This questionnaire asks about whether you received the H1N1 vaccination ("Swine Flu") while you were pregnant with your child(ren) who is (are) enrolled in Upstate KIDS. Please note we are not asking about whether you have received other types of influenza vaccinations other than H1N1. For example, we're not asking about whether you received the seasonal flu vaccine.

1. Were you vaccinated for the H1N1 virus while you were pregnant with your child(ren) who is (are) enrolled in Upstate KIDS?

☐ No

If no, please tell us why you were not vaccinated for H1N1 (mark all that apply using an 'X')

☐ Personal choice

☐ Medical reason

☐ Cost

☐ Lack of availability

☐ I don't know what H1N1 is

☐ Yes

If yes, please mark an 'X' for the type of vaccination you received and tell us the date you received it:

☐ Shot

☐ Nasal Flu Mist

2. Were you vaccinated for the H1N1 virus while breastfeeding your child(ren) who is (are) enrolled in Upstate KIDS?

☐ Yes, I was breastfeeding when H1N1 vaccination was received

☐ No, I was not breastfeeding when H1N1 vaccination was received