Attachment 8: Screening Script for the Observational Feeding Study

NCI Feeding Study Telephone Participation Screener/Confirmation Script DRAFT

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	OMB #: 0925-xxxx
	Expiry Date: xx/xx/20xx

ID: I I I I

Public reporting burden for this collection of information is estimated to average 3 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.** Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-xxxx). Do not return the completed form to this address.

INTRODUCTION: Hello, may I speak with [RESPONDENT NAME]?

[IF NOT AVAILABLE, ASK]: When would be a good time to reach [RESPONDENT]? RECORD BEST DAY AND TIME ON CALL RECORD.

IF SOMEONE OTHER THAN RESPONDENT ASKS REASON FOR CALL:

My name is [INTERVIEWER NAME]. I'm calling from Westat, a research firm located in Rockville, Maryland.

IF RESPONDENT IS AVAILABLE:

Hello, my name is [INTERVIEWER NAME]. I'm calling from Westat, a research firm located in Rockville, Maryland. I am calling to ask you to take part in a study to help us learn about how people think about food. The study will only take about 3 hours of your time over a two day period. If you choose to participate, we will ask you to come to our research facility in Rockville, Maryland to eat breakfast, lunch, and dinner on one day. Each meal will take approximately 45 minutes. The next day, we will ask you to attend a 45 minute visit to the same research facility to answer questions about your diet and health. You will receive \$120 for your time. It is very important that you attend both days of the study. Being part of this study does not involve any risk to your health.

This research is authorized by the Public Health Service Act, and of course, your participation is entirely voluntary. Be assured there will be no consequences if you decide not to participate, either to the study as a whole or to any particular questions. Also, all of your answers will be kept confidential, and the results of the study will be reported only as grouped data with no individual data reported.

AGREE		I would like to ask if you would like to participate in this project.			
	a.	YES	01		
	b.	NO	02 [THANK AND END]		
DOB		I'd like to confirm the year were you be 19	orn? [READ FROM CALL RECORD]		

IF born after 1989 thank and end.

ATTEND	con: brea	secutive	participate, you will need to come to our research facility on two days. Are you able to come to Westat, located in Rockville, for unch, and dinner on one day, and then return the very next day for an ssion?			
a.	YES.		01			
b.	NO		02 [THANK AND END]			
INTERNET	Doy	ou hav	e access to high-speed internet at your house?			
a.	YES.		01			
b.	NO		02 [THANK AND END]			
ENGWELL	With	regard	to the English language, how well do you?			
	a.	unde	erstand it when it is spoken to you?			
		1.	Some but not too well 01			
		2.	Well 02			
		3.	Very well 03			
			UBLE WITH THIS QUESTION: We are interested in your own opinion of lish when it is spoken to you. Would you say you			
	a.	unde	understand spoken English?			
		1.	Some but not too well 01			
		2.	Well			
		3.	Very well 03			
	b. how well do you speak English?					
		1.	Some but not too well			
		2.	Well			
		3.	Very well 03			
	c.	how	well do you read English?			
		1.	Some but not too well			
		2.	Well			
		3.	Very well			

[IF ANY ANSWER TO ENGWELL=01, THANK AND END]

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GENDER	If not obvious, ask: For the record,	are you male or female?
a.	Male	01
b.	Female	02
ASK NEXT, P	REGNANT QUESTION TO FEMALES	ONLY:
PREGNANT	Are you currently pregnant?	
a.	YES	01 [THANK AND END]
b.	NO	02
DPREF	Do you have dietary preferences th foods offered to you?	at cause you to be unable to eat the majority of
a.	YES	01 [THANK AND END]
b.	NO	02
ALLERGY	Are you allergic to any foods?	
a.	YES	01 [THANK AND END]
b.	NO	02
WTLOSS	Are you currently trying to lose wei liquid diet?	ght by dieting, taking medication, or using a
a.	YES	01 [THANK AND END]
b.	NO	02
SURGERY	Have you had any type of bariatric or bands?	surgery for weight loss, such as gastric staples
a.	YES	01 [THANK AND END]
b.	NO	02
NUTREDUC		or education in the field of nutrition, such as an vel degree in dietetics, nutrition, food science,
a.	YES	01 [THANK AND END]
b.	NO	02
PHONENUM	For this study, it is very important phone number at which to reach ye	that we are able to reach you. What is the best ou in the
Daytin	ne?	
Evenir		

ADDRE		I would also like to confirm your related materials. [READ FROM CAL Address:	L RECO	ORD]	mail project
RACEE	TH1	Do you consider yourself to be			
	Hispani	c or Latino	01		
	Not His	panic or Latino	02		
RACEE	TH2	For this next question, you may choo consider yourself to be	ose as m	nany answers as apply. Do	o you
	America	an Indian or Alaska Native	Yes	No	
	Asian		Yes	No	
	Black o	r African-American	Yes	No	
	Native I	Hawaiian or Other Pacific Islander	Yes	No	
	White		Yes	No	
	Prefer r	not to answer	Yes		
QUEST	ION	Do you have any questions about wh	at you'll	I be doing in the study?	

(Use FAQs to respond to questions).

END Thank you for taking the time to talk with me today. We will be contacting you soon to schedule your visits to our research facility.