

Attachment 10
Report of Findings

Attachment 10 - Reports of Findings

The contractor's advance arrangements team will contact county health officials and other community groups at each survey location to obtain lists of health clinics and/or doctors that are both acceptable and accessible to survey participants who do not have a source of health care.

There will be three circumstances in which communication between NCHS and a sample person and possibly source of health care will be made, based on the importance of the survey findings. This discussion describes three levels of referrals.

LEVEL I

A Level I referral is made in situations in which a medical emergency is discovered by a member of the NHANES exam team and verified by the staff physician, who further determines that the medical findings require immediate attention by a health care provider.

An emergency medical kit will be kept in each MEC so that emergency aid can be provided when necessary to stabilize the individual's health status. The preferred manner of handling medical emergencies that occur at the examination center will be to contact local rescue squads, ambulance services and hospital emergency rooms. Contact information for all of these groups is kept at the NHANES examination centers. Level I contacts with a health care provider on behalf of a sample person occur infrequently.

An in-house NCHS response team is available to answer calls from NHANES participants regarding the results from the Report of Finding System. The response team effort works both as a triage mechanism and a surveillance system. A receipt and control record is kept on all sample person inquiries. Also available at no cost to sample persons, is a toll-free telephone number which can be accessed during normal business hours. The response team members consist of a physician, a nurse with a Master's degree, and other staff who have been trained to answer specific questions. Attachment 10-1 is used for MEC exams in which a participant refuses further medical attention.

LEVEL II

Level II contacts occur frequently. An example of a Level II contact is when the examination center staff determines that there are major medical findings that can be expected to cause adverse effects within two or three weeks. When such a condition is identified based upon the information collected during the survey, the NHANES physician will do the following: explain the health concern to the participant, provide the participant with a written report of the findings, and encourage the respondent to see their personal medical provider within the next two weeks. If the survey participant does not have a health care provider or usual source of health care, the NHANES physician will assist the participant by reviewing the list of health care providers that are listed on the referral list for their community. The same procedure will be used for referrals that are needed for oral health care.

A second type of Level II contact occurs when abnormal findings are reported by a contract laboratory or consultant reviewing the examination data for a particular component off-site. The consultant or laboratory will contact NCHS staff immediately. The survey participant will be notified by mail (see Level II letter - Attachment 10-2). The letter will describe the findings and will encourage the survey participants to see medical care from their personal health care provider. This type of Level II contact

with a sample person can occur as early as several days after the exam, but usually within two to three weeks of it. [Attachment 10-3](#) shows another example of a Level II report.

LEVEL III

Level III refers to the routine Report of Findings that are sent to all examinees whether or not any extremely abnormal findings were present. The Report does not include the results of every test and exam that was performed but it will include a complete summary of findings that are of clinical interest (see Level III Routine Report of Findings - [Attachment 10-4](#)). The Report will also remind the participant to consult their personal health care provider when the results include abnormal findings. The report includes height and weight results, and, depending on the age of the participant, blood pressure and the results from special studies and laboratory tests. The report packet will also contain the medical referral listing for the specific community and a list of health information resources ([Attachment 10-5](#)). See [Attachments 8 and 10-6](#) for the laboratory and examination results which will be given to survey participants.

For examinees under 18 years of age, the reports of findings will be given to their parents or guardians, except for the results of testing for sexually transmitted diseases.

10-1. NHANES MEC RELEASE FORM

Date _____

This is to certify that, against the advice of the medical doctor, I:

- am leaving the Mobile Exam Center.
- am removing _____ from the Mobile (Name of Sample Person)
Exam Center.
- choose no further medical referral or follow-up.

By so doing, I assume all responsibility for my act.

Signed

Relationship

Witness

SP ID _____

OMB #0920-0237



Attachment 10-2 – Early Reporting Letter – General laboratory

NHANES Early Reporting Letter Example

Sample person name

Address

Telephone number

Sample Number:

Dear,

Recently, you participated in a voluntary health examination at special mobile facilities operated by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. We reviewed your test results from your examination on *<insert date>*, and found that some values were abnormal and require your immediate attention.

We cannot be sure whether or not these test results represent illness. Only your doctor can determine that. We **strongly recommend** that you talk to your doctor and give him or her your test results on the enclosed sheet. He or she can evaluate your findings and help you understand what they mean for your health. The NHANES program will not pay for further tests or treatment you may require.

The examination was not intended to be a complete physical examination nor a substitute for a visit to a doctor. Our survey physicians are not authorized to administer treatment or engage in any follow-up with examinees.

You will receive a full report of your examination findings in the future, but we thought you should know about these results right away.

If you have any questions, you may call me at our toll-free number, **1-800-452-6115**, between 8:30 AM and 6 PM Eastern Time, Monday through Friday.

Sincerely yours,

Kathryn S. Porter, M.D., M.S.
Medical Officer

Enclosure



DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Disease Control and Prevention

National Center for Health Statistics
3311 Toledo Rd.
Hyattsville, Maryland 20782

Laboratory

Test Result Units Flag Reference Range

Abnormal value(s)

Glucose 156 mg/dL high 60-109

Other values

Table with 5 columns: Test, Result, Units, Flag, Reference Range. Lists various blood tests such as Glycohemoglobin, AL T, AST, Alkaline Phosphatase, Albumin, Bicarbonate, BUN, Calcium, Cholesterol, Triglycerides, HDL, LDL, Serum Creatinine, GGT, LDH, Phosphorus, Sodium, Potassium, Chloride, Total Protein, Uric Acid, Bilirubin, Serum Folate, RBC Folate, Iron, Serum Ferritin, Blood Lead, Cadmium, and Total Blood Mercury.

- *** Test not done on this age group
^^^ Result still pending
--- Test not done
<< Lower than the limit of detection

Number of hours fasted prior to blood draw: 6 hours



Attachment 10-3: Early Reporting Letter – No Measles Immunity

<On official letterhead>

Sample person name

Address

Sample Number:

Date

Dear <insert name>,

Recently, you participated in a voluntary health examination at special mobile facilities operated by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. As part of this examination your blood was tested for markers of immune status. Specifically, your blood sample collected on <insert exam date>, was tested for measles antibody. If you had measles (rubeola) infection or were vaccinated against measles, your blood would have antibodies against measles.

Your blood test result showed no measles antibody*. Therefore, you are at risk of getting measles if exposed to someone infected with measles.

Measles is caused by a virus and is spread through the air. Symptoms include fever, runny nose, cough, red, watery eyes, loss of appetite, and a rash. Measles can be a serious disease and may be associated with complications such as diarrhea, ear infections and pneumonia.

We **strongly recommend** you take this letter to your doctor. Your doctor may want to repeat the antibody test. If indicated, he/she may offer you a vaccination.

For further information on measles, you can visit: <http://www.cdc.gov/vaccines/vpd-vac/measles>

The NHANES program will not pay for any follow-up tests or care you may require, but we will be available to talk with you or your physician about this letter and to answer any questions you may have. You can reach me on our toll-free number **1-800-452-6115** between 8:30 AM and 6:00 PM Eastern Time, Monday through Friday.

Sincerely yours,

Kathryn S. Porter, M.D., M.S.
Medical Officer

* IgG Elisa II by Wampole Laboratories; Index Standard Ratio (ISR) was ≤ 0.90



Attachment 10-4 – Early Reporting Letter – Hepatitis C

Sample person name
Address
Sample Number:

Date

Dear <insert name>,

Recently, you participated in a voluntary health examination at special mobile facilities operated by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. As part of this examination your blood was tested for hepatitis C virus. Your blood sample collected on <insert exam date>, indicates you were infected with the hepatitis C virus even though you may never have felt sick.

If no one has told you before that you have the virus, we **strongly recommend** you take this letter to your doctor as soon as you can. You will want to talk with your doctor about possible treatment for hepatitis C and how to prevent spreading the disease to other people. Your doctor may want to do more tests to find out if the virus has done any damage to your liver.

Almost four million Americans are infected with hepatitis C virus. Most persons who are infected carry the virus for the rest of their lives. The infection can lead to liver damage, although many people with the virus never feel sick. We have enclosed a fact sheet with information on hepatitis C. You may obtain other information on hepatitis C by calling toll free:

American Liver Foundation 1-800-223-0179
Hepatitis Foundation International 1-800-891-0707
Centers for Disease Control and Prevention 1-888-4HEPCDC
or the CDC web site: <http://www.cdc.gov/hepatitis>

We want to give you this important information and urge you to see your doctor. The NHANES program will not pay for any follow-up tests or care you may require, but we will be available to talk with you or your physician about this letter and to answer any questions you may have. You can reach me on our toll-free number **1-800-452-6115** between 9 AM and 6 PM Eastern Time, Monday through Friday.

We will be contacting you in 4-5 months to conduct a brief telephone interview about your hepatitis C infection. Your participation is voluntary and refusal to participate will not result in the loss of any benefits that you now receive.

Sincerely yours,

A handwritten signature in black ink that reads "Kathryn Porter MD".

Kathryn S. Porter, M.D., M.S.
Medical Officer
Enclosure

If you have HEPATITIS C

**ALMOST 4 MILLION AMERICANS ARE
INFECTED WITH HEPATITIS C VIRUS**

This information will help you to better understand what hepatitis C is, how you may have gotten hepatitis C, and what you can do to prevent passing hepatitis C virus to others.

What is hepatitis C?

Hepatitis C is a liver disease caused by the hepatitis C virus (HCV), which is found in the blood of persons who have this disease. The infection is spread by contact with the blood of an infected person.

How serious is hepatitis C?

Hepatitis C is serious for some persons, but not for others. Most persons who get hepatitis C carry the virus for the rest of their lives. Most of these persons have some liver damage but many do not feel sick from the disease. Some persons with liver damage due to hepatitis C may develop cirrhosis (scarring) of the liver and liver failure which may take many years to develop. Others have no long term effects.

What can I do now that my hepatitis C test is positive?

Contact your doctor. Additional tests may be needed to check your diagnosis and to see if you have liver damage.

What if I don't feel sick?

Many persons with long-term hepatitis C have no symptoms and feel well, but should still see their doctor. For some persons, the most common symptom is extreme tiredness.

How could I have gotten hepatitis C?

HCV is spread primarily by exposure to human blood. You may have gotten hepatitis C if:

- you received a blood transfusion or solid organ transplant (e.g., kidney, liver, heart) before 1992
- you received clotting factor concentrates before 1987
- you ever injected street drugs, **even once**
- you were ever on long-term kidney dialysis
- you were ever a health care worker and had frequent contact with blood in the work place, especially accidental needlesticks
- you ever had sex with a person infected with HCV
- you have had multiple sex partners
- your mother had hepatitis C at the time she gave birth to you
- you lived with someone who was infected with HCV and shared items such as razors or toothbrushes that had blood on them

How can I prevent spreading HCV to others?

- Do not donate your blood, body organs, other tissue, or sperm
- Do not share toothbrushes, razors, or other personal care articles that might have your blood on them
- Cover cuts or open sores in your skin
- If you shoot drugs, stop and get into a treatment program. If you can't stop, use a clean needle and works every

time and don't share them

People with liver damage from hepatitis C should get vaccinated against hepatitis A and hepatitis B. See your doctor.

- If you have one steady sex partner, there is a very low chance of giving hepatitis C to that partner through sexual activity, and you do not need to change your sexual practices. If you want to lower the small chance of spreading HCV to your partner, you may want to use latex condoms. Ask your doctor about having your sex partner tested
- If you have sex with multiple partners, lower your number of partners, inform them that you have hepatitis C, and always use barrier precautions, such as latex condoms

What if I am pregnant?

Five out of every 100 infants born to HCV infected women become infected. This occurs at the time of birth, and there is no treatment that can prevent this from happening. However, infants infected with HCV at the time of birth seem to do very well in the first few years of life. More studies are needed to find out if these infants will be affected by the infection as they grow older. Breast feeding does not spread HCV.

Hepatitis C is not spread by:

- sneezing
- hugging
- coughing

A person who has hepatitis C can still get other types of viral hepatitis, such as hepatitis A or hepatitis B.

- sharing eating utensils or drinking glasses

- food or water
- casual contact

There is no vaccine available to prevent hepatitis C.

Is there a treatment for hepatitis C?

A drug called interferon is licensed for the treatment of persons with long-term hepatitis C. About 2 out of every 10 patients who are treated get rid of the virus. You should check with your doctor to see if treatment would help you.

How can I take care of my liver?

- See your doctor regularly
- Do not drink alcohol
- Tell your doctor about all medicines that you are taking, even over the counter and herbal medicines
- Your doctor may want to do additional tests to determine the progress of your disease. The government agency responsible for the NHANES survey **cannot** provide any additional testing for you

For information on viral hepatitis:

call the Hepatitis Hotline at
1-888-4HEPCDC
1-888-443-7232

or access the Internet at
[http://www.cdc.gov/ncidod/diseases/
hepatitis/hepatitis.htm](http://www.cdc.gov/ncidod/diseases/hepatitis/hepatitis.htm)

or write

Hepatitis Branch, Mailstop G37
Division of Viral and Rickettsial Diseases
National Center for Infectious Diseases
Centers for Disease Control and Prevention
Atlanta, GA 30333



National Health and Nutrition Examination Survey

Final Report of Findings

Attachment 10-5 – Final Report of Findings

Date of Examination: July 1, 2005

Participant Name: John Doe

Participant Age:

Participant Gender: Male

SP ID: 123456

These measurements were obtained as part of a survey and do not represent a medical diagnosis. Interpretation of these measurements must be made by a physician.

Body Measurements

Height: 5'8"

Weight: 174 lbs.

For a person of your height, your weight is above the range of a healthy weight, and you may be overweight

Blood Pressure & Heart Rate

	Your Measurements	Normal
Systolic Blood Pressure:	142 mm Hg	< 120
Diastolic Blood Pressure:	88 mm Hg	< 80
Resting Pulse Rate:	64 bpm	

Your blood pressure today is high, based on the Seventh Report of the Joint National Committee on the Prevention, Detection, Evaluation, and Treatment of High Blood Pressure. NIH Publication, 2003

Oral Health

The dental examination you received today is not, and is not intended to be, a substitute for the examination usually given to persons seeking care from their own dentists. Neither a dental history nor x-rays are taken, and therefore the findings are solely the result of what can be seen at the time of the examination.

The examining dental hygienist recommends that you:

Should see a dentist within the next 2 weeks

The examining dental hygienist observed the following conditions:

Decayed Teeth

Soft Tissue Problems

Hearing

The softest sounds you are able to hear are called hearing thresholds. Your thresholds at different frequencies (itches) are reported in the table below. The lower pitched sounds are towards the left of the table and the higher pitched sounds are toward the right. Values of 25 dB or less are considered normal hearing.

Hearing Levels by Ear and Frequency (Air Conduction)

	Frequency (Hz)						
	500	1000	2000	3000	4000	6000	8000
Right Ear (dB HL)	0	0	5	5	5	15	30
Left Ear (dB HL)	5	0	10	5	10	25	10

Your hearing was tested by a trained examiner. Results indicate a slight hearing loss (a few thresholds outside normal limits) in your right ear. In your left ear, results indicate that your hearing is entirely within normal limits.

Laboratory

Complete Blood Count	Result	Units	Flag	Reference Range
White Blood Count	7.4	(x10 ⁹ /L)		3.9 - 12.1
Lymphocytes	23.5	(%)		17.8 - 52.8
Monocytes	7.2	(%)		0 - 12
Neutrophils	67.4	(%)		39.7 - 77.8
Eosinophils	1.9	(%)		0 - 8
Basophils	0.1	(%)		0 - 2
Red Blood Count	3.8	(x10 ¹² /L)		3.7 - 5.2
Hemoglobin	10.0	(g/dl)	Low	10.4 - 15.2
Hematocrit	35.0	(%)		32 - 45
MCV	78.9	(fL)		73.4 - 98.3
MCH	28.9	(pg)		23.2 - 33.3
MCHC	32.2	(g/dL)		31.4 - 35.1
RDW	12.0	(%)		11.8 - 16.6
Platelet Count	217.0	(x10 ⁹ /L)		172 - 453

Body scan and bone density

The bone density measurement can help spot persons who may be at greater risk for fracture because they have weaker bones. In general, a lower bone density means that the bone is weaker. Yet, not all men or women with low bone density will have fractures.

The results from your hip (left) scan show:

Hip bone density 1.32 g/cm²

Z-score 1.6

Compared with men your age, your hip bone density is normal.

The results from your spine (lumbar) scan show:

Spine bone density 1.21 g/cm²

Z-score 1.2

Compared with men your age, your spine bone density is normal

Lung Function Testing

The lung function test was done with an Ohio Model 822/827 Spirometer. Your results below are an average of your lung function measurements.

	FVC (L)	FEV1 (L)	FEV1/FVC%	Peakflow (L/sec)	FEF_{25-75%} (L/sec)
Your best values	5.5	4.1	75%	10.9	3.2
Predicted values	5.3	4.4	82%	10.0	4.4
Lower limits of normal	4.4	3.6	72%	7.8	2.9
Percent predicted	104%	93%	91%	109%	73%

Interpretation: Compared with other people of your age, sex, race/ethnicity and height, your breathing test results were within normal limits.

Laboratory

Laboratory Test	Result	Units	Flag	Reference Range
Glucose	96	mg/dL		60 - 109
Glycohemoglobin	5.3	%		< 7.0
2-hour Glucose Tolerance Test	172	mg/dL		60 - 139
AL T	22	U/L		< 40
AST	26	U/L		< 31
Alkaline Phosphatase	41	U/L		39 - 117
Albumin	4.1	g/dL		3.2 - 5.2
Bicarbonate	24	mmol/L		22 - 29
BUN	8	mg/dL		6 - 19
Calcium	9.4	mg/dL		8.4 - 10.2
Cholesterol	246	mg/dL	high	< 200
Triglycerides	129	mg/dL		< 150
HDL	107	mg/dL		> 39
LDL	83	mg/dL		< 130
Serum Creatinine	0.8	mg/dL		0.4 - 1.2
GGT	20	U/L		11 - 51
LDH	100	U/L		94 - 250
Phosphorus	4.2	mg/dL		2.6 - 4.5
Sodium	137	mmol/L		133 -145
Potassium	3.6	mmol/L		3.3 -5.1
Chloride	103	mmol/L		96 - 108
Total Protein	6.8	g/dL		5.9 - 8.4
Uric Acid	4.0	mg/dL		3.4 – 7.0
Bilirubin	0.9	mg/dL		0 -1.0
Eryt. Protoporphyrin	40	ug/dL RBC		0 - 70
Serum Folate	9	ng/mL		2 - 21
RBC Folate	245	ng/mL RBC		70 - 424
Iron	157	µg/dL		22 - 163
Vitamin B12	509	µg/dL		204 - 1261
Blood Lead	1.7	µg/dL		0 - 20
Cadmium	0.4	µg/L		0.3 - 1.2
Total Blood Mercury	0.6	µg/L		< 10.0
Thyroid Stimulating Hormone	4.10	µIU/mL		0.34 - 5.60
Free T4	1.30	ng/dL		0.58 – 1.64
Free T3	2.64	pg/ml		2.50 – 3.90

Results that are flagged “high” or “low” may indicate a health problem. You may wish to share these results with your doctor.

^^ Results still pending

--- Test not done

<<< Lower than the limit of detection

Number of hours fasted prior to blood draw: **12** hours

Laboratory

	Result	Flag	Reference Range
Urine			
Sample collected on <insert date>			
Albumin Creatinine Ratio (ug albumin/g creatinine)	330	High	< 30
Urine			
Sample collected on <insert date>			
Albumin Creatinine Ratio	280	High	<30

Attachment 10-6. Federal Resource List to be Included with all Reports of Findings

HEALTH INFORMATION RESOURCE LIST
Information on a variety of health topics is available from
the following Federal agencies.

Office of Disease

Federal Building, Room 6C12,
9000 Rockville Pike,
Bethesda, MD 20892, (301)496-1752

Publishes brochures and a series of fact sheets called Age Pages, covering a wide variety of topics related to aging.

National AIDS Information Clearinghouse
P.O. Box 6003, Rockville, MD 20850 (800)458-5231

Provides information and publications on AIDS and supports a national hotline and resource center.

National Clearinghouse for ALCOHOL and Drug Information, P.O. Box 2345, Rockville, MD 20852, (301)468-2600

Distributes a variety of publications on alcohol and drug abuse.

CANCER Information Service, National Cancer Institute, Building 31, Room 10A24, 9000 Rockville Pike, MD 20892, (800)4-CANCER

Provides information about cancer and childbirth, patients and families. Spanish-speaking staff members are available in California, Florida, Georgia, Illinois, northern New Jersey, New York, and Texas.

National HEALTH INFORMATION Center, P.O. Box 1133, Washington, DC 20013-1133 (800)336-4797 (Metropolitan Washington, DC (301)565-4167)

Provides assistance in locating health information resources, and distributes publications on health promotion and disease prevention.

National Heart, Lung, and Blood Institute Education Programs Information Center, 4733 Bethesda Avenue, Suite 530, Bethesda, MD 20814, (301)951-3260

Provides information and materials on smoking, cholesterol, high blood pressure, heart disease, stroke, exercise, and other topics related to heart and lung health.

National Center for Education in MATERNAL and Child Health, 38th and R Streets NW, Washington, DC 20056 (202)625-8400

Provides information on pregnancy child and adolescent health, nutrition, high risk infants, chronic illness and disability, genetics, and women's health. Resource Center distributes materials on organizations and programs.

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National DIABETES Information Clearinghouse, Box NDIC, Bethesda, MD 20892 (301)468-2162

Collects and disseminates information to consumers and health professionals on diabetes and its complications.

FOOD and Drug Administration, Office of Consumer Affairs, 5600 Fishers Lane (HFE-88) Rockville, MD 20857 (301)443-3170

Responds to inquiries about foods, cosmetics, medical devices, drugs, health fraud, Reye's syndrome, and radiological health and serves as a clearinghouse for related consumer publications.

National Institute of MENTAL HEALTH, 5600 Fishers Lane, Room ISC-05, Rockville, MD 20857, (301)443-4513

Answers general inquiries about mental health and distributes a variety of publications in English and Spanish at no charge.

Office on SMOKING and Health, Department of Health and Human Services, Park Bldg, Room 1-16, Rockville, MD 20857, (301)443-1690

Distributes consumer publications on smoking and health, including smoking and teenagers, smoking and pregnancy, and smoking cessation.

This resource list is a service of the National Center for Health Statistics(NCHS) and the Office of Disease Prevention and Health Promotion(ODPHP).

Attachment 10-7. List of Exam Measurements Noting Which Results Will Be Given to Respondent

Health Measurements:

- *Spirometry
- *Blood Pressure
- *Bone Density Measurement (low dosage x-ray of spine)
- *Oral Health Exam
- *Hearing Test
- *Height, Weight, and Other Body Measures
- ***Tuberculin Skin Test (TST)**

Laboratory Tests on Urine:

- *Kidney Tests
- *Pregnancy Test
- *Sexually Transmitted Diseases (STDs)
- *Exposure to environmental chemicals
- * **Hormone tests**

Laboratory Tests on Blood:

- *Human Immunodeficiency Virus (HIV) antibody
- *Anemia
- *Cholesterol
- Banking of specimens for future genetic research
- *Glucose Measures
- *Herpes Simplex Virus Type 2
- **Infectious Diseases
- Kidney Tests
- **Environmental chemicals
- *Liver Tests
- *Nutritional Status
- * Markers of immunization status
- *Celiac Disease
- * **Bone Status Test**
- ***Tuberculin Status Test**

Laboratory Tests on Swabs:

- *Human Papillomavirus (HPV)

Private Health Interviews:

- Health Habits
- Mental Health
- Nutrition
- Physical Activity
- Reproductive Health
- Sexual Experience

*You will receive results

**You will receive results only if abnormal

Attachment 10-8. Referral for participants who may have suicidal thoughts

Information volunteered or reported during the Depression Questionnaire can prompt a referral to the Mobile Examination Center (MEC) physician. MEC interviewers send a mental health observation to the physician if the participant's response to question 05DPQ.090 is 1, 2 or 3 – or if the participant becomes visibly upset while answering the question about suicide. The system will alert the physician and coordinator that the examinee needs to be seen by the physician prior to leaving the exam center. The physician is responsible for assessing the mental health concern and facilitating referral as needed.