions - hyaline membrane disease
							L	Chronic URTIs
							M	Other respiratory - sleep apnoea/sinusitis
							Y	Yes, but not specified
Y5_SS9		Q37 Siblings respiratory problem	37		Text		8	NA
							9	Not stated
							A	Croup
							B	Chronic cough - nocturnal/temp change
							C	Cystic fibrosis
							D	Hay fever
							E	Bronchitis
							F	Bronchiolitis
							G	Asthma
							H	Pneumonia
							I	Wheeze
							J	Whooping cough
							K	Neonatal respiratory conditions - hyaline membrane disease
							L	Chronic URTIs
							M	Other respiratory - sleep apnoea/sinusitis
							Y	Yes, but not specified
Y5_FS12		Q38 Father cough with cold	38		Text		9	Not stated
							N	No
Y5_FS13		Q38 Father cough apart from cold	38		Text		9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_FS14		Q38 Father cough with exercise	38		Text		9	Not stated
							N	No
							Y	Yes
Y5_MS12		Q38 Mother cough with cold	38		Text		9	Not stated
							N	No
							Y	Yes
Y5_MS13		Q38 Mother cough apart from cold	38		Text		9	Not stated
							N	No
							Y	Yes
Y5_MS14		Q38 Mother cough with exercise	38		Text		9	Not stated
							N	No
							Y	Yes
Y5_FS15		Q39 Father cough 4 days/week	39		Text		9	Not stated
							N	No
							Y	Yes
Y5_MS15		Q39 Mother cough 4 days/week	39		Text		9	Not stated
							N	No
							Y	Yes
Y5_FS16		Q40 Father phlegm with colds	40		Text		9	Not stated
							N	No
							Y	Yes
Y5_FS17		Q40 Father phlegm apart colds	40		Text		9	Not stated
							N	No
							Y	Yes
Y5_MS16		Q40 Mother phlegm with colds	40		Text		9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_MS17		Q40 Mother phlegm apart colds	40		Text		9	Not stated
							N	No
							Y	Yes
Y5_FS18		Q41 Father cough > week per year	41		Text		9	Not stated
							N	No
							Y	Yes
Y5_MS18		Q41 Mother cough > week per year	41		Text		9	Not stated
							N	No
							Y	Yes
Y5_MFS1		Q42 Mother or father ever wheezed	42		Text		9	Not stated
							N	No
							Y	Yes
Y5_FS19		Q42 Father wheeze with colds	42	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FS20		Q42 Father wheeze apart colds	42	2	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FS21		Q42 Father wheeze day & night	42	3	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FS22		Q42 Father wheeze with exercise	42	4	Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_FS23		Q42 Father wheeze with < temp	42	5	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MS19		Q42 Mother wheeze with colds	42	6	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MS20		Q42 Mother wheeze apart colds	42	7	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MS21		Q42 Mother wheeze day & night	42	8	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MS22		Q42 Mother wheeze with exercise	42	9	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MS23		Q42 Mother wheeze with < temp	42	10	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FS24		Q43 Father years wheezed	43		Numeric		88	Not applicable
							99	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_MS24		Q43 Mother years wheezed	43		Numeric		88	Not applicable
							99	Not stated
Y5_FS25		Q44 Father wheeze short breath	44		Text		8	NA - never wheezed
							9	Not stated
							N	No
							Y	Yes
Y5_MS25		Q44 Mother wheeze short breath	44		Text		8	NA - never wheezed
							9	Not stated
							N	No
							Y	Yes
Y5_FS26		Q45 Father 3 x wheeze since 1	45		Text		8	NA - never wheezed
							9	Not stated
							N	No
							Y	Yes
Y5_MS26		Q45 Mother 3 x wheeze since 1	45		Text		8	NA - never wheezed
							9	Not stated
							N	No
							Y	Yes
Y5_FS27		Q46 Father wheeze in last year	46		Text		8	NA - never wheezed
							9	Not stated
							N	No
							Y	Yes
Y5_MS27		Q46 Mother wheeze in last year	46		Text		8	NA - never wheezed
							9	Not stated
							N	No
							Y	Yes
Y5_FS28		Q47 Dr said father asthma-age	47		Text		99	Not stated
Y5_MS28		Q47 Dr said mother asthma-age	47		Text		99	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_FS29		Q48 Father asthma now-age stopped	48		Text		99	Not stated
Y5_MS29		Q48 Mother asthma now-age stopped	48		Text		99	Not stated
Y5_FMD1		Q49 Father take med for resp	49		Text		9	Not stated
							N	No
							Y	Yes
Y5_FMD2		Q49 Fathers medicine code	49		Text		8	NA
							9	Not stated
							A	Ventolin or respolin
							B	Atrovent
							C	Nuelin or theo-dur
							D	Bricanyl
							E	Berotec
							F	Intal or intal forte
							G	Becotide or aldecin
							H	Becloforte
							I	Brondecon
							J	Beconase - all steroid nasal sprays
							K	Pulmicort
							L	Serevent
							M	Prednisolone
							P	Other asthma med
							Q	Prophylactic antibiotics
							R	Antihistamine
							S	Other respiratory med (not asthma)
							T	Flixotide
							U	Tilade

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_FMD2A		Q49 Fathers resp meds - ventoline/respolin	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2B		Q49 Fathers resp meds - atrovent	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2C		Q49 Fathers resp meds - nuelin/theo-dur	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2D		Q49 Fathers resp meds - bricanyl	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2E		Q49 Fathers resp meds - berotec	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2F		Q49 Fathers resp meds - intal/intal forte	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2G		Q49 Fathers resp meds - becotide/aldecin	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_FMD2H		Q49 Fathers resp meds - becloforte	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2I		Q49 Fathers resp meds - brondecon	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2J		Q49 Fathers resp meds - beconase (all steroid nasal sprays)	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2K		Q49 Fathers resp meds - pulmicort	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2L		Q49 Fathers resp meds - serevent	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2M		Q49 Fathers resp meds - prednisolone	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2P		Q49 Fathers resp meds - other asthma med	49		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_FMD2Q		Q49 Fathers resp meds - prophylactic antibiotics	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2R		Q49 Fathers resp meds - antihistamine	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2S		Q49 Fathers resp meds - other resp med (not asthma)	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2T		Q49 Fathers resp meds - flixotide	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FMD2U		Q49 Fathers resp meds - tilade	49		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2		Q49 Mothers respiratory medicine code	49		Text		9	Not stated
							A	Ventolin or respolin
							B	Atrovent
							C	Nuelin or theo-dur
							D	Bricanyl
							E	Berotec
							F	Intal or intal forte

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							G	Becotide or aldecin
							H	Becloforte
							I	Brindecon
							J	Beconase - all steroid nasal sprays
							K	Pulmicort
							L	Serevent
							M	Prednisolone
							P	Other asthma med
							Q	Prophylactic antibiotics
							R	Antihistamine
							S	Other respiratory med (not asthma)
							T	Flixotide
							U	Tilade
Y5_MMD1		Q49 Mother take med for any respiratory problem	49	1	Text		9	Not stated
							N	No
							Y	Yes
Y5_MMD2A		Q49 Mothers resp meds - ventolin/respolin	49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2B		Q49 Mothers resp meds - atrovent	49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2C		Q49 Mothers resp meds - nuelin/theo-dur	49	1	Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_MMD2D	Q49 Mothers resp meds - bricanyl		49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2E	Q49 Mothers resp meds - berotec		49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2F	Q49 Mothers resp meds - intal/intal forte		49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2G	Q49 Mothers resp meds - becotide/aldecin		49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2H	Q49 Mothers resp meds - becloforte		49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2I	Q49 Mothers resp meds - brondecon		49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2J	Q49 Mothers resp meds - beconase (all steroid nasal sprays)		49	1	Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_MMD2K	Q49	Mothers resp meds - pulmicort	49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2L	Q49	Mothers resp meds - serevent	49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2M	Q49	Mothers resp meds - prednisolone	49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2P	Q49	Mothers resp meds - other asthma med	49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2Q	Q49	Mothers resp meds - prophylactic antibiotics	49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2R	Q49	Mothers resp meds - antihistamines	49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2S	Q49	Mothers resp meds - other resp med (not asthma)	49	1	Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2T		Q49 Mothers resp meds - flixotide	49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MMD2U		Q49 Mothers resp meds - tilade	49	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL10A		Q50 Father allergic to - moulds	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL10B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL10C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL10D		Q50 Who told you about allergy	50		Text		1	Paediatrician
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietrician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							8	NA
							9	Not stated
Y5_DL10E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL10F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL10G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL10H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL10I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL10J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL10K		Q50 What reaction - oedema	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL10L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL10M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL10N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL10O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL10P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL11A		Q50 Father allergic to - cat fur	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL11B		Q50 Age first allergy occurred	50		Numeric			number corresponds

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							88	NA
							99	Not stated
Y5_DL11C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL11D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL11E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL11F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL11G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL11H		Q50 What reaction - gastrointestinal	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL11I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL11J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL11K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL11L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL11M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL11N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL11O		Q50 What reaction - musculoskeletal	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL11P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL12A		Q50 Father allergic to - other animal fur incl feathers	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL12B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL12C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL12D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	CHild health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL12E		Q50 What reaction - upper respiratory	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL12F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL12G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL12H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL12I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL12J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL12K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL12L		Q50 What reaction - anaphylaxis	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL12M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL12N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL12O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL12P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL13A		Q50 Father allergic to - multiple drug allergies	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL13B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL13C		Q50 Age allergy stopped	50		Numeric			number corresponds

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							88	NA
							99	Not stated
Y5_DL13D	Q50	Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL13E	Q50	What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL13F	Q50	What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL13G	Q50	What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL13H	Q50	What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL13I	Q50	What reaction - neurological	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL13J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL13K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL13L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL13M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL13N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL13O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_DL13P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL14A		Q50 Father allergic to - multiple allergies of all systems	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL14B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL14C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL14D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nuse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL14E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL14F		Q50 What reaction - lower respiratory	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL14G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL14H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL14I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL14J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL14K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL14L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_DL14M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL14N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL14O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL14P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL15A		Q50 Father allergic to - soaps/detergents	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL15B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL15C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL15D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
Y5_DL15E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL15F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL15G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL15H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL15I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL15J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_DL15K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL15L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL15M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL15N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL15O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL15P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL16A		Q50 Father allergic to - insect bites	50		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_DL16B	Q50	Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL16C	Q50	Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL16D	Q50	Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL16E	Q50	What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL16F	Q50	What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL16G	Q50	What reaction - skin	50		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_DL16H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL16I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL16J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL16K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL16L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL16M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL16N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_DL16O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL16P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL17A		Q50 Father allergic to - other contact allergies	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL17B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL17C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL17D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							8	NA
							9	Not stated
Y5_DL17E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL17F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL17G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL17H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL17I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL17J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL17K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_DL17L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL17M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL17N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL17O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL17P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL18A		Q50 Father allergic to - antibiotics	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL18B		Q50 Age first allergy occurred	50		Numeric			number corresponds

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							88	NA
							99	Not stated
Y5_DL18C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL18D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL18E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL18F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL18G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL18H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_DL18I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL18J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL18K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL18L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL18M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL18N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL18O		Q50 What reaction - musculoskeletal	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL18P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL19A		Q50 Father allergic to - other drugs	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL19B		Q50 Age first allergy occurred	50		Numeric			number ocrresponds
							88	NA
							99	Not stated
Y5_DL19C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL19D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL19E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_DL19F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL19G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL19H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL19I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL19J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL19K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL19L		Q50 What reaction - anaphylaxis	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL19M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL19N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL19O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL19P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL1A		Q50 Father allergic to - cows milk	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL1B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL1C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							99	Not stated
Y5_DL1D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend, or self diagnosed
							8	NA
							9	Not stated
Y5_DL1E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL1F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL1G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL1H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL1I		Q50 What reaction - neurological	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL1J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL1K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL1L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL1M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL1N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL1O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL1P		Q50 What reaction - cardiac	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL20A		Q50 Father allergic to - hay fever	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL20B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL20C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL20D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL20E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL20F		Q50 What reaction - lower respiratory	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL20G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL20H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL20I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL20J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL20K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL20L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL20M		Q50 What reaction - lymphatic related	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL20N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL20O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL20P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL21A		Q50 Father allergic to - other resp allergies	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL21B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL21C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL21D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
Y5_DL21E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL21F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL21G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL21H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL21I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL21J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_DL21K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL21L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL21M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL21N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL21O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL21P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL2A		Q50 Father allergic to - soy products	50		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_DL2B		Q50 Age first allergy occurred	50		Text		88	NA
							99	Not stated
Y5_DL2C		Q50 Age allergy stopped	50		Text		88	NA
							99	Not stated
Y5_DL2D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
Y5_DL2E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL2F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL2G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL2H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_DL2I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
Y5_DL2J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
Y5_DL2K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
Y5_DL2L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
Y5_DL2M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
Y5_DL2N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
Y5_DL2O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_DL2P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL3A		Q50 Father allergic to - eggs	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL3B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL3C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL3D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL3E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_DL3F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
Y5_DL3G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
Y5_DL3H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
Y5_DL3I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
Y5_DL3J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
Y5_DL3K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
Y5_DL3L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_DL3M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL3N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL3O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL3P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL4A		Q50 Father allergic to - peanuts/peanut prods	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL4B		Q50 Age first allergy occurred	50		Text		88	NA
							99	Not stated
Y5_DL4C		Q50 Age allergy stopped	50		Text		88	NA
							99	Not stated
Y5_DL4D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL4E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL4F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL4G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL4H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL4I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_DL4J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL4K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL4L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL4M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL4N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL4O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL4P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_DL5A		Q50 Father allergic to - other foods incl wine/bev	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL5B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL5C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL5D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL5E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL5F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_DL5G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL5H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL5I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL5J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL5K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL5L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL5M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_DL5N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL5O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL5P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL6A		Q50 Father allergic to - food additives/pres/col	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL6B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL6C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL6D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL6E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL6F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL6G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL6H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL6I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL6J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_DL6K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL6L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL6M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL6N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL6O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL6P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL7A		Q50 Father allergic to - multiple food allergies	50		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_DL7B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL7C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL7D		Q50 Who told you about allergy	50		Text		1	Paediatrician
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
Y5_DL7E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL7F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL7G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL7H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_DL7I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL7J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL7K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL7L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL7M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL7N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL7O		Q50 What reaction - musculoskeletal	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL7P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL8A		Q50 Father allergic to - house dust mite	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL8B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL8C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL8D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL8E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_DL8F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL8G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL8H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL8I		Q50 What reaction - neurological	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL8J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL8K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL8L		Q50 What reaction - anaphylaxis	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL8M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL8N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL8O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL8P		Q50 What reaction - cardiac	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL9A		Q50 Father allergic to - pollens	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL9B		Q50 Age first allergy occurred	50		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_DL9C		Q50 Age allergy stopped	50		Numeric			number corresponds
							88	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							99	Not stated
Y5_DL9D		Q50 Who told you about allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_DL9E		Q50 What reaction - upper respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL9F		Q50 What reaction - lower respiratory	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL9G		Q50 What reaction - skin	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL9H		Q50 What reaction - gastrointestinal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL9I		Q50 What reaction - neurological	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_DL9J		Q50 What reaction - excessive mucus prod	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL9K		Q50 What reaction - oedema	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL9L		Q50 What reaction - anaphylaxis	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL9M		Q50 What reaction - lymphatic related	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL9N		Q50 What reaction - behavioural	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL9O		Q50 What reaction - musculoskeletal	50		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_DL9P		Q50 What reaction - cardiac	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_FS30		Q50 Father allergies yes/no	50		Text		9	Not stated
							N	No
							Y	Yes
Y5_FS31		Q50 Father allergic to what	50		Text		8	NA
							9	Not stated
							A	Cows milk
							B	Soy products
							C	Eggs
							D	Peanuts/peanut products
							E	Other foods - including wine/beverage
							F	Food additives/preservatives/colouring
							G	Multiple food allergies
							H	House dust mite
							I	Pollens (grass or tree or flowers)
							J	Moulds
							K	Cat fur
							L	Animal fur (other than cat) - including feathers, wool
							M	Multiple respiratory allergies (any combination of H, I, J, K and L)
							P	Multiple drug allergies
							Q	Multiple allergies of all systems
							R	Soaps/detergents

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							S	Insect bites
							T	Other contact allergies
							U	Antibiotics
							V	Other drugs
							W	Hayfever - allergen not specified
							X	Other respiratory allergies - perfume/smoke/brick dust
Y5_FS32	Q50	Father allergic to what	50		Text		8	NA
							9	Not stated
							A	Cows milk
							B	Soy products
							C	Eggs
							D	Peanuts/peanut products
							E	Other foods - including wine/beverage
							F	Food additives/preservatives/colouring
							G	Multiple food allergies
							H	House dust mite
							I	Pollens (grass or tree or flowers)
							J	Moulds
							K	Cat fur
							L	Animal fur (other than cat) - including feathers, wool
							M	Multiple respiratory allergies (any combination of H, I, J, K and L)
							P	Multiple drug allergies
							Q	Multiple allergies of all systems
							R	Soaps/detergents

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						S	Insect bites
						T	Other contact allergies
						U	Antibiotics
						V	Other drugs
						W	Hayfever - allergen not specified
						X	Other respiratory allergies - perfume/smoke/brick dust
Y5_FS33	Q50 Father allergic to what	50		Text		8	NA
						9	Not stated
						A	Cows milk
						B	Soy products
						C	Eggs
						D	Peanuts/peanut products
						E	Other foods - including wine/beverage
						F	Food additives/preservatives/colouring
						G	Multiple food allergies
						H	House dust mite
						I	Pollens (grass or tree or flowers)
						J	Moulds
						K	Cat fur
						L	Animal fur (other than cat) - including feathers, wool
						M	Multiple respiratory allergies (any combination of H, I, J, K and L)
						P	Multiple drug allergies
						Q	Multiple allergies of all systems
						R	Soaps/detergents

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						S	Insect bites
						T	Other contact allergies
						U	Antibiotics
						V	Other drugs
						W	Hayfever, allergen not specified
						X	Other respiratory allergies - perfume/smoke/brick dust
Y5_FS34	Q50 Father allergic to what	50		Text		8	NA
						9	Not stated
						A	Cows milk
						B	Soy products
						C	Eggs
						D	Peanuts/peanut products
						E	Other foods - including wine/beverage
						F	Food additives/preservatives/colouring
						G	Multiple food allergies
						H	House dust mite
						I	Pollens (grass or tree or flowers)
						J	Moulds
						K	Cat fur
						L	Animal fur (other than cat) - including feathers, wool
						M	Multiple respiratory allergies (any combination of H, I, J, K and L)
						P	Multiple drug allergies
						Q	Multiple allergies of all systems
						R	Soaps/detergents

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						S	Insect bites
						T	Other contact allergies
						U	Antibiotics
						V	Other drugs
						W	Hayfever - allergen not specified
						X	Other respiratory allergies - perfume/smokle/brick dust
Y5_FS35	Q50 Father age first occurred	50		Numeric		88	NA
						99	Not stated
Y5_FS36	Q50 Father age first occurred	50		Numeric		88	NA
						99	Not stated
Y5_FS37	Q50 Father age first occurred	50		Numeric		88	NA
						99	Not stated
Y5_FS38	Q50 Father age first occurred	50		Numeric		88	NA
						99	Not stated
Y5_FS39	Q50 Father age stopped	50		Numeric		88	NA
						97	Hasnt stopped
						99	Not stated
Y5_FS40	Q50 Father age stopped	50		Numeric		88	NA
						97	Hasnt stopped
						99	Not stated
Y5_FS41	Q50 Father age stopped	50		Numeric		88	NA
						97	Hasnt stopped
						99	Not stated
Y5_FS42	Q50 Father age stopped	50		Numeric		88	NA
						97	Hasnt stopped
						99	Not stated
Y5_FS43	Q50 Who told father has allergy	50		Text		1	Paediatrician/specialist

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend, or self diagnosed
							8	NA
							9	Not stated
Y5_FS44	Q50	Who told father has allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend, or self diagnosed
							8	NA
							9	Not stated
Y5_FS45	Q50	Who told father has allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend, or self diagnosed
							8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_FS46	Q50	Who told father has allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend, or self diagnosed
							8	NA
							9	Not stated
Y5_FS47	Q50	What reaction did father have	50		Text		8	NA
							9	Not stated
							A	Upper respiratory
							B	Lower respiratory
							C	Skin
							D	Gastrointestinal
							E	Neurological
							F	Excessive mucus production
							G	Oedema - generalised/throat swelling
							H	Anaphylaxis
							I	Lymphatic related
							J	Behavioural
							K	Musculoskeletal
Y5_FS48	Q50	What reaction did father have	50		Text		8	NA
							9	Not stated
							A	Upper respiratory

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							B	Lower respiratory
							C	Skin
							D	Gastrointestinal
							E	Neurological
							F	Excessive mucus production
							G	Oedema - generalised/throat swelling
							H	Anaphylaxis
							I	Lymphatic related
							J	Behavioural
							K	Musculoskeletal
							L	Cardiac
Y5_FS49		Q50 What reaction did father have	50		Text		8	NA
							9	Not stated
							A	Upper respiratory
							B	Lower respiratory
							C	Skin
							D	Gastrointestinal
							E	Neurological
							F	Excessive mucus production
							G	Oedema - generalised/throat swelling
							H	Anaphylaxis
							I	Lymphatic related
							J	Behavioural
							K	Musculoskeletal
							L	Cardiac
Y5_FS50		Q50 What reaction did father have	50		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							A	Upper respiratory
							B	Lower respiratory
							C	Skin
							D	Gastrointestinal
							E	Neurological
							F	Excessive mucus production
							G	Oedema - generalised/throat swelling
							H	Anaphylaxis
							I	Lymphatic related
							J	Behavioural
							K	Musculoskeletal
							L	Cardiac
Y5_MS31		Q50 Mother allergic to what	50		Text		8	NA
							9	Not stated
							A	Cows milk
							B	Soy products
							C	Eggs
							D	Peanuts/peanut products
							E	Other foods - including wine/beverages
							F	Food additives/preservatives/colouring
							G	Multiple food allergies
							H	House dust mite
							I	Pollens (grass or tree or flowers)
							J	Moulds
							K	Cat fur

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							L	Animal fur (other than cat) - including feathers, wool
							M	Multiple respiratory allergies (any combination of H, I, J, K and L)
							P	Multiple drug allergies
							Q	Multiple allergies of all systems
							R	Soaps/detergents
							S	Insect bites
							T	Other contact allergies
							U	Antibiotics
							V	Other drugs
							W	Hayfever - allergen not specified
							X	Other respiratory allergies - perfume/smoke/brick dust
Y5_MS32		Q50 Mother allergic to what	50		Text		8	NA
							9	Not stated
							A	Cows milk
							B	Soy products
							C	Eggs
							D	Peanuts/peanut products
							E	Other foods - including wine/beverage
							F	Food additives/preservatives/colouring
							G	Multiple food allergies
							H	House dust mite
							I	Pollens (grass or tree or flowers)
							J	Moulds
							K	Cat fur

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							L	Animal fur (other than cat) - including feathers, wool
							M	Multiple respiratory allergies (any combination of H, I, J, K and L)
							P	Multiple drug allergies
							Q	Multiple allergies of all systems
							R	Soaps/detergents
							S	Insect bites
							T	Other contact allergies
							U	Antibiotics
							V	Other drugs
							W	Hayfever - allergen not specified
							X	ther respiratory allergies - perfume/smoke/brick dust
Y5_MS33		Q50 Mother allergic to what	50		Text		8	NA
							9	Not stated
							A	Cows milk
							B	Soy products
							C	Eggs
							D	Peanuts/peanut products
							E	Other foods - including wine/beverage
							F	Food additives/preservatives/colouring
							G	Multiple food allergies
							H	House dust mite
							I	Pollens (grass or tree or flowers)
							J	Moulds
							K	Cat fur

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							L	Animal fur (other than cat) - including feathers, wool
							M	Multiple respiratory allergies (any combination of H, I, J, K and L)
							P	Multiple drug allergies
							Q	Multiple allergies of all systems
							R	Soaps/detergents
							S	Insect bites
							T	Other contact allergies
							U	Antibiotics
							V	Other drugs
							W	Hayfever - allergen not specified
							X	Other respiratory allergies - perfume/smoke/brick dust
Y5_MS34		Q50 Mother allergic to what	50		Text		8	NA
							9	Not stated
							A	Cows milk
							B	Soy products
							C	Eggs
							D	Peanuts/peanut products
							E	Other foods - including wine/beverage
							F	Food additives/preservatives/colouring
							G	Multiple food allergies
							H	House dust mite
							I	Pollens (grass or tree or flowers)
							J	Moulds
							K	Cat fur

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						L	Animal fur (other than cat) - including feathers, wool
						M	Multiple respiratory allergies (any combination of H, I, J, K and L)
						P	Multiple drug allergies
						Q	Multiple allergies of all systems
						R	Soaps/detergents
						S	Insect bites
						T	Other contact allergies
						U	Antibiotics
						V	Other drugs
						W	Hayfever - allergen not specified
						X	Other respiratory allergies - perfume/smoke/brick dust
Y5_MS35	Q50 Mother age first occurred	50		Numeric		88	NA
						99	Not stated
Y5_MS36	Q50 Mother age first occurred	50		Numeric		88	NA
						99	Not stated
Y5_MS37	Q50 Mother age first occurred	50		Numeric		88	NA
						99	Not stated
Y5_MS38	Q50 Mother age first occurred	50		Numeric		88	NA
						99	Not stated
Y5_MS39	Q50 Mother age stopped	50		Numeric		88	NA
						97	Hasnt stopped
						99	Not stated
Y5_MS40	Q50 Mother age stopped	50		Numeric		88	NA
						97	Hasnt stopped
						99	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_MS41		Q50 Mother age stopped	50		Numeric		88	NA
							97	Hasnt stopped
							99	Not stated
Y5_MS42		Q50 Mother age stopped	50		Numeric		88	NA
							97	Hasnt stopped
							99	Not stated
Y5_MS43		Q50 Who told mother has allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend, or self diagnosed
							8	NA
							9	Not stated
Y5_MS44		Q50 Who told mother has allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend, or self diagnosed
							8	NA
							9	Not stated
Y5_MS45		Q50 Who told mother has allergy	50		Text		1	Paediatrician/specialist
							2	Doctor

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend, or self diagnosed
							8	NA
							9	Not stated
Y5_MS46	Q50	Who told mother has allergy	50		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend, or self diagnosed
							8	NA
							9	Not stated
Y5_MS47	Q50	What reaction did mother have	50		Text		8	NA
							9	Not stated
							A	Upper respiratory
							B	Lower respiratory
							C	Skin
							D	Gastrointestinal
							E	Neurological
							F	Excessive mucus production
							G	Oedema - generalised/throat swelling
							H	Anaphylaxis

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							I	Lymphatic related
							J	Behavioural
							K	Musculoskeletal
							L	Cardiac
Y5_MS48		Q50 What reaction did mother have	50		Text		8	NA
							9	Not stated
							A	Upper respiratory
							B	Lower respiratory
							C	Skin
							D	Gastrointestinal
							E	Neurological
							F	Excessive mucus production
							G	Oedema - generalised/throat swelling
							H	Anaphylaxis
							I	Lymphatic related
							J	Behavioural
							K	Musculoskeletal
							L	Cardiac
Y5_MS49		Q50 What reaction did mother have	50		Text		8	NA
							9	Not stated
							A	Upper respiratory
							B	Lower respiratory
							C	Skin
							D	Gastrointestinal
							E	Neurological
							F	Excessive mucus production
							G	Oedema - generalised/throat swelling

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						H	Anaphylaxis
						I	Lymphatic related
						J	Behavioural
						K	Musculoskeletal
						L	Cardiac
Y5_MS50	Q50 What reaction did mother have	50		Text		8	NA
						9	Not stated
						A	Upper respiratory
						B	Lower respiratory
						C	Skin
						D	Gastrointestinal
						E	Neurological
						F	Excessive mucus production
						G	Oedema - generalised/throat swelling
						H	Anaphylaxis
						I	Lymphatic related
						J	Behavioural
						K	Musculoskeletal
						L	Cardiac
Y5_ML10A	Q50 Mother allergic to - mould	50	1	Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_ML10B	Q50 Age first allergy occurred	50	1	Numeric			number corresponds
						88	NA
						99	Not stated
Y5_ML10C	Q50 Age allergy stopped	50	1	Numeric			number corresponds

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							88	NA
							99	Not stated
Y5_ML10D	Q50	Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietrician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML10E	Q50	What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML10F	Q50	What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML10G	Q50	What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML10H	Q50	What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML10I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML10J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML10K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML10L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML10M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML10N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML10O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML10P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML11A		Q50 Mother allergic to - cat fur	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML11B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML11C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML11D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							7	Relative, friend or self dignosed
							8	NA
							9	Not stated
Y5_ML11E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML11F		Q50 What reaction - lower respiratory	50	1	Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_ML11G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML11H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML11I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML11J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML11K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML11L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML11M		Q50 What reaction - lymphatic related	50	1	Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_ML11N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML11O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML11P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML12A		Q50 Mother allergic to - animal fur incl feathers/wool	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML12B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML12C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML12D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML12E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML12F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML12G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML12H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML12I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML12J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_ML12K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML12L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML12M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML12N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML12O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML12P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML13A		Q50 Mother allergic to - multiple drug allergies	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML13B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML13C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML13D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML13E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML13F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML13G		Q50 What reaction - skin	50	1	Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_ML13H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML13I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML13J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML13K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML13L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML13M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML13N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML13O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML13P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML14A		Q50 Mother allergic to - multiple allergies of all systems	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML14B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML14C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML14D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML14E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML14F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML14G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML14H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML14I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML14J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML14K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML14L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML14M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML14N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML14O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML14P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML15A		Q50 Mother allergic to - soaps/detergents	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML15B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML15C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML15D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML15E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML15F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML15G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML15H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML15I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML15J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML15K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML15L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML15M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML15N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML15O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML15P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML16A		Q50 Mother allergic to - insect bites	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML16B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML16C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML16D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML16E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML16F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML16G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML16H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML16I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML16J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML16K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML16L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML16M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML16N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML16O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML16P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML17A		Q50 Mother allergic to - other contact allergies	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML17B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML17C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML17D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML17E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML17F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML17G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML17H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML17I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML17J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML17K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML17L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML17M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML17N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML17O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_ML17P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML18A		Q50 Mother allergic to - antibiotics	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML18B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML18C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML18D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML18E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML18F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML18G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML18H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML18I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML18J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML18K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML18L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_ML18M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
Y5_ML18N		Q50 What reaction - behavioural	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML18O		Q50 What reaction - musculoskeletal	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML18P		Q50 What reaction - cardiac	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML19A		Q50 Mother allergic to - other drugs	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML19B		Q50 Age first allergy occurred	50	1	Numeric		Y	Yes
								number corresponds
							88	NA
							99	Not stated
Y5_ML19C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML19D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML19E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML19F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML19G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML19H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML19I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_ML19J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
Y5_ML19K		Q50 What reaction - oedema	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML19L		Q50 What reaction - anaphylaxis	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML19M		Q50 What reaction - lymphatic related	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML19N		Q50 What reaction - behavioural	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML19O		Q50 What reaction - musculoskeletal	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML19P		Q50 What reaction - cardiac	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_ML1A		Q50 Mother allergic to - cows milk	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML1B		Q50 Age first allergy occurred	50	1	Numeric			Number corresponds
							88	NA
							99	Not stated
Y5_ML1C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML1D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML1E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML1F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_ML1G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML1H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML1I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML1J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML1K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML1L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML1M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_ML1N		Q50 What reaction - behavioural	50	1	Text		Y	Yes
							8	NA
							9	Not stated
Y5_ML1O		Q50 What reaction - musculoskeletal	50	1	Text		N	No
							Y	Yes
							8	NA
Y5_ML1P		Q50 What reaction - cardiac	50	1	Text		9	Not stated
							N	No
							Y	Yes
Y5_ML20A		Q50 Mother allergic to - hayfever	50	1	Text		8	NA
							9	Not stated
							N	No
Y5_ML20B		Q50 Age first allergy occurred	50	1	Numeric		Y	Yes
							8	NA
							9	Not stated
Y5_ML20C		Q50 Age allergy stopped	50	1	Numeric		88	number corresponds
							99	NA
							99	Not stated
Y5_ML20D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML20E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML20F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML20G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML20H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML20I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML20J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_ML20K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML20L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML20M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML20N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML20O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML20P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML21A		Q50 Mother allergic to - other resp allergies	50	1	Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_ML21B	Q50	Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML21C	Q50	Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML21D	Q50	Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML21E	Q50	What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML21F	Q50	What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML21G	Q50	What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_ML21H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
Y5_ML21I		Q50 What reaction - neurological	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML21J		Q50 What reaction - excessive mucus prod	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML21K		Q50 What reaction - oedema	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML21L		Q50 What reaction - anaphylaxis	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML21M		Q50 What reaction - lymphatic related	50	1	Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_ML21N		Q50 What reaction - behavioural	50	1	Text		Y	Yes
							8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_ML21O	Q50	What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML21P	Q50	What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML2A	Q50	Mother allergic to - soy products	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML2B	Q50	Age first allergy occurred	50	1	Numeric			numbers correspond
							88	NA
							99	Not stated
Y5_ML2C	Q50	Age allergy stopped	50	1	Numeric			numbers correspond
							88	NA
							99	Not stated
Y5_ML2D	Q50	Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nnurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
Y5_ML2E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML2F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML2G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML2H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML2I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML2J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML2K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_ML2L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML2M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML2N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML2O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML2P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML3A		Q50 Mother allergic to - cows milk	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML3B		Q50 Age first allergy occurred	50	1	Numeric			numbers correspond
							88	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							99	Not stated
Y5_ML3C		Q50 Age allergy stopped	50	1	Numeric			numbers correspond
							88	NA
							99	Not stated
Y5_ML3D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML3E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML3F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML3G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML3H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_ML3I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML3J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML3K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML3L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML3M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML3N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML3O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_ML3P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML4A		Q50 Mother allergic to - peanuts/peanut prods	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML4B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML4C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML4D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML4E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_ML4F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML4G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML4H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML4I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML4J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML4K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML4L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_ML4M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML4N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML4O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML4P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML5A		Q50 Mother allergic to - other foods incl wine/bev	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML5B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML5C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							99	Not stated
Y5_ML5D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML5E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML5F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML5G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML5H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML5I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_ML5J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML5K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML5L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML5M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML5N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML5O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML5P		Q50 What reaction - cardiac	50	1	Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_ML6A		Q50 Mother allergic to - food additives/pres/col	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML6B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML6C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML6D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML6E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML6F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_ML6G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML6H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML6I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML6J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML6K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML6L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML6M		Q50 What reaction - lymphatic related	50	1	Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_ML6N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML6O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML6P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML7A		Q50 Mother allergic to - multiple food allergies	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML7B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML7C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML7D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML7E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML7F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML7G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML7H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML7I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML7J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_ML7K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML7L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML7M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML7N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML7O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML7P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML8A		Q50 Mother allergic to - house dust mite	50	1	Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_ML8B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML8C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML8D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML8E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML8F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML8G		Q50 What reaction - skin	50	1	Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_ML8H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML8I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML8J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML8K		Q50 What reaction - oedema	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML8L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML8M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML8N		Q50 What reaction - behavioural	50	1	Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_ML8O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML8P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML9A		Q50 Mother allergic to - pollens	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML9B		Q50 Age first allergy occurred	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML9C		Q50 Age allergy stopped	50	1	Numeric			number corresponds
							88	NA
							99	Not stated
Y5_ML9D		Q50 Who told you about allergy	50	1	Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_ML9E		Q50 What reaction - upper respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML9F		Q50 What reaction - lower respiratory	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML9G		Q50 What reaction - skin	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML9H		Q50 What reaction - gastrointestinal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML9I		Q50 What reaction - neurological	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML9J		Q50 What reaction - excessive mucus prod	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML9K		Q50 What reaction - oedema	50	1	Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_ML9L		Q50 What reaction - anaphylaxis	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML9M		Q50 What reaction - lymphatic related	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML9N		Q50 What reaction - behavioural	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML9O		Q50 What reaction - musculoskeletal	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_ML9P		Q50 What reaction - cardiac	50	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_MS30		Q50 Mother allergies yes/no	50	1	Text		9	Not stated
							N	No
							Y	Yes
Y5_SL10A		Q51 Sibling id-see Q13 etc	51		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
Y5_SL10B		Q51 What reaction - upper respiratory	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL10C		Q51 What reaction - lower respiratory	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL10D		Q51 What reaction - skin	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL10E		Q51 What reaction - gastrointestinal	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL10F		Q51 What reaction - neurological	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL10G		Q51 What reaction - excessive mucus prod	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL10H		Q51 What reaction - oedema	51		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_SL10I		Q51 What reaction - anaphylaxis	51		Text		8	NA
							9	Not stated
							N	No
Y5_SL10J		Q51 What reaction - lymphatic related	51		Text		8	NA
							9	Not stated
							N	No
Y5_SL10K		Q51 What reaction - behavioural	51		Text		8	NA
							9	Not stated
							N	No
Y5_SL10L		Q51 What reaction - musculoskeletal	51		Text		8	NA
							9	Not stated
							N	No
Y5_SL10M		Q51 What reaction - cardiac	51		Text		8	NA
							9	Not stated
							N	No
Y5_SL11A		Q51 Sibling id-see Q13 etc	51		Text		8	NA
							9	Not stated
Y5_SL11B		Q51 What reaction - upper respiratory	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_SL11C		Q51 What reaction - lower respiratory	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL11D		Q51 What reaction - skin	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL11E		Q51 What reaction - gastrointestinal	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL11F		Q51 What reaction - neurological	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL11G		Q51 What reaction - excessive mucus prod	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL11H		Q51 What reaction - oedema	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL11I		Q51 What reaction - anaphylaxis	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_SL11J		Q51 What reaction - lymphatic	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL11K		Q51 What reaction - behavioural	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL11L		Q51 What reaction - musculoskeletal	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL11M		Q51 What reaction - cardiac	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL12A		Q51 Sibling id-see Q13 etc	51		Text		8	NA
							9	Not stated
Y5_SL12B		Q51 What reaction - upper respiratory	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL12C		Q51 What reaction - lower respiratory	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL12D		Q51 What reaction - skin	51		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_SL12E		Q51 What reaction - gastrointestinal	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL12F		Q51 What reaction - neurological	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL12G		Q51 What reaction - excessive mucus prod	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL12H		Q51 What reaction - oedema	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL12I		Q51 What reaction - anaphylaxis	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL12J		Q51 What reaction - lymphatic	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL12K		Q51 What reaction - behavioural	51		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_SL12L		Q51 What reaction - musculoskeletal	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL12M		Q51 What reaction - cardiac	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL7A		Q51 Sibling id-see Q13 etc	51		Text		8	NA
							9	Not stated
Y5_SL7B		Q51 What reaction - upper resp	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL7C		Q51 What reaction - lower resp	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL7D		Q51 What reaction - skin	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL7E		Q51 What reaction - gastrointestinal	51		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_SL7F		Q51 What reaction - neurological	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL7G		Q51 What reaction - excessive mucus prod	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL7H		Q51 What reaction - oedema	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL7I		Q51 What reaction - anaphylaxis	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL7J		Q51 What reaction - lymphatic	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL7K		Q51 What reaction - behavioural	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL7L		Q51 What reaction - musculoskeletal	51		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_SL7M		Q51 What reaction - cardiac	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL8A		Q51 Sibling id-see Q13 etc	51		Text		8	NA
							9	Not stated
Y5_SL8B		Q51 What reaction - upper respiratory	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL8C		Q51 What reaction - lower respiratory	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL8D		Q51 What reaction - skin	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL8E		Q51 What reaction - gastrointestinal	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL8F		Q51 What reaction - neurological	51		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_SL8G		Q51 What reaction - excessive mucus prod	51		Text		8	NA
							9	Not stated
							N	No
Y5_SL8H		Q51 What reaction - oedema	51		Text		8	NA
							9	Not stated
							N	No
Y5_SL8I		Q51 What reaction - anaphylaxis	51		Text		8	NA
							9	Not stated
							N	No
Y5_SL8J		Q51 What reaction - lymphatic related	51		Text		8	NA
							9	Not stated
							N	No
Y5_SL8K		Q51 What reaction - behavioural	51		Text		8	NA
							9	Not stated
							N	No
Y5_SL8L		Q51 What reaction - musculoskeletal	51		Text		8	NA
							9	Not stated
							N	No
Y5_SL8M		Q51 What reaction - cardiac	51		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_SL9A		Q51 Sibling id-see Q13 etc	51		Text		8	NA
							9	Not stated
Y5_SL9B		Q51 What reaction - upper respiratory	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL9C		Q51 What reaction - lower respiratory	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL9D		Q51 What reaction - skin	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL9E		Q51 What reaction - gastrointestinal	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL9F		Q51 What reaction - neurological	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL9G		Q51 What reaction - excessive mucus prod	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_SL9H		Q51 What reaction - oedema	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL9I		Q51 What reaction - anaphylaxis	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL9J		Q51 What reaction - lymphatic related	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL9K		Q51 What reaction - behavioural	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL9L		Q51 What reaction - muculoskeletal	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SL9M		Q51 What reaction - cardiac	51		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_SS14		Q51 Siblings allergies yes/no	51		Text		9	Not stated
							N	No
							Y	Yes
Y5_SS15		Q51 Which sibling has allergy	51		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
Y5_SS16		Q51 Which sibling has allergy	51		Text		8	NA
							9	Not stated
Y5_SS17		Q51 Which sibling has allergy	51		Text		8	NA
							9	Not stated
Y5_SS18		Q51 Which sibling has allergy	51		Text		8	NA
							9	Not stated
Y5_SS19		Q51 Which sibling has allergy	51		Text		8	NA
							9	Not stated
Y5_SS20		Q51 Which sibling has allergy	51		Text		8	NA
							9	Not stated
Y5_SS21		Q51 What reaction sibling have	51		Text		8	NA
							9	Not stated
							A	Upper respiratory
							B	Lower respiratory
							C	Skin
							D	Gastrointestinal
							E	Neurological
							F	Excessive mucus production
							G	Oedema - generalised/throat swelling
							H	Anaphylaxis
							I	Lymphatic related
							J	Behavioural
							K	Musculoskeletal
							L	Cardiac
Y5_SS22		Q51 What reaction sibling have	51		Text		8	NA
							9	Not stated

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						A	Upper respiratory
						B	Lower respiratory
						C	Skin
						D	Gastrointestinal
						E	Neurological
						F	Excessive mucus production
						G	Oedema - generalised/throat swelling
						H	Anaphylaxis
						I	Lymphatic related
						J	Behavioural
						K	Musculoskeletal
						L	Cardiac
Y5_SS23	Q51 What reaction sibling have	51		Text		8	NA
						9	Not stated
						A	Upper respiratory
						B	Lower respiratory
						C	Skin
						D	Gastrointestinal
						E	Neurological
						F	Excessive mucus production
						G	Oedema - generalised/throat swelling
						H	Anaphylaxis
						I	Lymphatic related
						J	Behavioural
						K	Musculoskeletal
						L	Cardiac

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_SS24		Q51 What reaction sibling have	51		Text		8	NA
							9	Not stated
							A	Upper respiratory
							B	Lower respiratory
							C	Skin
							D	Gastrointestinal
							E	Neurological
							F	Excessive mucus production
							G	Oedema - generalised/throat swelling
							H	Anaphylaxis
							I	Lymphatic related
							J	Behavioural
							Y5_SS25	
9	Not stated							
A	Upper respiratory							
B	Lower respiratory							
C	Skin							
D	Gastrointestinal							
E	Neurological							
F	Excessive mucus production							
G	Oedema - generalised/throat swelling							
H	Anaphylaxis							
I	Lymphatic related							
J	Behavioural							

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_SS26	Q51	What reaction sibling have	51		Text		K	Musculoskeletal
							L	Cardiac
							8	NA
							9	Not stated
							A	Upper respiratory
							B	Lower respiratory
							C	Skin
							D	Gastrointestinal
							E	Neurological
							F	Excessive mucus production
							G	Oedema - generalised/throat swelling
							H	Anaphylaxis
							I	Lymphatic related
Y5_FS51	Q52	Father ever had eczema	52		Text		J	Behavioural
							K	Musculoskeletal
							L	Cardiac
Y5_MS51	Q52	Mother ever had eczema	52		Text		9	Not stated
							N	No
							Y	Yes
Y5_FS52	Q53	Father still have eczema	53		Text		9	Not stated
							N	No
							Y	Yes
Y5_MS52	Q53	Mother still have eczema	53		Text		8	Not applicable
							9	Not stated
							N	No
							Y	Yes
							8	Not applicable

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_SS27		Q54 Siblings ever had eczema	54		Text		9	Not stated
							N	No
							Y	Yes
Y5_SS28		Q54 Which sibling had eczema	54		Text		8	NA
							9	Not stated
Y5_SS29		Q54 Which sibling had eczema	54		Text		8	NA
							9	Not stated
Y5_SS30		Q54 Which sibling had eczema	54		Text		8	NA
							9	Not stated
Y5_SS31		Q54 Which sibling had eczema	54		Text		8	NA
							9	Not stated
Y5_SS32		Q54 Which sibling had eczema	54		Text		8	NA
							9	Not stated
Y5_SS33		Q54 Which sibling had eczema	54		Text		8	NA
							9	Not stated
Y5_PT1		Q55 Any pets at home	55		Text		9	Not stated
							N	No
							Y	Yes
Y5_PT10		Q56 How many birds inside	56		Numeric		88	NA
							99	Not stated
Y5_PT11		Q56 Other pets inside	56		Text		8	NA
							9	Not stated
							D	Rabbits, guinea pigs, hamsters, mice, ferrets
							E	Fish, shellfish and crustaceans

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							F	Reptiles and amphibians (eg tortoises, lizards, frogs, snakes, crocodiles)
							G	Insects
							H	Farm animals (eg sheep, horses, cows, goats)
							I	Other
Y5_PT11A		Q56 Type other pets inside - rodents	56		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT11B		Q56 Type other pets inside - fish	56		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT11C		Q56 Type other pets inside - reptiles	56		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT11D		Q56 Type other pets inside - farm animals	56		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT11E		Q56 Type other pets inside - insects	56		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT11F		Q56 Type other pets inside - other	56		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_PT12		Q56 Other pets outside	56		Text		8	NA
							9	Not stated
							D	Rabbits, guinea pigs, hamsters, mice, ferrets
							E	Fish, shellfish and crustaceans
							F	Reptiles and amphibians (eg tortoises, lizards, frogs, snakes, crocodiles)
							G	Insects
							H	Farm animals (eg sheep, horses, cows, goats)
							I	Other
Y5_PT12A		Q56 Type other pets outside - rodents	56		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT12B		Q56 Type other pets outside - fish	56		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT12C		Q56 Type other pets outside - reptiles	56		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT12D		Q56 Type other pets outside - farm animals	56		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_PT12E		Q56 Type other pets outside - insects	56		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT12F		Q56 Type other pets outside - other	56		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT3		Q56 How many cats in total	56		Numeric		88	NA
							99	Not stated
Y5_PT4		Q56 How many cats inside	56		Numeric		88	NA
							99	Not stated
Y5_PT6		Q56 How many dogs in total	56		Numeric		88	NA
							99	Not stated
Y5_PT7		Q56 How many dogs inside	56		Numeric		88	NA
							99	Not stated
Y5_PT9		Q56 How many birds in total	56		Numeric		88	NA
							99	Not stated
Y5_PT13		Q57 Contact with pets elsewhere	57		Text		9	Not stated
							N	No
							Y	Yes
Y5_PT13A		Q57 Contact with other dogs	57		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT13B		Q57 Contact with other cats	57		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_PT13C		Q57 Contact with other birds	57		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT13D		Q57 Contact with other rodents	57		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT13E		Q57 Contact with other fish	57		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT13F		Q57 Contact with other reptiles	57		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT13G		Q57 Contact with other pets	57		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT13H		Q57 Contact with other insects	57		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PT13I		Q57 Contact with other farm animals	57		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_PT14		Q57 What type of pet(s) elsewhere	57		Text		8	NA
							9	Not stated
							A	Dogs
							B	Cats
							C	Birds
							D	Rabbits, guinea pigs, hamsters, mice, ferrets
							E	Fish, shellfish and crustacians
							F	Reptiles and amphibians (eg tortoises, lizards, frogs, snakes, crocodiles)
							G	Insects
							H	Farm animals (eg sheep, horses, cows, goats)
							I	Other
Y5_ST1		Q58 Pregnancy prob in last year	58		Text		9	Not stated
							N	No
							Y	Yes
Y5_ST10		Q58 Residential move last year	58		Text		9	Not stated
							N	No
							Y	Yes
Y5_ST11		Q58 Other problems last year	58		Text		9	Not stated
							N	No
							Y	Yes
Y5_ST2		Q58 Death of relative last year	58		Text		9	Not stated
							N	No

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						Y	Yes
Y5_ST3	Q58 Death of friend last year	58		Text		9	Not stated
						N	No
Y5_ST4	Q58 Separation/divorce last year	58		Text		9	Not stated
						N	No
Y5_ST5	Q58 Marital problems last year	58		Text		9	Not stated
						N	No
Y5_ST6	Q58 Probs with children last year	58		Text		9	Not stated
						N	No
Y5_ST7	Q58 Your job loss last year	58		Text		9	Not stated
						N	No
Y5_ST8	Q58 Partner job loss last year	58		Text		9	Not stated
						N	No
Y5_ST9	Q58 Money problems last year	58		Text		9	Not stated
						N	No
Y5_FO22	Q59 Child eats margarine	59		Text		0	Margarine not made with canola oil - incl sometimes without
						1	Margarine made with canola oil
						2	Does not eat margarine
						9	Dont know if contains canola oil or not

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_FD5		Q60 Childs diet restricted	60		Text		9	Not stated
							N	No
							Y	Yes
Y5_FD5A		Q60 Foods restricted - dairy products	60		Text		8	NA
							9	Not stated
							N	No
Y5_FD5B		Q60 Foods restricted - wheat/gluten	60		Text		8	NA
							9	Not stated
							N	No
Y5_FD5C		Q60 Foods restricted - fruits	60		Text		8	NA
							9	Not stated
							N	No
Y5_FD5D		Q60 Foods restricted - sugar/sweet foods	60		Text		8	NA
							9	Not stated
							N	No
Y5_FD5E		Q60 Foods restricted - fat	60		Text		8	NA
							9	Not stated
							N	No
Y5_FD5F		Q60 Foods restricted - salt	60		Text		8	NA
							9	Not stated
							N	No
Y5_FD5G		Q60 Foods restricted - food colouring/pres	60		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_FD5H		Q60 Foods restricted - eggs	60		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FD5I		Q60 Foods restricted - other specified foods	60		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FD8		Q60 Foods restricted	60		Text		8	NA
							9	Not stated
							A	Dairy products
							B	Wheat/gluten
							C	Fruit(s)
							D	Sugar/sweet foods
							E	Fat
							F	Salt
							G	Food colouring/preservatives
							H	Eggs
							Z	Some other specific food(s)
Y5_FD9		Q60 Foods restricted	60		Text		8	NA
							9	Not stated
							A	Dairy products
							B	Wheat/gluten
							C	Fruit(s)

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						D	Sugar/sweet foods
						E	Fat
						F	Salt
						G	Food colouring/preservatives
						H	Eggs
						Z	Some other specific food(s)
Y5_FD6	Q61 Child has food allergies	61		Text		9	Not stated
						N	No
						Y	Yes
Y5_FD6A	Q61 Childs reaction to food(s) - vomit/diarr(gastro)	61		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_FD6B	Q61 Childs reaction to food(s) - mucus	61		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_FD6C	Q61 Childs reaction to food(s) - behavioural	61		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_FD6D	Q61 Childs reaction to food(s) - rash(skin)	61		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_FD6E	Q61 Childs reaction to food(s) - wheez/anaphy	61		Text		8	NA
						9	Not stated
						N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_FD6F		Q61 Childs reaction to food(s) - upper resp	61		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FD6G		Q61 Childs reaction to food(s) - lower resp	61		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FD6H		Q61 Childs reaction to food(s) - neurological	61		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FD6I		Q61 Childs reaction to food(s) - oedema	61		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FD6J		Q61 Childs reaction to food(s) - lymphatic	61		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FD6K		Q61 Childs reaction to food(s) - musculoskeletal	61		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_FD6L		Q61 Childs reaction to food(s) - cardiac	61		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_FD7		Q61 Childs reaction to food(s)	61		Text		8	NA
							9	Not stated
							A	Upper respiratory
							B	Lower respiratory
							C	Skin
							D	Gastrointestinal
							E	Neurological
							F	Excessive mucus production
							G	Oedema - generalised/throat swelling
							H	Anaphylaxis
							I	Lymphatic related
							J	Behavioural
							K	Musculoskeletal
							L	Cardiac
Y5_BWL3		Q62 Treat constipation last 2 yrs	62		Text		0	No
							1	Yes - once or twice
							2	Yes - more than twice
							3	Yes - at least every month
							9	Not stated
Y5_WET1		Q63 Does child wet bed	63		Text		0	Often - twice a week or more
							1	Sometimes - once a week
							2	Occasionally - less than once a week
							3	Rarely - less than once a month
							4	Never

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
Y5_SOIL		Q64 Does child ever soil pants	64		Text		0	Often - twice a week or more
							1	Sometimes - once a week
							2	Occasionally - less than once a week
							3	Rarely - less than once a week
							4	Never
							9	Not stated
Y5_SLP1		Q65 Sleeps in own room	65		Text		1	In a room with one child
							2	In a room with two children
							3	In a room with three children
							4	In a room with four children
							9	Not stated
							A	In his/her own room
							B	In a room with other children, number unspecified
							C	In a room with parent(s)
Y5_SLP4		Q66 Sleeps in own bed	66		Text		1	In a bed with one child
							2	In a bed with two children
							3	In a bed with three children
							9	Not stated
							A	In his/her own bed
							B	In a bed with other children, number unspecified
							C	In a bed with parent(s)
Y5_AC1		Q67 How spends spare time	67		Text		9	Not stated
							A	Outdoor play
							B	Reading
							C	Building/blocks

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							D	Television
							E	Video games
							F	Dolls
							G	Pretending (eg mothers & fathers, firemen)
							H	Drawing/painting
							I	Other
							J	D and E only
							K	Two activities only , including D or E (not both)
							L	Three or more activities
Y5_AC2		Q68 How often looks at book	68		Text		0	Less than once a week
							1	Once a week
							2	Two or three times a week
							3	Most days
							4	More than once a day
							9	Not stated
Y5_AC3		Q69 How often read to	69		Text		0	Less than once a week
							1	Once a week
							2	Two or three times a week
							3	Most days
							4	More than once a day
							9	Not stated
Y5_AC4		Q70 How much time watching TV	70		Text		0	None
							1	Less than 3 hours a week
							2	Up to 1 hour a day (3 to 7 hours a week)
							3	Between 1 and 2 hours a day (7-14 hours a week)

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							4	Between 3 and 4 hours a day (14-21 hours a week)
							5	More than 3 hours a day (more than 21 hours a week)
							9	Not stated
Y5_AC5	Q71	3 programs seen most often	71		Text		0	No programs containing violence
							1	One program containing violence
							2	Two programs containing violence
							3	Three programs containing violence
							8	NA
							9	Not stated
Y5_AC7	Q72	Involved in organised sport	72		Text		9	Not stated
							N	No
							Y	Yes
Y5_AC8	Q73	Swimming lessons last year	73		Text		9	Not stated
							N	No
							Y	Yes
Y5_AC9	Q74	Involved organised activity	74		Text		9	Not stated
							N	No
							Y	Yes
Y5_SP1	Q75	Child difficult to understand	75	1	Text		1	Always
							2	Mostly
							3	Sometimes
							4	Never
							9	Not stated
Y5_SP28	Q75	Uses long sentences	75	2	Text		1	Always
							2	Mostly

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							3	Sometimes
							4	Never
Y5_SP17	Q75	Can retell story	75	3	Text		9	Not stated
							1	Always
							2	Mostly
							3	Sometimes
							4	Never
Y5_SP29	Q75	Can relate experiences	75	4	Text		9	Not stated
							1	Always
							2	Mostly
							3	Sometimes
							4	Never
Y5_SP30	Q75	Answers why questions	75	5	Text		9	Not stated
							1	Always
							2	Mostly
							3	Sometimes
							4	Never
Y5_SP3	Q75	Child stutters	75	6	Text		9	Not stated
							1	Always
							2	Mostly
							3	Sometimes
							4	Never
Y5_SP31	Q75	Pays attention to long stories	75	7	Text		9	Not stated
							1	Always
							2	Mostly
							3	Sometimes
							4	Never
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_SP23		Q75 Doesnt understand instructions	75	8	Text		1	Always
							2	Mostly
							3	Sometimes
							4	Never
							9	Not stated
Y5_SP32		Q75 Misses out words in sentences	75	9	Text		1	Always
							2	Mostly
							3	Sometimes
							4	Never
							9	Not stated
Y5_SP33		Q75 Interested in written words	75	10	Text		1	Always
							2	Mostly
							3	Sometimes
							4	Never
							9	Not stated
Y5_SP26		Q75 Interested in new words	75	11	Text		1	Always
							2	Mostly
							3	Sometimes
							4	Never
							9	Not stated
Y5_SP25		Q75 Attentive in conversation	75	12	Text		1	Always
							2	Mostly
							3	Sometimes
							4	Never
							9	Not stated
Y5_CC1		Q76 Been childcare/playgroup	76		Text		9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_CC4		Q77 Age first attend	77		Numeric		88	NA
							99	Not stated
Y5_CC10		Q78 4-5 yrs-months in care	78		Numeric		88	NA
							99	Not stated
Y5_CC11		Q78 5-6 yrs-months in care	78		Numeric		88	NA
							99	Not stated
Y5_CC12		Q78 0-6 mnths-hrs/week in care	78		Numeric		88	NA
							99	Not stated
Y5_CC13		Q78 6-12 mnths-hrs/week in care	78		Numeric		88	NA
							99	Not stated
Y5_CC14		Q78 1-2 yrs-hrs/week in care	78		Numeric		88	NA
							99	Not stated
Y5_CC15		Q78 2-3 yrs-hrs/week in care	78		Numeric		88	NA
							99	Not stated
Y5_CC16		Q78 3-4 yrs-hrs/week in care	78		Numeric		88	NA
							99	Not stated
Y5_CC17		Q78 4-5 yrs-hrs/week in care	78		Numeric		88	NA
							99	Not stated
Y5_CC18		Q78 5-6 yrs-hrs/week in care	78		Numeric		88	NA
							99	Not stated
Y5_CC19		Q78 0-6 mnths-months in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC20		Q78 6-12 mnths-months in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC21		Q78 1-2 yrs-months in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC22		Q78 2-3 yrs-months in plygrp	78		Numeric		88	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							99	Not stated
Y5_CC23		Q78 3-4 yrs-months in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC24		Q78 4-5 yrs-months in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC25		Q78 5-6 yrs-months in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC26		Q78 0-6 mnths-hrs/week in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC27		Q78 6-12 mnths-hrs/week in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC28		Q78 1-2 yrs-hrs/week in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC29		Q78 2-3 yrs-hrs/week in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC30		Q78 3-4 yrs-hrs/week in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC31		Q78 4-5 yrs-hrs/week in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC32		Q78 5-6 yrs-hrs/week in plygrp	78		Numeric		88	NA
							99	Not stated
Y5_CC5		Q78 0-6 mnths-months in care	78		Numeric		88	NA
							99	Not stated
Y5_CC6		Q78 6-12 mnths-months in care	78		Numeric		88	NA
							99	Not stated
Y5_CC7		Q78 1-2 yrs-months in care	78		Numeric		88	NA
							99	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_CC8		Q78 2-3 yrs-months in care	78		Numeric		88	NA
							99	Not stated
Y5_CC9		Q78 3-4 yrs-months in care	78		Numeric		88	NA
							99	Not stated
Y5_ED1		Q79 Attended preschool in 4th yr	79		Text		9	Not stated
							N	No
							Y	Yes
Y5_ED2		Q80 Mnths/yr attended preschool	80		Numeric		88	NA
							99	Not stated
Y5_ED3		Q81 Hrs/week attended preschool	81		Numeric		8888	NA
							9999	Not stated
Y5_ED4		Q82 Attended preprimary in 5th yr	82		Text		9	Not stated
							N	No
							Y	Yes
Y5_ED5		Q83 Mnths/yr attended preprimary	83		Numeric		88	NA
							99	Not stated
Y5_ED6		Q84 Hrs/week attended preprimary	84		Numeric		8888	NA
							9999	Not stated
Y5_ED19		Q85 Date started school	85		Text		888888	NA
							999999	Not stated
Y5_ED7		Q85 Child in Grade 1 now	85		Text		9	Not stated
							N	No
							Y	Yes
Y5_IM1		Q86 2 month immunisation	86		Text		0	Not immunised
							1	Immunised - triple antigen and sabin
							2	CDT and Sabin
							3	Sabin only

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							4	CDT only
							5	Triple antigen only
							9	Not stated
							Y	Yes, not specified
Y5_IM10		Q86 5 year immunisation	86		Text		0	Not immunised
							1	Immunised - triple antigen and Sabin
							2	CDT and Sabin
							3	Sabin only
							4	CDT only
							5	Triple antigen only
							9	Not stated
							Y	Yes, not specified
Y5_IM2		Q86 4 month immunisation	86		Text		0	Not immunised
							1	Immunised - triple antigen and sabin
							2	CDT and Sabin
							3	Sabin only
							4	CDT only
							5	Triple antigen only
							9	Not stated
							Y	Yes, not specified
Y5_IM3		Q86 6 month immunisation	86		Text		0	Not immunised
							1	Immunised - triple antigen and sabin
							2	CDT and sabin
							3	Sabin only
							4	CDT only
							5	Triple antigen only

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							Y	Yes, not specified
Y5_IM4		Q86 12 month immunisation	86		Text		0	Not immunised
							1	Immunised - MMR
							2	Measles and mumps only
							9	Not stated
							Y	Yes, not specified
Y5_IM9		Q86 18 month immunisation	86		Text		0	Not immunised
							1	Immunised - triple antigen
							2	CDT only
							9	Not stated
Y5_IM7		Q87 Immunised for meningitis	87		Text		1	One dose
							2	Two doses
							3	Three doses
							4	Four doses
							9	Not stated
							N	Not immunised for Hib
							Y	Yes, number of doses unspecified
Y5_IM7A		Q87 Child immunised for meningitis - yesno	87		Text		9	Not stated
							N	No
							Y	Yes
Y5_IM7B		Q88 Doses of Hib vaccine received	88		Text		1	One dose
							2	Two doses
							3	Three doses
							4	Four doses
							8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_IM11		Q89 Other immunisations	89		Text		9	Not stated
							A	Hepatitis B
							B	Tb
							C	Homeopathic
							D	Other
							E	A and B
							F	A and C
							G	A and D
							H	B and C
							I	B and D
							J	C and D
							K	A and B and D
							Y5_IM11A	
N	No							
Y	Yes							
Y5_IM11B		Q89 Other immunisations - Tb	89		Text		9	Not stated
							N	No
							Y	Yes
Y5_IM11C		Q89 Other immunisations - homeopathic	89		Text		9	Not stated
							N	No
							Y	Yes
Y5_IM11D		Q89 Other immunisations - other	89		Text		9	Not stated
							N	No
							Y	Yes
Y5_IMPL		Q90 Where immunised	90		Text		0	Local doctor (GP)
							1	Community health centre/clinic

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							2	Mobile immunisation clinic
							3	Homeopathic/naturopathic practitioner
							8	Not immunised
							9	Not stated
Y5_IMPLA		Q90 Where immunised - local doctor	90		Text		8	Not immunised
							9	Not stated
							N	No
							Y	Yes
Y5_IMPLB		Q90 Where immunised - community health centre/clinic	90		Text		8	Not immunised
							9	Not stated
							N	No
							Y	Yes
Y5_IMPLC		Q90 Where immunised - mobile immunisation clinic	90		Text		8	Not immunised
							9	Not stated
							N	No
							Y	Yes
Y5_IMPLD		Q90 Where immunised - homeopathic/naturopathic	90		Text		8	Not immunised
							9	Not stated
							N	No
							Y	Yes
Y5_MD1		Q91 Condition ICD-9 code	91		Text			Diagnosis Codes
							8888	NA
							9999	Not stated
Y5_MD11		Q91 1=condition 0=assoc cond	91		Text		0	Assoc condition
							1	Condition
Y5_MD12		Q91 1=condition 0=assoc cond	91		Text		0	Assoc condition
							1	Condition

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_MD13		Q91 1=condition 0=assoc cond	91		Text		0	Assoc condition
							1	Condition
Y5_MD2		Q91 Condition ICD-9 code	91		Text			Diagnosis Codes
							8888	NA
							9999	Not stated
Y5_MD3		Q91 Condition ICD-9 code	91		Text			Diagnosis Codes
							8888	NA
							9999	Not stated
Y5_MDC		Q91 Chronic medical cond=yes/no	91		Text		9	Not stated
							N	No
							Y	Yes
Y5_IC1		Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
							88888	NA
							99999	Not stated
Y5_IC10		Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
							88888	NA
							99999	Not stated
Y5_IC11		Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
							88888	NA
							99999	Not stated
Y5_IC12		Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
							88888	NA
							99999	Not stated
Y5_IC13		Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
							88888	NA
							99999	Not stated
Y5_IC14		Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
							88888	NA
							99999	Not stated

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						99999	Not stated
Y5_IC15	Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
						88888	NA
						99999	Not stated
Y5_IC2	Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
						88888	NA
						99999	Not stated
Y5_IC3	Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
						88888	NA
						99999	Not stated
Y5_IC4	Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
						88888	NA
						99999	Not stated
Y5_IC5	Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
						88888	NA
						99999	Not stated
Y5_IC6	Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
						88888	NA
						99999	Not stated
Y5_IC7	Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
						88888	NA
						99999	Not stated
Y5_IC8	Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
						88888	NA
						99999	Not stated
Y5_IC9	Q92 Illness ICD-9 code	92		Text			Diagnosis Codes
						88888	NA

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						99999	Not stated
Y5_IF1	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF10	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF11	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF12	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF13	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF14	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF15	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF2	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF3	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF4	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF5	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF6	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF7	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IF8	Q92 Illness Number of times	92		Text		88	NA

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						99	Not stated
Y5_IF9	Q92 Illness Number of times	92		Text		88	NA
						99	Not stated
Y5_IL	Q92 Ill since 3rd birthday y/n	92		Text		9	Not stated
						N	No
						Y	Yes
Y5_IL15	Q92 More than 15 illnesses	92		Text		Y	Yes
Y5_INC1	Q93 Injury ICD-9 code	93		Text			Diagnosis Code
						88888	NA
						99999	Not stated
Y5_INC2	Q93 Injury ICD-9 code	93		Text			Diagnosis Code
						88888	NA
						99999	Not stated
Y5_INC3	Q93 Injury ICD-9 code	93		Text			Diagnosis Code
						88888	NA
						99999	Not stated
Y5_INC4	Q93 Injury ICD-9 code	93		Text			Diagnosis Code
						88888	NA
						99999	Not stated
Y5_INF1	Q93 Injury Number of times	93		Text		8	NA
						9	Not stated
Y5_INF2	Q93 Injury Number of times	93		Text		8	NA
						9	Not stated
Y5_INF3	Q93 Injury Number of times	93		Text		8	NA
						9	Not stated
Y5_INF4	Q93 Injury Number of times	93		Text		8	NA
						9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_INJ		Q93 Injury since 3rd birthday y/n	93		Text		9	Not stated
							N	No
							Y	Yes
Y5_INJ4		Q93 More than 4 injuries	93		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_HO		Q94 Hosp since 3rd birthday y/n	94		Text		9	Not stated
							N	No
							Y	Yes
Y5_HO8		Q94 More than 8 hospitalisations	94		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_HOC1		Q94 Hospital ICD-9 code	94		Text			Diagnosis Codes
							8888	NA
							9999	Not stated
Y5_HOC2		Q94 Hospital ICD-9 code	94		Text			Diagnosis Codes
							8888	NA
							9999	Not stated
Y5_HOC3		Q94 Hospital ICD-9 code	94		Text			Diagnosis Codes
							8888	NA
							9999	Not stated
Y5_HOC4		Q94 Hospital ICD-9 code	94		Text			Diagnosis Codes
							8888	NA
							9999	Not stated
Y5_HOC5		Q94 Hospital ICD-9 code	94		Text			Diagnosis Codes
							8888	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9999	Not stated
Y5_HOC6		Q94 Hospital ICD-9 code	94		Text			Diagnosis Codes
							8888	NA
							9999	Not stated
Y5_HOC7		Q94 Hospital ICD-9 code	94		Text			Diagnosis Codes
							8888	NA
							9999	Not stated
Y5_HOC8		Q94 Hospital ICD-9 code	94		Text			Diagnosis Codes
							88888	NA
							99999	Not stated
Y5_HOD1		Q94 Date of admission to hospital	94		Text		888888	NA
							999999	Not stated
Y5_HOD2		Q94 Date of admission to hospital	94		Text		888888	NA
							999999	Not stated
Y5_HOD3		Q94 Date of admission to hospital	94		Text		888888	NA
							999999	Not stated
Y5_HOD4		Q94 Date of admission to hospital	94		Text		888888	NA
							999999	Not stated
Y5_HOD5		Q94 Date of admission to hospital	94		Text		888888	NA
							999999	Not stated
Y5_HOD6		Q94 Date of admission to hospital	94		Text		888888	NA
							999999	Not stated
Y5_HOD7		Q94 Date of admission to hospital	94		Text		888888	NA
							999999	Not stated
Y5_HOD8		Q94 Date of admission to hospital	94		Text		888888	NA
							999999	Not stated
Y5_HOF1		Q94 Hospital Number of times	94		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
Y5_HOF2		Q94 Hospital Number of times	94		Text		8	NA
							9	Not stated
Y5_HOF3		Q94 Hospital Number of times	94		Text		8	NA
							9	Not stated
Y5_HOF4		Q94 Hospital Number of times	94		Text		8	NA
							9	Not stated
Y5_HOF5		Q94 Hospital Number of times	94		Text		8	NA
							9	Not stated
Y5_HOF6		Q94 Hospital Number of times	94		Text		8	NA
							9	Not stated
Y5_HOF7		Q94 Hospital Number of times	94		Text		8	NA
							9	Not stated
Y5_HOF8		Q94 Hospital Number of times	94		Text		8	NA
							9	Not stated
Y5_HOH1		Q94 Admitting hospital code	94		Text			Hospital Codes
							888	NA
							999	Not stated
Y5_HOH2		Q94 Admitting hospital code	94		Text			Hospital Codes
							888	NA
							999	Not stated
Y5_HOH3		Q94 Admitting hospital code	94		Text			Hospital Codes
							888	NA
							999	Not stated
Y5_HOH4		Q94 Admitting hospital code	94		Text			Hospital Codes
							888	NA
							999	Not stated
Y5_HOH5		Q94 Admitting hospital code	94		Text			Hospital Codes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							888	NA
							999	Not stated
Y5_HOH6		Q94 Admitting hospital code	94		Text			Hospital Codes
							888	NA
							999	Not stated
Y5_HOH7		Q94 Admitting hospital code	94		Text			Hospital Codes
							888	NA
							999	Not stated
Y5_HOH8		Q94 Admitting hospital code	94		Text			Hospital Codes
							888	NA
							999	Not stated
Y5_CVLN		Q95 Convulsions ever-number	95		Text		9	Not stated
							N	No
							Y	Yes, but number unspecified
Y5_OM1		Q95 Otitis media ever-number	95		Text		N	No
							Y	Yes, but number unspecified
Y5_UTI		Q95 Urinary tract inf. ever-no	95		Text		N	No
							Y	Yes, but number unspecified
Y5_OM1A		Q95 Otitis media y/n	95	1	Text		9	Not stated
							N	No
							Y	Yes
Y5_OM1B		Q95 Number of times - otitis media	95	1	Text			number ocrresponds
							88	NA
							99	Not stated
Y5_OM2		Q95 Glue ear ever	95	2	Text		N	No
							Y	Yes
Y5_CVLNA		Q95 Convulsion y/n	95	3	Text		9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_CVLNB		Q95 Number of times - convulsion	95	3	Text			number corresponds
							88	NA
							99	Not stated
Y5_UTIA		Q95 Urinary tract inf. y/n	95	4	Text		9	Not stated
							N	No
							Y	Yes
Y5_UTIB		Q95 Number of times - urine infections	95	4	Text			number corresponds
							88	NA
							99	Not stated
Y5_EYE1		Q96 Eyesight problem-ever	96		Text		9	Not stated
							N	No
							Y	Yes
Y5_EYE2		Q96 Who diagnosed eyesight prob	96		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Optometrist
							5	Naturopath
							6	Eye specialist
							7	Relative, teacher or self-diagnosed
							8	NA
							9	Not stated
Y5_EYE3		Q96 What eyesight problem-code	96		Text		8	NA
							9	Not stated
							A	Squint
							B	Short sighted

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							C	Long sighted
							D	Cataract
							E	Astigmatism
							F	Partially blind
							G	Blind
							H	Amblyopia
							I	Other - colour blind/photophobia
Y5_EYE3A	Q96	Eyesight prob - squint	96		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_EYE3B	Q96	Eyesight prob - short sighted	96		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_EYE3C	Q96	Eyesight prob - long sighted	96		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_EYE3D	Q96	Eyesight prob - cataract	96		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_EYE3E	Q96	Eyesight prob - astigmatism	96		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_EYE3F	Q96	Eyesight prob - partially blind	96		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_EYE3G		Q96 Eyesight prob - blind	96		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_EYE3H		Q96 Eyesight prob - amblyopia	96		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_EYE3I		Q96 Eyesight prob - other	96		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_EYE4		Q96 Treatment for sight prob y/n	96	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_EAR1		Q97 Hearing problem-ever	97		Text		9	Not stated
							N	No
							Y	Yes
Y5_EAR2		Q97 Who diagnosed hearing prob.	97		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Audiologist
							5	Naturopath

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							6	ENT specialist/teacher
							7	Relative or self-diagnosed
							8	NA
							9	Not stated
Y5_EAR3		Q97 What hearing problem-code	97		Text		8	NA
							9	Not stated
							A	Sensorineural hearing loss
							B	Conductive hearing loss (other than glue ear)
							C	Glue ear - middle ear effusion
							D	Other - including failed hearing test
Y5_EAR3A		Q96 Hearing prob - sensorineural hearing loss	97		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_EAR3B		Q96 Hearing prob - conductive hearing loss	97		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_EAR3C		Q96 Hearing prob - glue ear	97		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_EAR3D		Q96 Hearing prob - other	97		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_EAR4		Q97 Treatment for hearing prob	97	1	Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AT1		Q98 Attended health practitioner	98		Text		0	Now completed
							1	Still attending
							8	No Answer - not applicable (not attending this service)
							9	Not stated
							N	No
Y5_AT2		Q98 Attended physiotherapy	98		Text		0	Now completed
							1	Still attending
							8	No answer - not applicable (not attending this service)
							9	Not stated
							Y	Yes
Y5_AT3		Q98 Attended occupational therapy	98		Text		0	Now completed
							1	Still attending
							8	No answer - not applicable (not attending this service)
							9	Not stated
Y5_AT4		Q98 Attended speech therapy	98		Text		0	Now completed
							1	Still attending
							8	No answer - not applicable (not attending this service)
							9	Not stated
Y5_AT5		Q98 Attended psychologist/iatrist	98		Text		0	Now completed
							1	Still attending
							8	No answer - not applicable (not attending this service)

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
Y5_AT6		Q98 Attended chiropractor	98		Text		0	Now completed
							1	Still attending
							8	No answer - not applicable (not attending this service)
							9	Not stated
Y5_AT7		Q98 Attended alternative med spec	98		Text		0	Now completed
							1	Still attending
							2	Now completed one but still attending another
							8	No answer - not applicable (did not attend any alternative service)
							9	Not stated
Y5_RE10		Q99 Colds in last 12 mnths-number	99		Text		99	Not stated
Y5_RE1		Q100 Usually cough with colds	100		Text		9	Not stated
							N	No
							Y	Yes
Y5_RE3		Q101 Congested chest with colds	101		Text		9	Not stated
							N	No
							Y	Yes
Y5_RE40		Q102 Wheeze-ever in life	102		Text		9	Not stated
							N	No
							Y	Yes
Y5_RE32		Q103 How old first wheeze	103		Numeric			Months
							88	NA
							99	Not stated
Y5_RE33		Q104 Wheezing since 1 yr-number x	104		Text		0	None
							1	1-2

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						2	3-12
						3	More than 12
						8	NA
						9	Not stated
Y5_RE34	Q105 Wheezed in last 12 months	105		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_RE35	Q106 Wheezing last 12 mnths-no	106		Text		0	None
						1	1-2
						2	3-12
						3	More than 12
						8	NA
						9	Not stated
Y5_RE36	Q107 Wheezing disturbed sleep-no	107		Text		0	Never woken from wheezing
						1	Less than one night per week
						2	One or more nights per week
						8	NA
						9	Not stated
Y5_RE39	Q108 Wheeze limit speech y/n	108		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_RE8	Q109 Wheeze with exercise y/n	109		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_RE21	Q110 Dry cough at night y/n	110		Text		9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_RE29	Q111	Cough>week with wheeze-no	111		Numeric		88	NA
							99	Not stated
Y5_RE30	Q111	Cough>week no wheeze-no	111		Numeric		88	NA
							99	Not stated
Y5_RE4	Q111	Cough>week in last 3 yrs y/n	111		Text		9	Not stated
							N	No
							Y	Yes
Y5_AS1	Q112	Think child ever had asthma	112		Text		9	Not stated
							N	No
							Y	Yes
Y5_AS2	Q113	Child has asthma-who said	113		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Physiotherapist
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or teacher
							9	Not stated
							N	No
							Y	Yes
Y5_AS2A	Q113	Ever been told child has asthma - yesno	113		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS2B	Q113	Child has asthma-who said	113		Text		1	Paediatrician/specialist

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						2	Doctor
						3	Child health nurse/school nurse
						4	Physiotherapist
						5	Naturopath
						6	Pharmacist
						7	Relative, friend/teacher
						8	NA
						9	Not stated
Y5_AS3	Q113 Age asthma first diagnosed	113	1	Numeric		88	NA
						99	Not stated
Y5_AS4	Q114 Reliever meds regularly y/n	114		Text		9	Not stated
						N	No
						Y	Yes
Y5_AS5	Q114 Which reliever meds-reg code	114		Text		8	NA
						9	Not stated
						A	Ventolin or respolin
						B	Nuelin or theo-dur
						C	Bricanyl
						D	Atrovent
						E	Brondecon
Y5_AS5A	Q114 Asthma reliever meds regularly - ventolin or respolin	114		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_AS5B	Q114 Asthma reliever meds regularly - nuelin or theo-dur	114		Text		8	NA
						9	Not stated
						N	No
						Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_AS5C		Q114 Asthma reliever meds regularly - bricanyl	114		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS5D		Q114 Asthma reliever meds regularly - atrovent	114		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS5E		Q114 Asthma reliever meds regularly - brondecon	114		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS6		Q114 Which reliever meds-reg code	114		Text		8	NA
							9	Not stated
							A	Ventolin or respolin
							B	Nuelin or theo-dur
							C	Bricanyl
							D	Atrovent
							E	Brondecon
Y5_AS10		Q115 Reliever meds occas y/n	115		Text		9	Not stated
							N	No
							Y	Yes
Y5_AS11		Q115 Which reliever meds-occ code	115		Text		8	NA
							9	Not stated
							A	Ventolin or respolin
							B	Nuelin or theo-dur
							C	Bricanyl

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							D	Atrovent
							E	Brondecon
Y5_AS11A	Q114	Asthma reliever meds occassionally - ventolin or respolin	115		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS11B	Q114	Asthma reliever meds occassionally - nuelin or theo-dur	115		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS11C	Q114	Asthma reliever meds occassionally - bricanyl	115		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS11D	Q114	Asthma reliever meds occassionally - atrovent	115		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS11E	Q114	Asthma reliever meds occassionally - brondecon	115		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS12	Q115	Which reliever meds-occ code	115		Text		8	NA
							9	Not stated
							A	Ventolin or respolin
							B	Nuelin or theo-dur
							C	Bricanyl
							D	Atrovent

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_AS7	Q116 Preventer meds regularly y/n	116		Text		E	Brondecon
						9	Not stated
						N	No
Y5_AS8	Q116 Which preventer meds-reg code	116		Text		Y	Yes
						8	NA
						9	Not stated
						A	Intal or intal forte
						B	Becotide or aldecin
						C	Becloforte
						D	Pulmicort
						E	Serevent
						F	Prednisolone (solone)
						G	Tilade
Y5_AS8A	Q114 Asthma preventer meds regularly - intal or intal forte	116		Text		H	Decadron (dexamethazone)
						I	Flixatide
						8	NA
Y5_AS8B	Q114 Asthma preventer meds regularly - becotide or aldecin	116		Text		9	Not stated
						N	No
						Y	Yes
Y5_AS8C	Q114 Asthma preventer meds regularly - becloforte	116		Text		8	NA
						9	Not stated
						N	No
						Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_AS8D		Q114 Asthma preventer meds regularly - pulmicort	116		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS8E		Q114 Asthma preventer meds regularly - serevent	116		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS8F		Q114 Asthma preventer meds regularly - prednisolone	116		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS8G		Q114 Asthma preventer meds regularly - tilade	116		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS8H		Q114 Asthma preventer meds regularly - decadron	116		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS8I		Q114 Asthma preventer meds regularly - flixatide	116		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS9		Q116 Which preventer meds-reg code	116		Text		8	NA
							9	Not stated
							A	Intal or intal forte
							B	Becotide or aldecin

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							C	Becloforte
							D	Pulmicort
							E	Serevent
							F	Prednisolone (solone)
							G	Tilade
							H	Decadron (dexamethazone)
							I	Flixatide
Y5_AS13	Q117	Preventer meds occasionally	117		Text		9	Not stated
							N	No
							Y	Yes
Y5_AS14	Q117	Which preventer meds-occ code	117		Text		8	NA
							9	Not stated
							A	Intal or intal forte
							B	Becotide or aldecin
							C	Becloforte
							D	Pulmicort
							E	Serevent
							F	Prednisolone (solone)
							G	Tilade
							H	Decadron (dexamethazone)
							I	Flixatide
Y5_AS14A	Q114	Asthma preventor meds occassionally - intal or intal forte	117		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS14B	Q114	Asthma preventor meds occassionally - becotide or aldecin	117		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_AS14C	Q114	Asthma preventor meds occassionally - becloforte	117		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS14D	Q114	Asthma preventor meds occassionally - pulmicort	117		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS14E	Q114	Asthma preventor meds occassionally - serevent	117		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS14F	Q114	Asthma preventor meds occassionally - prednisolone	117		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS14G	Q114	Asthma preventor meds occassionally - tilade	117		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS14H	Q114	Asthma preventor meds occassionally - decadron	117		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_AS14I	Q114	Asthma preventor meds occassionally - flixatide	117		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_AS15		Q117 Which preventer meds-occcode	117		Text		8	NA
							9	Not stated
							A	Intal or intal forte
							B	Becotide or aldecin
							C	Becloforte
							D	Pulmicort
							E	Serevent
							F	Prednisolone (solone)
							G	Tilade
							H	Decadron (dexamethazone)
							I	Flixatide
Y5_PM1		Q118 Prescription med - antihistamines	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM10		Q118 Prescription med - acne cream	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM11		Q118 Prescription med - electrolytes	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM12		Q118 Prescription med - enzymes	118		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_PM13		Q118 Prescription med - hormones	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM14		Q118 Prescription med - NSAIs	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM15		Q118 Prescription med - cardiac drugs	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM2		Q118 Prescription med - antibiotics	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM24		Q118 Prescription med - steroid nasal spray	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM25		Q118 Prescription med - insulin	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM27		Q118 Prescription med - steroid eye drops	118		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_PM28	Q118	Prescription med - prescription analgesics	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM29	Q118	Prescription med - antispasmodic	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM3	Q118	Prescription med - anticonvulsant	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM30	Q118	Prescription med - sedatives	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM4	Q118	Prescription med - oral steroids	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM5	Q118	Prescription med - cytotoxic/immunosupp	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM6	Q118	Prescription med - topical corticosteroid	118		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_PM7		Q118 Prescription med - amphetamines	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM8		Q118 Prescription med - antifungal meds	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PM9		Q118 Prescription med - intestine mobility	118		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_PMD1		Q118 Prescription meds-code	118		Text		8	NA
							9	Not stated
							A	Antibiotics (prophylactic use only not acute infection)
							B	Antihistamine
							C	Anticonvulsant
							D	Oral steroid (other than those used for asthma)
							E	Electrolytes
							F	Topical corticosteroid
							G	Cytotoxic/immunosuppressive therapy
							H	Amphetamines and other psychotropic drugs (eg ritalin,

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
								clonidine, trypanol)
							I	Antifungal medication
							J	Agents affecting intestinal motility (treatment for ulcers and not laxitives)
							K	Non-steroid anti-inflammatory medication (eg naprosyn, regular aspirin)
							L	Cardiac drugs
							M	Topical (non-steroid and not antibiotics) eg acne cream
							P	Enzymes
							Q	Hormones
							R	Steroid nasal spray (eg beconase, aldecin)
							S	Insulin
							T	Steroid eye drops
							U	Prescription analgesics
							V	Antispasmodic/anticholinergic (bladder dysfunction)
							W	Sedatives (eg nitraxpan)
Y5_PMD2		Q118 Prescription meds-code	118		Text		8	NA
							9	Not stated
							A	Antibiotics (prophylactic use only not acute infection)
							B	Antihistamine
							C	Anticonvulsant
							D	Oral steroid (other than those used for asthma)
							E	Electrolytes
							F	Topical corticosteroid

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							G	Cytotoxic/immunosuppressive therapy
							H	Amphetamines and other psychotropic drugs (eg ritalin, clonidine, trypanol)
							I	Antifungal medication
							J	Agents affecting intestinal motility (treatment for ulcers and not laxitives)
							K	Non-steroid anti-inflammatory medication (eg naprosyn, regular aspirin)
							L	Cardiac drugs
							M	Topical (non-steroid and not antibiotics) eg acne cream
							P	Enzymes
							Q	Hormones
							R	Steroid nasal spray (eg beconase, aldecin)
							S	Insulin
							T	Steroid eye drops
							U	Prescription analgesics
							V	Antispasmodic/anticholinergic (bladder dysfunction)
							W	Sedatives (eg nitrazepan)
Y5_PMED	Q118	Other prescription meds y/n	118		Text		9	Not stated
							N	No
							Y	Yes
Y5_CM1	Q119	Non-prescription med - vitamins	119		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_CM10		Q119 Non-prescription med - antifungal	119		Text		8	NA
							9	Not
							N	No
							Y	Yes
Y5_CM12		Q119 Non-prescription med - antiemetic	119		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_CM13		Q119 Non-prescription med - antacid	119		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_CM15		Q119 Non-prescription med - urinary alkaliser	119		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_CM17		Q119 Non-prescription med - ventolin or respolin	119		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_CM2		Q119 Non-prescription med - analgesics/antipyr	119		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_CM3		Q119 Non-prescription med - decongestants	119		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_CM4		Q119 Non-prescription med - antihistamines	119		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_CM5		Q119 Non-prescription med - naturopathic prods	119		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_CM6		Q119 Non-prescription med - skin lotions/creams	119		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_CM7		Q119 Non-prescription med - laxitives	119		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_CM8		Q119 Non-prescription med - fluoride tablets	119		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_CM9		Q119 Non-prescription med - antispasmodics	119		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_CMD1		Q119 Non-prescription meds-code	119		Text		8	NA
							9	Not stated

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						A	Vitamins and minerals (incl fefol, iron, cod liver oil)
						B	Analgesics and antipyretics
						C	Decongestants (eg paedamin, demazin, dimetapp)
						D	Antihistamines (non-prescription)
						E	Health food products/naturopathic products
						F	Skin lotions and creams (eg sorbolene)
						G	Laxitives/stool softeners
						H	Fluoride tablets
						I	Antispasmodics
						J	Antifungal/antiparasitic
						K	Antiemetic
						L	Antacid
						M	Ventolin or respolin
						P	Urinary alkalizer (eg ural)
Y5_CMD2	Q119 Non-prescription meds-code	119		Text		8	NA
						9	Not stated
						A	Vitamins and minerals (incl fefol, iron, cod liver oil)
						B	Analgesics and antipyretics
						C	Decongestants (eg paedamin, demazin, dimetapp)
						D	Antihistamines (non-prescription)
						E	Health food products/naturopathic products
						F	Skin lotions and creams (eg sorbolene)

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							G	Laxitives/stool softeners
							H	Fluoride tablets
							I	Antispasmodics
							J	Antifungal/antiparasitic
							K	Antiemetic
							L	Antacid
							M	Ventolin or respolin
							P	Urinary alkaliser (eg ural)
Y5_CMED		Q119 Non-prescription meds y/n	119		Text		9	Not stated
							N	No
							Y	Yes
Y5_RE62		Q120 Nose problem-ever y/n	120		Text		9	Not stated
							N	No
							Y	Yes
Y5_RE11		Q121 Nose problem-last 12 mnths	121		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_RE63		Q122 Nose prob with itchy eyes	122		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_NS1		Q123 Nose problem in January	123		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_NS10		Q123 Nose problem in October	123		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_NS11		Q123 Nose problem in November	123		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_NS12		Q123 Nose problem in December	123		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_NS2		Q123 Nose problem in February	123		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_NS3		Q123 Nose problem in March	123		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_NS4		Q123 Nose problem in April	123		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_NS5		Q123 Nose problem in May	123		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_NS6		Q123 Nose problem in June	123		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_NS7		Q123 Nose problem in July	123		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_NS8		Q123 Nose problem in August	123		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_NS9		Q123 Nose problem in September	123		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_RE61		Q123 Months nose problem occurs	123		Text		0	Northern Hemisphere
							1	Southern Hemisphere
							8	NA
							9	Not stated
							A	December, January and February
							B	March, April and May
							C	June, July and August
							D	September, October and November
							E	A and B
							F	A and C
							G	A and D
							H	B and C

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							I	B and D
							J	C and D
							K	A and B and C
							L	B and C and D
							M	A and B and D
							O	A and C and D
							P	A and B and C and D
Y5_RE61A	Q123	Hemisphere of residence when nose problem occurred	123		Text		0	Northern hemisphere
							1	Southern hemisphere
							8	NA
							9	Not stated
Y5_RE64	Q124	Nose prob interfere y/n	124		Text		0	Not at all
							1	A little
							2	A moderate amount
							3	A lot
							9	Not stated
Y5_RE41	Q125	Think child ever hayfever	125		Text		9	Not stated
							N	No
							Y	Yes
Y5_RE24	Q126	Child has hayfever-who said	126		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or teacher
							8	NA
							9	Not stated
Y5_RE24A	Q126	Child has hayfever y/n	126		Text			

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_RE24B		Q126 Child has hayfever-who said	126		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							5	Naturopath
							6	Pharmacist
							7	Relative, friend/teacher
							8	NA
							9	Not stated
Y5_RE42		Q126 Age hayfever first diagnosed	126	1	Numeric			months
							88	NA
							99	Not stated
Y5_RH1		Q127 Itchy rash-ever	127		Text		9	Not stated
							N	No
							Y	Yes
Y5_RH2		Q128 Itchy rash-last12 mnths	128		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_RH3		Q129 Itchy rash skinfolds y/n	129		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_RH4		Q130 How old first itchy rash	130		Text		0	Under 2 years
							1	Age 2-4 years

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							2	Age 5 or more
							8	NA
							9	Not stated
Y5_RH5		Q131 Rash cleared in last 6 mnths	131		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_RH6		Q132 Rash kept awake at night	132		Text		0	Never in the last 12 months
							1	Less than one night per week
							2	One or more nights per week
							8	NA
							9	Not stated
Y5_RH7		Q133 Think child ever had eczema	133		Text		9	Not stated
							N	No
							Y	Yes
Y5_RH8		Q134 Child has eczema-who said	134		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or teacher
							8	NA
							9	Not stated
Y5_RH8A		Q134 Child has eczema	134		Text		9	Not stated
							N	No
							Y	Yes
Y5_RH8B		Q134 Child has eczema-who said	134		Text		1	Paediatrician/specialist
							2	Doctor

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							3	Child health nurse/school nurse
							5	Naturopath
							6	Pharmacist
							7	Relative, friend/teacher
							8	NA
							9	Not stated
Y5_RH10	Q134	Age eczema first diagnosed	134	1	Numeric			months
							88	NA
							99	Not stated
Y5_RE17	Q135	Snores at night y/n	135		Text		9	Not stated
							N	No
							Y	Yes
Y5_K10A	Q136	Child allergic to - moulds	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K10B	Q136	Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K10C	Q136	Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K10D	Q136	Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K10E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K10F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K10G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K10H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K10I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K10J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K10K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K10L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K10M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K10N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K10O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K10P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K11A		Q136 Child allergic to - cat fur	136		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_K11B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K11C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K11D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K11E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K11F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K11G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K11H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K11I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K11J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K11K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K11L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K11M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K11N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_K11O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
Y5_K11P		Q136 What reaction - cardiac	136		Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_K12A		Q136 Child allergic to - animal fur	136		Text		Y	Yes
							8	NA
							9	Not stated
							N	No
Y5_K12B		Q136 Age first allergy occurred	136		Numeric		Y	Yes
								number corresponds
							88	NA
							99	Not stated
Y5_K12C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K12D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K12E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K12F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K12G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K12H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K12I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K12J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K12K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_K12L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K12M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K12N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K12O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K12P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K13A		Q136 Child allergic to - multiple drug allergies	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K13B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K13C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K13D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K13E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K13F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K13G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K13H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_K13I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K13J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K13K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K13L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K13M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K13N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K13O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_K13P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K14A		Q136 Child allergic to - multiple allergies	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K14B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K14C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K14D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K14E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_K14F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K14G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K14H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K14I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K14J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K14K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K14L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_K14M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
Y5_K14N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
Y5_K14O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
Y5_K14P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
Y5_K15A		Q136 Child allergic to - soap/detergent	136		Text		8	NA
							9	Not stated
							N	No
Y5_K15B		Q136 Age first allergy occurred	136		Numeric		Y	Yes
							88	NA
							99	Not stated
Y5_K15C		Q136 Age allergy stopped	136		Numeric		Y	Yes
							88	NA
							99	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K15D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K15E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K15F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K15G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K15H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K15I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_K15J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K15K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K15L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K15M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K15N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K15O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K15P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_K16A		Q136 Child allergic to - insect bites	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K16B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K16C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K16D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K16E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K16F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_K16G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
Y5_K16H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
Y5_K16I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
Y5_K16J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
Y5_K16K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
Y5_K16L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
Y5_K16M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_K16N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K16O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K16P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K17A		Q136 Child allergic to - other contact allergies	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K17B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K17C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K17D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K17E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K17F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K17G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K17H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K17I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K17J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_K17K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K17L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K17M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K17N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K17O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K17P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K18A		Q136 Child allergic to - antibiotics	136		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_K18B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K18C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K18D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K18E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K18F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K18G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_K18H	Q136	What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K18I	Q136	What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K18J	Q136	What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K18K	Q136	What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K18L	Q136	What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K18M	Q136	What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K18N	Q136	What reaction - behavioural	136		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_K18O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K18P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K19A		Q136 Child allergic to - other drugs	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K19B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K19C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K19D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							8	NA
							9	Not stated
Y5_K19E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K19F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K19G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K19H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K19I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K19J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K19K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_K19L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K19M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K19N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K19O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K19P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K1A		Q136 Child allergic to - cows milk	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K1B		Q136 Age first allergy occurred	136		Numeric			number corresponds

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						88	NA
						99	Not stated
Y5_K1C	Q136 Age allergy stopped	136		Numeric			number corresponds
						88	NA
						99	Not stated
Y5_K1D	Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
						2	Doctor
						3	Child health nurse/school nurse
						4	Dietician
						5	Naturopath
						6	Pharmacist
						7	Relative, friend or self diagnosed
						8	NA
						9	Not stated
Y5_K1E	Q136 What reaction - upper respiratory	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K1F	Q136 What reaction - lower respiratory	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K1G	Q136 What reaction - skin	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K1H	Q136 What reaction - gastrointestinal	136		Text		8	NA
						9	Not stated

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						N	No
						Y	Yes
Y5_K1I	Q136 What reaction - neurological	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K1J	Q136 What reaction - excessive mucus prod	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K1K	Q136 What reaction - oedema	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K1L	Q136 What reaction - anaphylaxis	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K1M	Q136 What reaction - lymphatic related	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K1N	Q136 What reaction - behavioural	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K1O	Q136 What reaction - musculoskeletal	136		Text		8	NA

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						9	Not stated
						N	No
						Y	Yes
Y5_K1P	Q136 What reaction - cardiac	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K20A	Q136 Child allergic to - hayfever	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K20B	Q136 Age first allergy occurred	136		Numeric			number corresponds
						88	NA
						99	Not stated
Y5_K20C	Q136 Age allergy stopped	136		Numeric			number corresponds
						88	NA
						99	Not stated
Y5_K20D	Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
						2	Doctor
						3	Child health nurse/school nurse
						4	Dietician
						5	Naturopath
						6	Pharmacist
						7	Relative, friend or self diagnosed
						8	NA
						9	Not stated
Y5_K20E	Q136 What reaction - upper respiratory	136		Text		8	NA
						9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							N	No
							Y	Yes
Y5_K20F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K20G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K20H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K20I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K20J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K20K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K20L		Q136 What reaction - anaphylaxis	136		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_K20M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K20N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K20O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K20P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K21A		Q136 Child allergic to - other resp allergies	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K21B		Q136 Age first allergy occurred	136		Numeric			number correspond
							88	NA
							99	Not stated
Y5_K21C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							99	Not stated
Y5_K21D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K21E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K21F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K21G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K21H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K21I		Q136 What reaction - neurological	136		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_K21J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K21K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K21L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K21M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K21N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K21O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K21P		Q136 What reaction - cardiac	136		Text		8	NA

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
							N	No
							Y	Yes
Y5_K2A		Q136 Child allergic to - soy products	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K2B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K2C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K2D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K2E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K2F		Q136 What reaction - lower respiratory	136		Text		8	NA

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						9	Not stated
						N	No
						Y	Yes
Y5_K2G	Q136 What reaction - skin	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K2H	Q136 What reaction - gastrointestinal	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K2I	Q136 What reaction - neurological	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K2J	Q136 What reaction - excessive mucus prod	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K2K	Q136 What reaction - oedema	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K2L	Q136 What reaction - anaphylaxis	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K2M	Q136 What reaction - lymphatic related	136		Text		8	NA

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						9	Not stated
						N	No
						Y	Yes
Y5_K2N	Q136 What reaction - behavioural	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K2O	Q136 What reaction - musculoskeletal	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K2P	Q136 What reaction - cardiac	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K3A	Q136 Child allergic to - eggs	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K3B	Q136 Age first allergy occurred	136		Numeric			number corresponds
						88	NA
						99	Not stated
Y5_K3C	Q136 Age allergy stopped	136		Numeric			number corresponds
						88	NA
						99	Not stated
Y5_K3D	Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
						2	Doctor

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						3	Child health nurse/school nurse
						4	Dietician
						5	Naturopath
						6	Pharmacist
						7	Relative, friend or self diagnosed
						8	NA
						9	Not stated
Y5_K3E	Q136 What reaction - upper respiratory	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K3F	Q136 What reaction - lower respiratory	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K3G	Q136 What reaction - skin	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K3H	Q136 What reaction - gastrointestinal	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K3I	Q136 What reaction - neurological	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K3J	Q136 What reaction - excessive mucus prod	136		Text		8	NA

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						9	Not stated
						N	No
						Y	Yes
Y5_K3K	Q136 What reaction - oedema	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K3L	Q136 What reaction - anaphylaxis	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K3M	Q136 What reaction - lymphatic related	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K3N	Q136 What reaction - behavioural	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K3O	Q136 What reaction - musculoskeletal	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K3P	Q136 What reaction - cardiac	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K4A		Q136 Child allergic to - peanuts/peanut prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K4B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K4C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K4D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K4E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K4F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K4G		Q136 What reaction - skin	136		Text		8	NA

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						9	Not stated
						N	No
						Y	Yes
Y5_K4H	Q136 What reaction - gastrointestinal	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K4I	Q136 What reaction - neurological	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K4J	Q136 What reaction - excessive mucus prod	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K4K	Q136 What reaction - oedema	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K4L	Q136 What reaction - anaphylaxis	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K4M	Q136 What reaction - lymphatic related	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K4N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K4O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K4P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K5A		Q136 Child allergic to - other foods	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K5B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K5C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K5D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						7	Relative, friend or self diagnosed
						8	NA
						9	Not stated
Y5_K5E	Q136 What reaction - upper respiratory	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K5F	Q136 What reaction - lower respiratory	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K5G	Q136 What reaction - skin	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K5H	Q136 What reaction - gastrointestinal	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K5I	Q136 What reaction - neurological	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K5J	Q136 What reaction - excessive mucus prod	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K5K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K5L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K5M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K5N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K5O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K5P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K6A		Q136 Child allergic to - additives/col/pres	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K6B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K6C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K6D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K6E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K6F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K6G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K6H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K6I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K6J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K6K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K6L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K6M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K6N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K6O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K6P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K7A		Q136 Child allergic to - multiple food allergies	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K7B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K7C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K7D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K7E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K7F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K7G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K7H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K7I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K7J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K7K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K7L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K7M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K7N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K7O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K7P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K8A		Q136 Child allergic to - house dust mite	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K8B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K8C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K8D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K8E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K8F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K8G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K8H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K8I	Q136 What reaction - neurological	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K8J	Q136 What reaction - excessive mucus prod	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K8K	Q136 What reaction - oedema	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K8L	Q136 What reaction - anaphylaxis	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K8M	Q136 What reaction - lymphatic related	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K8N	Q136 What reaction - behavioural	136		Text		8	NA
						9	Not stated
						N	No
						Y	Yes
Y5_K8O	Q136 What reaction - musculoskeletal	136		Text		8	NA
						9	Not stated
						N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_K8P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K9A		Q136 Child allergic to - pollens	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K9B		Q136 Age first allergy occurred	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K9C		Q136 Age allergy stopped	136		Numeric			number corresponds
							88	NA
							99	Not stated
Y5_K9D		Q136 Who told you about allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed
							8	NA
							9	Not stated
Y5_K9E		Q136 What reaction - upper respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_K9F		Q136 What reaction - lower respiratory	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K9G		Q136 What reaction - skin	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K9H		Q136 What reaction - gastrointestinal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K9I		Q136 What reaction - neurological	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K9J		Q136 What reaction - excessive mucus prod	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K9K		Q136 What reaction - oedema	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K9L		Q136 What reaction - anaphylaxis	136		Text		8	NA
							9	Not stated
							N	No

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							Y	Yes
Y5_K9M		Q136 What reaction - lymphatic related	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K9N		Q136 What reaction - behavioural	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K9O		Q136 What reaction - musculoskeletal	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_K9P		Q136 What reaction - cardiac	136		Text		8	NA
							9	Not stated
							N	No
							Y	Yes
Y5_RE18		Q136 Child allergies yes/no	136		Text		9	Not stated
							N	No
							Y	Yes
Y5_RE19		Q136 Who told child has allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed/teacher

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						8	NA
						9	Not stated
Y5_RE20	Q136 Child allergic to what	136		Text		8	NA
						9	Not stated
						A	Cows milk
						B	Soy products
						C	Eggs
						D	Peanuts/peanut products
						E	Other foods
						F	Food additives/preservatives/colouring
						G	Multiple food allergies
						H	House dust mite
						I	Pollens (grass, tree or flowers)
						J	Moulds
						K	Cat fur
						L	Animal fur (other than cat)
						M	Multiple respiratory allergies (any combination of H, I, J, K and L)
						P	Multiple drug allergies
						Q	Multiple allergies of all systems
						R	Soaps/detergents
						S	Insect bites
						T	Other contact allergies
						U	Antibiotics
						V	Other drugs (eg immunisations)
						W	Hayfever - allergen not specified
						X	Other respiratory allergies

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
								(perfume/brick dust)
Y5_RE43	Q136	Who told child has allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed/teacher
							8	NA
							9	Not stated
Y5_RE44	Q136	Who told child has allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed/teacher
							8	NA
							9	Not stated
Y5_RE45	Q136	Who told child has allergy	136		Text		1	Paediatrician/specialist
							2	Doctor
							3	Child health nurse/school nurse
							4	Dietician
							5	Naturopath
							6	Pharmacist
							7	Relative, friend or self diagnosed/teacher

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						8	NA
						9	Not stated
Y5_RE46	Q136 Child allergic to what	136		Text		8	NA
						9	Not stated
						A	Cows milk
						B	Soy products
						C	Eggs
						D	Peanuts/peanut products
						E	Other foods
						F	Food additives/preservatives/colouring
						G	Multiple food allergies
						H	House dust mite
						I	Pollens (grass, tree or flowers)
						J	Moulds
						K	Cat fur
						L	Animal fur (other than cat)
						M	Multiple respiratory allergies (any combination of H, I, J, K and L)
						P	Multiple drug allergies
						Q	Multiple allergies of all systems
						R	Soaps/detergents
						S	Insect bites
						T	Other contact allergies
						U	Antibiotics
						V	Other drugs (eg immunisations)
						W	Hayfever - allergen not specified
						X	Other respiratory allergies

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							(perfume/brick dust)
Y5_RE47	Q136 Child allergic to what	136		Text		8	NA
						9	Not stated
						A	Cows milk
						B	Soy products
						C	Eggs
						D	Peanuts/peanut products
						E	Other foods
						F	Food additives/preservatives/colouring
						G	Multiple food allergies
						H	House dust mite
						I	Pollens (grass, tree or flowers)
						J	Moulds
						K	Cat fur
						L	Animal fur (other than cat)
						M	Multiple respiratory allergies (any combination of H, I, J, K and L)
						P	Multiple drug allergies
						Q	Multiple allergies of all systems
						R	Soaps/detergents
						S	Insect bites
						T	Other contact allergies
						U	Antibiotics
						V	Other drugs (eg immunisations)
						W	Hayfever - allergen not specified)
						X	Other respiratory allergies (perfume/brick dust)

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_RE48	Q136	Child allergic to what	136		Text		8	NA
							9	Not stated
							A	Cows milk
							B	Soy products
							C	Eggs
							D	Peanuts/peanut products
							E	Other foods
							F	Food additives/preservatives/colouring
							G	Multiple food allergies
							H	House dust mite
							I	Pollens (grass, tree or flowers)
							J	Moulds
							K	Cat fur
							L	Animal fur (other than cat)
							M	Multiple respiratory allergies (any combination of H, I, J, K and L)
							P	Multiple drug allergies
							Q	Multiple allergies of all systems
							R	Soaps/detergents
							S	Insect bites
							T	Other contact allergies
U	Antibiotics							
V	Other drugs (eg immunisations)							
W	Hayfever - allergen not specified							
X	Other respiratory allergies (perfume/brick dust)							
Y5_RE49	Q136	What reaction did child have	136		Text		8	NA

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						9	Not stated
						A	Upper respiratory
						B	Lower respiratory
						C	Skin
						D	Gastrointestinal
						E	Neurological
						F	Excessive mucus production
						G	Oedema - generalised/throat swelling
						H	Anaphylaxis
						I	Lymphatic related
						J	Behavioural
						K	Musculoskeletal
						L	Cardiac
Y5_RE50	Q136 What reaction did child have	136		Text		8	NA
						9	Not stated
						A	Upper respiratory
						B	Lower respiratory
						C	Skin
						D	Gastrointestinal
						E	Neurological
						F	Excessive mucus production
						G	Oedema - generalised/throat swelling
						H	Anaphylaxis
						I	Lymphatic related
						J	Behavioural
						K	Musculoskeletal

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_RE51		Q136 What reaction did child have	136		Text		L	Cardiac
							8	NA
							9	Not stated
							A	Upper respiratory
							B	Lower respiratory
							C	Skin
							D	Gastrointestinal
							E	Neurological
							F	Excessive mucus production
							G	Oedema - generalised/throat swelling
							H	Anaphylaxis
							I	Lymphatic related
							Y5_RE52	
8	NA							
9	Not stated							
A	Upper respiratory							
B	Lower respiratory							
C	Skin							
D	Gastrointestinal							
E	Neurological							
F	Excessive mucus production							
G	Oedema - generalised/throat swelling							
H	Anaphylaxis							
I	Lymphatic related							

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							J	Behavioural
							K	Musculoskeletal
							L	Cardiac
Y5_RE53		Q136 Child age first occurred	136		Numeric			months
							88	NA
							99	Not stated
Y5_RE54		Q136 Child age first occurred	136		Numeric			months
							88	NA
							99	Not stated
Y5_RE55		Q136 Child age first occurred	136		Numeric			months
							88	NA
							99	Not stated
Y5_RE56		Q136 Child age first occurred	136		Numeric			months
							88	NA
							99	Not stated
Y5_RE57		Q136 Child age stopped	136		Text			months
							88	NA
							97	Hasnt stopped
							99	Not stated
Y5_RE58		Q136 Child age stopped	136		Text			months
							88	NA
							97	Hasnt stopped
							99	Not stated
Y5_RE59		Q136 Child age stopped	136		Text			months
							88	NA
							97	Hasnt stopped
							99	Not stated
Y5_RE60		Q136 Child age stopped	136		Text			months

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						88	NA
						97	Hasnt stopped
						99	Not stated
Y5_AT9	Q137 Seen paediatrician since 3	137		Text		9	Not stated
						N	No
						Y	Yes
Y5_AT8	Q138 Seen GP since 3	138		Text		9	Not stated
						N	No
						Y	Yes
Y5_AT10	Q139 Been to clinic since 3	139		Text		9	Not stated
						N	No
						Y	Yes
Y5_WOR	Q140 Worried about child y/n	140		Text		9	Not stated
						N	No
						Y	Yes
Y5_WOR1	Q140 Worried about child-codes	140		Text		8	NA
						9	Not stated
						A	Health problem
						B	Speech/language development
						C	Physical development
						D	Emotuonal development/behaviour
						E	Nutrition
						F	Intellectual development
						G	Hearing problem
						H	Vision problem
						I	Other
						J	Delayed fine motor

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							K	Gross motor delay (clumsiness)
							L	Sleep problems
							M	Abuse (sexual or otherwise)
Y5_MANA	Q141	How difficult to manage	141		Text		0	Much easier than average
							1	A little easier than average
							2	Average
							3	A little more difficult than average
							4	Much more difficult
							9	Not stated
Y5_FA2A		Family assessment device-feel	142		Text		0	Never
							1	Sometimes
							2	Always
							9	Not stated
Y5_FA2B		Family assessment device-feel	142		Text		0	Never
							1	Sometimes
							2	Always
							9	Not stated
Y5_FA2C		Family assessment device-feel	142		Text		0	Never
							1	Sometimes
							2	Always
							9	Not stated
Y5_FA2D		Family assessment device-feel	142		Text		0	Never
							1	Sometimes
							2	Always
							9	Not stated
Y5_FA2E		Family assessment device-feel	142		Text		0	Never
							1	Sometimes

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							2	Always
							9	Not stated
Y5_FA2F		Family assessment device-feel	142		Text		0	Never
							1	Sometimes
							2	Always
							9	Not stated
Y5_FA2G		Family assessment device-feel	142		Text		0	Never
							1	Sometimes
							2	Always
							9	Not stated
Y5_FA2H		Family assessment device-feel	142		Text		0	Never
							1	Sometimes
							2	Always
							9	Not stated
Y5_FA2I		Family assessment device-feel	142		Text		0	Never
							1	Sometimes
							2	Always
							9	Not stated
Y5_FA2J		Family assessment device-feel	142		Text		0	Never
							1	Sometimes
							2	Always
							9	Not stated
Y5_FA3		Fam assess device-you happy	142		Text		1	Very happy
							2	Reasonably happy
							3	Not too happy
							9	Not stated
Y5_FA4		Fam assess device-partner happy	142		Text		1	Very happy
							2	Reasonably happy

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							3	Not too happy
							4	No spouse/partner
							9	Not stated
Y5_OALL		Q142 child's overall health	142		Text		0	Excellent (nearly always well)
							1	OK, could be better (mostly well)
							2	So-so (is ill as often as is well)
							3	Poor (seldom well)
							9	Not stated
Y5_FA1A		Family assessment device-relate	142	1	Text		1	Strongly agree
							2	Agree
							3	Disagree
							4	Strongly disagree
							9	Not stated
Y5_FA1B		Family assessment device-relate	142	2	Text		1	Strongly agree
							2	Agree
							3	Disagree
							4	Strongly disagree
							9	Not stated
Y5_FA1C		Family assessment device-relate	142	3	Text		1	Strongly agree
							2	Agree
							3	Disagree
							4	Strongly disagree
							9	Not stated
Y5_FA1D		Family assessment device-relate	142	4	Text		1	Strongly agree
							2	Agree
							3	Disagree
							4	Strongly disagree

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
Y5_FA1E		Family assessment device-relate	142	5	Text		1	Strongly agree
							2	Agree
							3	Disagree
							4	Strongly disagree
							9	Not stated
Y5_FA1F		Family assessment device-relate	142	6	Text		1	Strongly agree
							2	Agree
							3	Disagree
							4	Strongly disagree
							9	Not stated
Y5_FA1G		Family assessment device-relate	142	7	Text		1	Strongly agree
							2	Agree
							3	Disagree
							4	Strongly disagree
							9	Not stated
Y5_FA1H		Family assessment device-relate	142	8	Text		1	Strongly agree
							2	Agree
							3	Disagree
							4	Strongly disagree
							9	Not stated
Y5_FA1I		Family assessment device-relate	142	9	Text		1	Strongly agree
							2	Agree
							3	Disagree
							4	Strongly disagree
							9	Not stated
Y5_FA1J		Family assessment device-relate	142	10	Text		1	Strongly agree
							2	Agree

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							3	Disagree
							4	Strongly disagree
							9	Not stated
Y5_FA1K		Family assessment device-relate	142	11	Text		1	Strongly agree
							2	Agree
							3	Disagree
							4	Strongly disagree
							9	Not stated
Y5_FAIL		Family assessment device-relate	142	12	Text		1	Strongly agree
							2	Agree
							3	Disagree
							4	Strongly disagree
							9	Not stated
Y5_FA1M		Family assessment device-relate	142	13	Text		1	Strongly agree
							2	Agree
							3	Disagree
							4	Strongly disagree
							9	Not stated
Y5_DNBY		Q143 Quest completed by	143		Text		0	Mother
							1	Father
							2	Mother and father together
							3	Grandparent(s)
							4	Other (eg foster mother, stepfather)
							9	Not stated
Y5_DNWN		Q144 Quest completion date	144		Text		999999	Not stated
Y5_VAL3		Q144 Date quest completed	144		Text		1	Date completed
							2	Date questionnaire returned

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							3	No date
							9	Not stated
Y5_QCO1		Q145 Comments quest/research	145		Text		0	Neither positive nor negative comments
							1	Generally positive comments
							2	Generally negative comments
							N	No
							Y	Yes
Y5_C2		CBCL Acts too young	171	1	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
Y5_C103		CBCL Allergy	172	2	Text		9	Not stated
							0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
Y5_C104		CBCL Argues alot	173	3	Text		9	Not stated
							0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
Y5_C105		CBCL Asthma	174	4	Text		9	Not stated
							0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
Y5_C106		CBCL Behaves like opposite sex	175	5	Text		9	Not stated
							0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_C107		CBCL Bowels outside toilet	176	6	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C108		CBCL Bragging	177	7	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C5		CBCL Cant concerntrate	178	8	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C109		CBCL Obsessions	179	9	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C6		CBCL Restless, hyperactive	180	10	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C10		CBCL Too dependent	181	11	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C110		CBCL Lonely	182	12	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_C111		CBCL Confused	183	13	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C13		CBCL Cries a lot	184	14	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C14		CBCL Cruel to animals	185	15	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C112		CBCL Cruel, bully	186	16	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C113		CBCL Day dreams	187	17	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C114		CBCL Deliberate harm	188	18	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C96		CBCL Demands attention	189	19	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						9	Not stated
Y5_C17	CBCL Destroys own things	190	20	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C18	CBCL Destroys others things	191	21	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C20	CBCL Disobedient at home	192	22	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C115	CBCL Disobedient at school	193	23	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C24	CBCL Doesnt eat well	194	24	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C25	CBCL Doesnt get along	195	25	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C27	CBCL Doesnt feel guilty	196	26	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
Y5_C30		CBCL Easily jealous	197	27	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C31		CBCL Eats or drinks pica	198	28	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C32		CBCL Fears animals, situations	199	29	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C116		CBCL Fears going to school	200	30	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C117		CBCL Fears might do bad	201	31	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C118		CBCL Fears has to be perfect	202	32	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C119		CBCL Feels unloved	203	33	Text		0	Not true
							1	Somewhat or sometimes true

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							2	Very true or often true
							9	Not stated
Y5_C120		CBCL Feels others out to get	204	34	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C121		CBCL Feels worthless	205	35	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C34		CBCL Accident prone	206	36	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C35		CBCL Gets in fights	207	37	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C122		CBCL Gets teased a lot	208	38	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C123		CBCL Hangs out with trouble	209	39	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C124		CBCL Hears voices not there	210	40	Text		0	Not true
							1	Somewhat or sometimes true

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							2	Very true or often true
							9	Not stated
Y5_C125		CBCL Impulsive	211	41	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C126		CBCL Loner	212	42	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C127		CBCL Lying or cheating	213	43	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C128		CBCL Bites fingernails	214	44	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C46		CBCL Nervous movements	215	46	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C48		CBCL Nightmares	216	47	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C129		CBCL Not liked by other kids	217	48	Text		0	Not true

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C12		CBCL Constipated	218	49	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C87		CBCL Too fearful or anxious	219	50	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C130		CBCL Feels dizzy	220	51	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C131		CBCL Feels too guilty	221	52	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C49		CBCL Overeating	222	53	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C50		CBCL Overtired	223	54	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C51		CBCL Overweight	224	55	Text		0	Not true

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C1	CBCL No cause aches/pains	225	56	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C39	CBCL No cause headaches	226	56	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C45	CBCL No cause nausea	227	56	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C57	CBCL No cause eye problems	228	56	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C60	CBCL No cause skin problems	229	56	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C78	CBCL No cause stomachaches	230	56	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_C93		CBCL No cause vomiting	231	56	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C161		CBCL No cause other symptoms	232	56	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C53		CBCL Attacks people	233	57	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C54		CBCL Picks nose, etc	234	58	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C132		CBCL Plays sex parts in public	235	59	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C55		CBCL Plays sex parts too much	236	60	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C133		CBCL Poor school work	237	61	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_C56		CBCL Poorly coordinated	238	62	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C134		CBCL Likes older kids	239	63	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C135		CBCL Likes younger kids	240	64	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C136		CBCL Refuses to talk	241	65	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C137		CBCL Compulsive behaviour	242	66	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C95		CBCL Runs away from home	243	67	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C66		CBCL Screams a lot	244	68	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
Y5_C138		CBCL Secretive	245	69	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C139		CBCL Sees things not there	246	70	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C68		CBCL Self-conscious	247	71	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C140		CBCL Sets fires	248	72	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C141		CBCL Sexual problems	249	73	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C142		CBCL Showing off	250	74	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C143		CBCL Sleeps more than most	251	77	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							9	Not stated
Y5_C73		CBCL Shy or timid	252	75	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C74		CBCL Sleeps more than most	253	77	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C75		CBCL Plays with bowel motions	254	78	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C76		CBCL Speech problem	255	79	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C77		CBCL Stares blankly	256	80	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C144		CBCL Steals at home	257	81	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C145		CBCL Steals outside home	258	82	Text		0	Not true
							1	Somewhat or sometimes true

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							2	Very true or often true
							9	Not stated
Y5_C79	CBCL	Stores things up	259	83	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C80	CBCL	Strange behaviour	260	84	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C146	CBCL	Strange ideas	261	85	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C81	CBCL	Stubborn, sullen	262	86	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C82	CBCL	Sudden change in mood	263	87	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C83	CBCL	Sulks a lot	264	88	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C147	CBCL	Suspicious	265	89	Text		0	Not true
							1	Somewhat or sometimes true

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							2	Very true or often true
							9	Not stated
Y5_C148		CBCL Obscene language	266	90	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C149		CBCL Talks about killing self	267	91	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C84		CBCL Talks/walks in sleep	268	92	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C150		CBCL Talks too much	269	93	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C151		CBCL Teases a lot	270	94	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C85		CBCL Temper tantrums	271	95	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C152		CBCL Thinks sex too much	272	96	Text		0	Not true

Variable	Name VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C153	CBCL Threatens people	273	97	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C154	CBCL Thumb-sucking	274	98	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C86	CBCL Overly neat/clean	275	99	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C38	CBCL Trouble sleeping	278	100	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C155	CBCL Skips school	279	101	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C89	CBCL Lacks energy/slow	280	102	Text		0	Not true
						1	Somewhat or sometimes true
						2	Very true or often true
						9	Not stated
Y5_C90	CBCL Unhappy/depressed	281	103	Text		0	Not true

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C91	CBCL	Unusually loud	282	104	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C156	CBCL	Uses alcohol or drugs	283	105	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C157	CBCL	Vandalism	284	106	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C158	CBCL	Wets self during day	285	107	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C159	CBCL	Wets the bed	286	108	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C97	CBCL	Whining	287	109	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
Y5_C160		CBCL Wants to be other sex	288	110	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C98		CBCL Withdrawn	289	111	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C99		CBCL Worrying	290	112	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C100		CBCL Any other problems	291	113	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C101		CBCL Any other problems 2	292	114	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C102		CBCL Any other problems 3	293	115	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated
Y5_C47		CBCL Nervous or tense	294	45	Text		0	Not true
							1	Somewhat or sometimes true
							2	Very true or often true
							9	Not stated

Variable	Name	VariableLabel	QNum	QPartNum	Datatype	Repeat	Value	Value Label
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