

Mott Poll Questions



Well-Child Visits

The following questions were answered by parents with children age 1-12 years old.

Q1. In the past 2 years, did your [x]-year-old child have any of the following health care visits or interactions? The visit might have happened at a doctor’s office, hospital, walk-in or urgent care clinic, health department, or other location.

1. Well-child visit or check-up
2. “Sick visit” for minor illness or injury
3. Vaccination visit – only to get a vaccine
4. Sports or camp physical (not a full check-up)
5. None of the above

Q2. How often does your [x]-year-old child see the same provider for well-child visits?

1. Always sees the same provider
2. Usually sees the same provider
3. Does not usually see the same provider
4. N/A – child has not ever had well-child visits

[If Q2 = 1, 2 or 3]

Q3. How much do you agree with the following?

	Strongly agree	Somewhat agree	Disagree
a. My child is more likely to follow advice if it comes from a provider he/she knows well.			
b. I schedule well-child visits with my child’s regular provider even if we have a long wait for an appointment.			

[If Q2 = 1, 2 or 3]

Q4. How often do you do the following in advance of a well-child visit?

	Often	Sometimes	Never
a. Write down information about my child (e.g., changes in some aspect of health frequency of something)			
b. Prepare a list of questions to ask the provider.			
c. Arrange for a family member/friend to attend with you for support.			
d. Search online for diagnosis or treatment options to discuss with the provider			

[If Q2 = 1,2 or 3]

Q5. How often do you do the following to prepare your [x]-year-old child for an upcoming well-child visit?

	Often	Sometimes	Never
a. Ask your child to think about any questions or concerns for the provider.			
b. Address any fears the child has about going to the doctor.			
c. Offer rewards for your child's cooperation during the visit.			

Q6. Parents often are asked to complete questionnaires or checklists for well-child visits. Have you ever completed questionnaires or checklists about your [x]-year-old child for a well-child visit?

1. Yes
2. No

[If Q6 = yes]

Q7. How much do you agree with the following statements about these questionnaires or checklists?

	Agree	Unsure	Disagree
a. I understand the purpose of these questionnaires.			
b. I receive feedback about how my child is doing based on the information I have provided.			

[If Q2 = 1, 2 or 3]

Q8. Think about the most recent well-child visit you attended with you [x]-year-old child. Please rate the provider for that visit on the following:

	Excellent	Very good	Adequate
a. Knowing my child's health history.			
b. Answering all my questions.			
c. Giving recommendations that are realistic for my child and our family.			

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Co-Director: Sarah J. Clark, MPH
Co-Director: Susan J. Woolford, MD, MPH
Contributing Editor: Gary L. Freed, MD, MPH
Poll Manager: Dianne C. Singer, MPH
Data Analyst: Acham Gebremariam, MS
Publication Designer: Sara L. Schultz, MPS
Contact: <https://MottPoll.org>
Twitter: @CSMottPoll