

FORM 1 THE HOUSEHOLD PROFILE<sup>1,6</sup>

**Form 1**

1. Date of Visit(mm/dd/yy):		□□-□□-□□									
2. Name of Respondent: (Last name, first name, mother's maiden name)											
3. NHTS Household ID Number:		□□□□□□□□-□□□□-□□□□□□									
4. Name (Last name, first name, mother's maiden name)	5. Relationship to Household head	6. Sex	7. Age <sup>2</sup>	8. Birthday	9. For women 15-49 years old <sup>3,4</sup>			10. For 10 years old and above <sup>4,5</sup>	11. For members 21 years old and above		12. Schedule of Interview
					9a. Is currently pregnant?	Currently not pregnant			11a. Is _____ enrolled in PhilHealth? If Yes, write 'YES' and go to Question 11b. If No, write 'NO' and orient the member using Section II: "The Family is not enrolled in PhilHealth"	11b. What is _____'s PhilHealth ID number? Write the <b>complete</b> and <b>correct PhilHealth ID number</b> and proceed to Section I: "The Family is PhilHealth-enrolled" of the Family Guide to PhilHealth: Benefits, Availment and Responsibilities (page 4)	
<i>Please provide the names of the members of the household starting from the household head followed by spouse, son/daughter (eldest to youngest), and other members of the household.<sup>7</sup></i>	What is _____'s relationship to the household head? - Head - Spouse - Son/Daughter - Others (please specify relation i.e. grandson, first cousin, etc)	Is _____ male or female?  Write 'M' for Male; 'F' for Female	For <b>0-28 days</b> , use <b>Form 2A</b> . For <b>29 days-less than 12 months</b> , use <b>Form 2B</b> . For <b>12 months - less than 5 years</b> , use <b>Form 2C</b>	(mm/dd/yy)	_____ currently pregnant? If <b>Yes</b> , write 'YES' and use <b>Form 2D</b> . If <b>No</b> , write 'NO' and go to question 9b.	9b. Gave birth less than 6 weeks (42 days) ago? If <b>Yes</b> , write 'YES' and use <b>Forms 2E &amp; 2F</b> . If <b>No</b> , write 'NO' and go to question 9c.	9c. Gave birth more than 6 weeks (43 days or more) ago / never been pregnant? If <b>Yes</b> , write 'YES' and use <b>Form 2F</b> . If <b>No</b> , write 'NO' and go to question 10	Is _____ coughing for 2 weeks or more? If <b>Yes</b> , write 'YES' and use <b>Form 2G</b> . If <b>No</b> , write 'NO' and go to question 11a.	11a. Is _____ enrolled in PhilHealth? If <b>Yes</b> , write 'YES' and go to Question 11b. If <b>No</b> , write 'NO' and orient the member using Section II: "The Family is not enrolled in PhilHealth"	11b. What is _____'s PhilHealth ID number? Write the <b>complete</b> and <b>correct PhilHealth ID number</b> and proceed to Section I: "The Family is PhilHealth-enrolled" of the Family Guide to PhilHealth: Benefits, Availment and Responsibilities (page 4)	When is the family member in need of health plan available for interview? (mm/dd/yy)

Notes:  
<sup>1</sup>Complete Form 1 before completing forms 2A, 2B, 2C, 2D, 2E, 2F and 2G  
<sup>2</sup>Encircle the age of members identified with health risks: 0-28 days (newborn), 1 to less than 12 months (Infant), 1 to less than 5 years (child) and use Forms 2A, 2B and 2C respectively  
 Encircle the age of members 10-19 years old. Refer them to the Family Health Guide A. Health Messages: Caring for Adolescents  
<sup>3</sup>If the woman is pregnant but she is **NOT 15-49 years old**, write 'YES' in column 9a and encircle the 'YES' answer. Then go to Form 2D & 2F  
<sup>4</sup>For Questions 9 and 10, encircle 'YES' answers  
<sup>5</sup>For Question 11, encircle the 'NO' answer then refer for enrolment  
<sup>6</sup>If there is no answer, please put a dash (-)