Salt Sources Study

Follow-up Urine Collection Questionnaire

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, M/S D74, Atlanta, GA 30333, ATTN: PRA 0920-xxxx.

FQP1-FQP3 are completed based on Technician's observation. No need to read the questions to the participants.

FQP1. WAS THE TIME OF URINE COLLECTION RECORDED?		
YES		
FQP2.WAS THE LENGTH OF THE COLLECTION TIME WITHIN 22 TO 26 HOURS?		
YES		
FQP3. WAS THE TOTAL AMOUNT OF URINE COLLECTION MORE THAN 500 ML?		
YES		

We would like to ask you several questions about your experience in collecting the urine for a 24 hour period. Your answers to these questions will not affect your reimbursement.

FQ1.	. (FOR FEMALES ONLY) Were you having your period at any time in the last 24 hours?		
	YES		
FQ2.	During the 24-hour period, did you collect your urine every time you used the bathroom to urinate?		
	YES		
FQ3.	B. How many times did you miss?		
	Interviewer instruction: Probe the amount of the void. Do not count as "miss" i the missed void was only a few drops.		
	times		
	REFUSED77 DON'T KNOW99		
FQ4.	Is there any urine missing from the storage containers for any other reason such as spilling?		
	YES		
FQ5.	Were more than a few drops of urine lost?		
	YES		

FQ6.	6. How many times did this happen?	
		_ times
		REFUSED77 DON'T KNOW99
FQ7.		a bowel movement also urinate. Was there any time collect the complete urine sample because of a bowel
		obe the amount of the void. Do not count as "miss" if ssed void was only a few drops.
		YES
FQ8.	98. How many times did this happen?	
		_ times
		REFUSED77 DON'T KNOW99
FQ9.	9. Were you able to keep the storage containers in a cool place until this appointment?	
		YES 1 (FQ11)
		NO
FQ10. How long was the sample not kept cold?		not kept cold?
		_ minutes/hour
		REFUSED 7 DON'T KNOW 9

FQ11. Did you perform this collection on a day that you also went to work?		
	YES NO DO NOT WORK REFUSED DON'T KNOW	2 3 7
FQ12. When collecting the sample, did you have any difficulty in remembering or carrying out the instructions?		
	YES (specify)REFUSEDDON'T KNOW	2 7
FQ13. Did you have any other problem when collecting the 24 hr urine sample?		
	YES (specify) NO REFUSED DON'T KNOW	2 7
FQ13. Did you have any other problem when collecting the 24 hr urine sample?		
	YES (specify)REFUSEDDON'T KNOW	2 7
FQ14. In the last 2 days, did you engage in physical activity, akin to brisk walking, jogging, bicycling, long enough to work up a sweat?		
	YES NOREFUSED DON'T KNOW	2 7

FQ15. In the last 2 days, did you engage in work or home activity, akin to heavy lifting, digging, shoveling snow, or climbing stairs, etc, long enough to work up a sweat? ("Work" includes all jobs, school,,and volunteer work.)

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

BOX 1

If (FQ2=1 AND (FQ4=2 OR FQ5=2) AND FQ7=2), mark as 'CONTINUE' and proceed with the next urine collection and diet interview:

Otherwise, mark as 'REDO' and proceed with item FQR1.

FQR1 is completed by the Technician for all cases that need re-do. No need to read the questions to the participants.

FQR1.DOES THE PARTICIPANT AGREE TO REDO THE COLLECTION?

YES	.1 (END OF SECTION, MARK STATUS AS
	"NOT DONE" WITH COMMENT "NEEDS
	REDO")
NO	.2 (BOX2)

BOX 2

If FQP1=2, go to the end of section, mark status as "NOT DONE" with comment "FAILED TO FOLLOW PROTOCOL".

Else if FQP2=1, go to BOX3;

Else if FQP3=2, go to the end of section, mark status as "NOT DONE" with comment "FAILED TO FOLLOW PROTOCOL".

Return to FQR1 above.