

The Census Bureau plans to conduct additional research under the generic clearance for questionnaire pretesting research (OMB number 0607-0725). We will conduct a small pilot test with respondent debriefings on the National Ambulatory Medical Care Survey (NAMCS), sponsored by the National Center for Health Statistics (NCHS). The NCHS will use the results of this pilot test to prepare for a larger pretest in October. The NCHS will submit the OMB request for the pretest.

The American Heart Association (AHA) released a scientific statement that recommended collecting lab values for lipoprotein, cholesterol, blood sugar, and glycol hemoglobin to track progress in meeting national goals for heart disease and stroke prevention and management. The AHA specified in their guidelines that adding these data elements to the NAMCS would represent a low-cost approach to enhance national surveillance for cardiovascular disease. The NAMCS target population consists of all office visits within the United States made by ambulatory patients to non-Federal physicians who are in office-based practice and engaged in direct patient care. Since more than 80 percent of all direct ambulatory medical care visits occur in physicians' offices, this survey provides data on the majority of ambulatory medical care services.

The Charlotte, Detroit, and Seattle regional offices (RO) will each recruit two regular private practice physicians and a physician/provider employed by a community health center (CHC) for this pilot test. The physicians/CHC providers can be current or past participants on the NAMCS or non-participants who meet the eligibility requirements for the survey. The physicians must have a medical specialty of General Practice, Internal Medicine, Cardiovascular Diseases, or Obstetrics/Gynecology. We will complete five cholesterol worksheets with each participant on patient visits of her/his choice. The worksheet will include space to enter the laboratory values for total cholesterol, high density cholesterol, high density lipoprotein (HDL), low density lipoprotein (LDL), triglycerides, glycol hemoglobin A1c (HgbA1c), and fasting blood sugar (FBS). The abstractor will take the laboratory values from the current visit or the most recent past laboratory values that are on the patient's medical record, defined as values obtained within the past 12 months. A check box will be included for cases that have no laboratory values. Four participants will complete the worksheets on their own. The Census Bureau field representative will abstract the data for the remaining five participants. We will debrief the person who completed the worksheets on the time and level of difficulty to collect the information. Copies of the data collection worksheets and the respondent debriefing questions are enclosed.

The Census Bureau field representative will provide the office of each participating physician/CHC providers with the advance letter enclosed explaining the purpose of the test, the voluntary nature of participation, and the legal authority for collecting the data. A copy of the advance letter is enclosed.

The estimated respondent burden is 45 minutes per physician. Thus, the maximum pilot test burden for this test is 7 hours.

Contact persons for questions regarding data collection and analysis of the pilot test are listed below:

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