Screening Instrument

Qualitative information collection on emerging diseases among the foreign-born in the United States

Phone call/in-person exchange should last approximately 10 minutes

Hello, my name isHERE]. I would like to invite yout at We'd like to ask to TOPIC HERE]. Your answers wimprove the health of your comminterested, we will invite you to	u to participate in what you think ab ill help the U.S. (nunity. We have a	n a group dis out several Centers for I a few brief o	cussion about health topics i Disease Contro Juestions to as	health information that will be held ncluding [INSERT DISEASE ol and Prevention, the "CDC," k and if you qualify and are
1. How old are you?	(IF U	NDER 18, 7	THANK PERS	ON AND END CONVERSATION)
2. What is your sex? Male	Female			
3. Were you born in a country ot *(IF PARTICIPANT A termination script at en	NSWERS "NO,'		No PERSON AN	D END CONVERSATION—see
4. In what country were you bor	n?			
5. How long have you been in th	e U.S.?			
6. Do you speak a language othe If yes, what language do yo	9		No	
7. Are you able to attend a 2 hou			No ANK PERSO I	N AND END CONVERSATION)
8. Any information that will be s	hared during this	discussion	will be kept pr	rivate. All sessions will be audio-
recorded. Are you willing to be		Yes NSURE, TH	No ANK PERSO I	N AND END CONVERSATION)
other impairments?		Yes	No	rticipate such as hearing, visual, or
If yes, please list impairment(s):	Hearing	Visual	Other _	
Those are all my questions. You	ı do qualify for pa	articipation i	n this discussi	ion, and we would like to invite you

to join us on [INSERT DATE]. If you decide to participate, you will be given [INSERT INCENTIVE].

Public reporting burden of this collection of information is estimated to average 10 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 CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA 0920-XXXX.

10. Are you willing to participate?	Yes No (IF NO, THANK PERSON AND END CONVERSATION) (IF YES, PLACE CONTACT INFORMATION BELOW)
First Name:	Phone Number: ()
Best time to contact:	
Thank you for your time.	

Termination Script: Thank you for answering our questions. Unfortunately you do not meet our selection criteria and so are not eligible to participate in our group discussion. Any information that you have shared thus far will be deleted. Thank you for your time and have a good day/night.