December 8, 2014

Questionnaire

Programming instructions are indicated in green font. Notes to research team are indicated in red font.

[PROGRAMMER:

- Program progresses to the questioning in a "one-way" manner
- Record time in milliseconds spent on screen 1, screen 3, and screen 4. Record the start and end time for the total survey in seconds.

[PROGRAMMER: The OMB control number and Expiration Date should appear at the bottom of every screen (maybe above the privacy text). It should be as unobtrusive as possible. After the first screen (Consent Screen 1), we show:

DHHS research authorized by Section 1701(a)(4) of the Public Health Service Act (42 U.S.C. 300u(a)(4)). Confidentiality protected by 5 U.S.C. 552(a) and (b) and 21 CFR part 20. OMB Control #_0910-xxxx __ Expires xx/xx/xx

For every other screen we will show: OMB Control # 0910-xxxx Expires xx/xx/xx]

PROG: (CUSTOM TERMINATION) FOR TERMINATED PARTICIPANTS:-

I'm sorry, but you are not eligible for this study. There are many possible reasons why people are not eligible. These reasons were decided earlier by the researchers. Thank you for your interest in this study and for taking the time to answer our questions today.

[Consent Screen 1]

You are being asked to participate in a survey about a new consumer product. If you agree to take part in this research, you will be asked to watch a TV ad and to answer some questions about the ad. The study will take about 30 minutes.

[Insert language about panel points/rewards]

[Insert language about panel privacy policy]

DHHS research authorized by Section 1701(a)(4) of the Public Health Service Act (42 U.S.C. 300u(a)(4)). Confidentiality protected by 5 U.S.C. 552(a) and (b) and 21 CFR part 20.

OMB Control #0910-xxxx Expires xx/xx/xx

[PROGRAMMER: Screen 1. TIME SPENT ON SCREEN IN MILLISECONDS]

[Next Page: Screen 2]

SCREENING QUESTIONS

OMB Control #	Expires	
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S1.	Are y	ou at least 18	years old?				
_ _	Yes No	→ continue→ terminate	and show custo	om termination screen			
S2. Ir	what y	ear were you l	oorn?				
			ear is < or = 199 ear is > 1996		om termi	nation sc	reen]
S3a. 1	Have yo	u been diagno	sed by a physic	ian for any of the following	conditio	ns?	
d. Hig e. Ac	abetes omnia gh chole	or GERD	Yes Yes Yes Yes Yes	NoNoNo [If checked, goNo [If checked, goNoNo [If checked, go	to S3b.2]	
		-		nore than one condition, ass pression < insomnia < high o	_		west prevalence
S3b.	Are you	ır currently tal	king a prescripti	ion drug to treat your ?			
1.Inso	mnia				Yes	No	
	h Chole	sterol					
	ression						
S4.	Are yo Yes No			ealth care professional? om termination screen			
S5. comp	-	ou work for a p	oharmaceutical o	company, an advertising ago	ency, or a	a market i	research
<u> </u>	Yes No	→ terminate→ continue	and show custo	om termination screen			
[Next	page: S	Screen 3]					
[SCR	IPT] Th	ank you for aş	greeing to partic	cipate in this study today.			

OMB Control # ____ Expires ____

Make sure you are comfortable and can read the screen from where you sit. This study is about advertising for prescription medication. Your answers are private and will not be connected with your name. Your input is extremely valuable.

Let's begin.

We will ask you questions about the ad after you have finished watching it. Do your best to remember details about the ad. We will ask you to explain your answers. Make sure your computer sound is turned on and set at a comfortable volume.

[PROGRAMMER: Screen 3. TIME SPENT ON EACH SCREEN IN MILLISECONDS]

[Next page: Screen 4]

[SCRIPT] Please click the link below to view the ad. It may take a minute or two for the video to begin. You should be able to see and hear the video when it begins to play.

[PROGRAMMER: Randomize order of clutter reel]
[PROGRAMMER: Screen 4. TIME SPENT ON EACH SCREEN IN MILLISECONDS]

[Next page: Screen 5]

[SCRIPT] Please answer the following questions based on the ad you saw.

Q1. Were you able to view the entire ad for [DRUG]?

- □ Yes
- \square No \rightarrow [Skip back to ad]
- \square Not sure \rightarrow [Skip back to ad]

[PROGRAMMER: If Q1a=No or Not sure, replay just the prescription drug ad. If, after this, they still say No or Not sure to Q1a, then terminate.]

Q2a. Have you seen this exact ad before?

- □ Yes [Go to Q2b]
- □ No [Continue to Q2c]
- □ Not sure [Continue to Q2c]

Q2b. In the last 6 months, how often did you see this exact ad before?

- □ Never
- □ Rarely
- Sometimes
- □ Often

□ Very often	
Q2c. Have you seen other ads for this product before?	
□ Yes	
□ No	
□ Not sure	
Q3. Please list the thoughts that were going through your mind as you viewed the ad for [DRUG] and list them below. Use one line for each thought.	ıd
[PROGRAMMER: Five separate text boxes]	
[Next page: Screen 6]	
Q4. What condition does [DRUG] treat? [PROGRAMMER: randomize responses]	
□ Seasonal allergies	
Insomnia	
Migraine headaches High Chalantanal	
High CholesterolDiabetes	
□ Acid Reflux/GERD	
Depression	
□ Don't know	
Q5. What are the benefits of [DRUG]? Use one line for each benefit you list. [Open-ended] [PROGRAMMER: Provide separate text boxes. The exact number of lines TBD]	

Q6. What are the risks and side effects of [DRUG]? Use one line for each risk or side effect you list [Open-ended] [PROGRAMMER: Provide separate text boxes. The exact number of lines TBD]
[Next page: Screen 7]

[Next page: Screen 7]

[PROGRAMMER: MATCH VERSION OF Q7 TO DISEASE AD SHOWN]

(Memory for benefits and risks)

Q7_1. Based on the information in the ad, please check which of the following are benefits or risks of taking [DRUG]. [Depression version]

[PROGRAMMER: randomize a-l]

	Yes	No
a.		
b.		
C.		
d.		
e.		
f.		
g.		
h.		
i.		
j.		
k.		
l.		

OMB	Control #	Expires

Q7_2. Based on the information in the ad, please check which of the following are benefits or risks of taking [DRUG]. [Insomnia version]

[PROGRAMMER: randomize a-k]

	Yes	No
a.		
b.		
C.		
d.		
e.		
f.		
g.		
h.		
i.		
j.		
k.		

Q7_3. Based on the information in the ad, please check which of the following are benefits or risks of taking [DRUG]. [High cholesterol version]

[PROGRAMMER: randomize a-l]

	Yes	No
a.		
b.		
C.		
d.		
e.		
f.		
g.		
h.		
i.		
j.		
k.		
1.		

[Next page	: Screen 8]
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[PROGRAMMER: Randomize presentation order of the questions on screen 8]

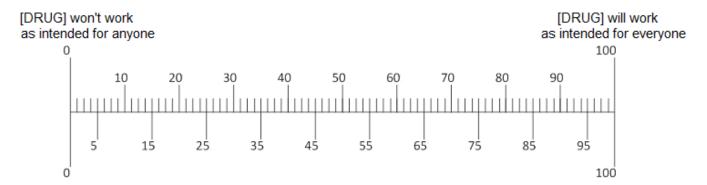
(Perceived Benefit)

OMB Control # Expires	:
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[SCRIPT] **Please answer the following questions based on your impressions from the ad.** Even though the ad didn't tell you, please provide your best guess for the following questions

Q8. In your opinion, if 100 people take [DRUG], how many of the 100 would benefit from taking the drug?

[PROGRAMMER: Participants can slide an arrow to their answer.]

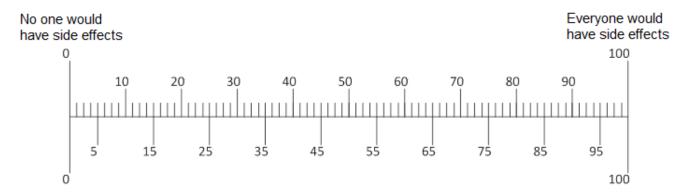


Q9. In your opinion, if [DRUG] did help a person's [condition], how much would it help?

1	2	3	4	5
Would help				Would help
[condition]				[condition]
a little				a lot

(Perceived Risk)

Q10. In your opinion, if 100 people take [DRUG], how many of the 100 would have any side effects? [PROGRAMMER: Participants can slide an arrow to their answer.]



Q11. In your opinion, if [DRUG] did cause a person with [condition] to have side effects, how serious would they be?

1	2	3	4	5
Not at all serious				Very serious

(Risk/benefit tradeoff)

Q12. Thinking overall about the risks and benefits of [DRUG], would you say it has:

1	2	3	4	5
Many more risks	Somewhat more	newhat more Equal risks and S		Many more
than benefits	risks than	benefits	benefits than	benefits than
	benefits		risks	risks

(Perceptions of risk statement)

[PROGRAMMER: Randomize order of Q13a-g.]

Q13. Please rate your agreement or disagreement with each of the following statements.

	5. Tiedse fate your agreemen	Strongly	Somewhat	Neither	Somewhat	Strongly
		disagree	disagree	disagree	agree	agree
				nor agree	8 - 1	
a.	The ad clearly			- 8		
	communicated the <i>benefits</i>					
	of [DRUG].					
b.	The ad clearly					
	communicated the <i>risks</i> of					
	[DRUG].					
c.	The ad evenly balanced the					
	risks and benefits of					
	[DRUG].					
d.	The ad did not give enough					
	information about the					
	possible benefits and					
	positive effects of using					
	the drug					
e.	The ad did not give enough					
	information about the					
	possible risks and side					
	effects of using the drug.					
f.	The ad helped me learn					
	about the drug's benefits					
g.	The ad helped me learn					
	about the drug's risks and					
	side effects					

OMB Control #	Expires

Q14. In my opinion, the prescription drug ad mentioned....

1	2	3	4	5
Not enough risks and side effects				Too many risks and side effects

Q15a. To what extent do you agree or disagree that the **risks and side effects** were:

[PROGRAMMER: Randomize order of Q15a.a-e.]

	Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
a. Informative					
b. Actionable					
c. Clear					
d. Confusing					
e. Important					
f. Incomplete					

Q16a. Overall, the risks and side effects mentioned in the prescription drug ad were....

1	2	3	4	5
Not at all serious				Very serious

Q16b. In your opinion, how serious are the following risks?

[PROGRAMMER: Randomize order of Q16b.a-f.]

	Not at all		Very
	serious		serious
a.			
b.			
C.			
d.			
e.			
f.			

Q16c. In your opinion, how <u>actionable</u> are the following risks? We define 'actionable' as a symptom you would know you are at risk for (e.g., because of pre-existing condition or allergy) or recognize (e.g., because it is an observable physical or mental system) and can act upon to help lessen the risk (e.g., get immediate medical help to prevent a bad outcome).

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[PROGRAMMER: Randomize order of Q16c.a-f.]

	Not at all actionable		Very actionable
a.			
b.			
C.			
d.			
e.			
f.			

Q16d. How likely is it that you would experience any of the following risks or side effects if you took [DRUG]?

[PROGRAMMER: Randomize order of Q16d.a-f.]

	Not at likely		Very likely
a.			
b.			
C.			
d.			
e.			
f.			

[Next page: Screen 9]

(Information seeking/intention items)

Q17. I am interested in trying [DRUG].

1	2	3	4	5
Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree

[PROGRAMMER: counterbalance 18/19 and 20/21]

Q18. How likely are you to talk to your doctor about [DRUG]?

1	2	3	4	5
Very unlikely	Somewhat	Neither likely	Somewhat likely	Very likely
	unlikely	nor unlikely		

OMB	Control #	Expires

Q19. How likely are you to read the patient labeling for more information about [DRUG]?

1	2	3	4	5
Very unlikely	Somewhat	Neither likely	Somewhat likely	Very likely
	unlikely	nor unlikely		

Q20. How likely are you to look for more information about [DRUG]?

1	2	3	4	5
Very unlikely	Somewhat	Neither likely	Somewhat likely	Very likely
	unlikely	nor unlikely		

Q21. How likely are you to look for more information about [condition]?

1	2	3	4	5
Very unlikely	Somewhat	Neither likely	Somewhat likely	Very likely
	unlikely	nor unlikely		

Q22. If one of your family members or close friends had [condition], how likely would you be to mention [DRUG] to them?

1	2	3	4	5
Very unlikely	Somewhat	Neither likely	Somewhat likely	Very likely
	unlikely	nor unlikely		

[Next page: Screen 10]

[PROGRAMMER: Rotate order of Q22/Q22a and Q23/Q23a]

(Perceived Comparative Benefit and Risk)

[SCRIPT] For the next two questions, please think about other medicines you know of that treat [condition]. If you are not aware of other medicines that treat [condition], please choose the answer option "Neither disagree nor agree."

When answering these questions, please base your impressions on the prescription drug ad you saw.

Q23. [DRUG] is more **effective** than other medicines that treat [condition].

- □ Strongly disagree
- □ Somewhat disagree
- □ Neither disagree nor agree
- □ Somewhat agree
- □ Strongly agree

OMB	Control #	Expires

Q23a. What other medicines were you thinking about?					
[PROGRAMMER: Add fill space for write-ins]					
Strongly diSomewhatNeither disSomewhat	 Somewhat disagree Neither disagree nor agree Somewhat agree 				
Q24a. What other	medicines were you	ı thinking abou	ıt?		
[PROGRAMMER	: Add fill space for	write-ins]			
(Perceived Quality	r)				
Q25. Based on the [DRUG]?	ne information in th	e prescription (drug a	d, how would you ra	ate the quality of
1	2	3		4	5
Poor quality					Good quality
[PROGRAMMER	: Randomize order	of Q25a-d]			
(Attitude toward A	.d. From Bhutada e	et al., 2009, She	en & C	Chen, 2007, and Mad	eKenzie & Lutz, 1989)
Q26. In my opin	Q26. In my opinion, the ad for [DRUG] was:				
a. 1 Good	2	3	4	5 Bad	
b. 1 Pleasant	2	3	4	5 Unpleasant	
c. 1 Favorable	2	3	4	5 Unfavorable	

d. 1

Very persuasive

2

3

5 Not at all persuasive

4

(Self-reported attention)

Q27. How much attention did you pay to the prescription drug ad when you were watching it?

1	2	3	4	5
A little				A lot

[Next page: Screen 11]

(Manipulation Checks)

Q28. Do you remember the prescription drug ad saying "This is not a full list of risks and side effects. Talk to your doctor and read the patient labeling for more information."?

- □ Yes
- □ No
- □ Not sure

[PROGRAMMER: If "no" or "not sure" add to script "This ad did say that "This is not a full list of risks and side effects. Talk to your doctor and read the patient labeling for more information."]

[SCRIPT] Now we will show you the ad again. This ad said "This is not a full list of risks and side effects. Talk to your doctor and read the patient labeling for more information." When answering the next few questions, please think <u>only</u> about that statement.

[PROGRAMMER: Play prescription drug ad again for all conditions EXCEPT the Control conditions. For control condition, skip to Q30]

[Next page: Screen 12]

(Inferences about Statement)

[PROGRAMMER: Five senarate text hoxes].

Q29a. In your own words, list all your thoughts, reactions and ideas that went through your mind when the statement, "This is not a full list of risks and side effects. Talk to your doctor and read the patient labeling for more information." was presented. Please use a separate line for each thought.

[Troofa ivitization of the separate text boxes]				

MR	Control #	Expires

Q29b. For each of the thoughts, reactions and ideas you listed, indicate whether the thought was positive, negative or neutral.

[PROGRAMMER: Display responses from Q28a. For each response, include a drop-down choice box or other appropriate choice box with the choices POSITIVE, NEGATIVE, NEUTRAL]

You said	Is it
[insert each response from Q27a above in a	POSITIVE
separate box]	NEGATIVE
_	NEUTRAL

(Peripheral Cue)

Q30. To what extent do you agree or disagree that the **statement about the list of risks and side effects** ("This is not a full list of risks and side effects. Talk to your doctor and read the patient labeling for more information") was:

[PROGRAMMER: Randomize order of Q30a-f.]

	Strongly	Somewhat	Neither	Somewhat	Strongly
	disagree	disagree	agree nor	agree	agree
			disagree		
a. Noticeable					
b. Believable					
c. Distracting					
d. Important					
e. Clear					
f. Too long					
g. Helpful					

[Next page: Screen 13]

(FDA Perceptions/Knowledge)

Q31. Please rate your agreement or disagreement with each of the following statements.

OMB Control # Expires	:
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[PROGRAMMER: Randomize order of Q31a-h]

	Strongly disagree	Somewhat disagree	Neither disagree nor agree	Somewhat agree	Strongly agree
a. The FDA only approves prescription drugs that have been found to be extremely effective					
b. The FDA only approves prescription drugs that do not have serious side effects					
c. Only prescription drugs that have been found to be extremely effective can be advertised to consumers					
d. Prescription drugs that have serious side effects cannot be advertised to consumers					
e. The FDA approves all prescription drug TV commercials before they can be shown to the public					
f. All of the information in prescription drug TV commercials is true and accurate					
g. I believe in all of the information provided in prescription drug TV commercials					
h. Only the safest prescription drugs are allowed to be advertised to the public					

[Next page: Screen 14]

[SCRIPT] Now we will ask a few questions to help us describe our sample of participants.

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(Subjective Health Literacy)	(Subjective	Health	Literacy)
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	o you have someone or written material fro			ou read instructions,
1	2	3	4	5
Never	Occasionally	Sometimes	Often	Always
Q33. How confide	ent are you filling out	medical forms by y	ourself?	
1	2	3	4	5
Not at all confident	A little bit	Somewhat	Quite a bit	Extremely confident
(Perceived illness	knowledge)			
Q34. In general, h	now much do you fee	l you know about [c	condition]?	
1	2	3	4	5
Nothing at all	Only a slight amount	Some	A good bit	A lot
Q35. In general,	how much do you fe	el you know about	treatments for [con	dition]?
1	2	3	4	5
Nothing at all	Only a slight amount	Some	A good bit	A lot
[PROGRAMMER	: If Respondent answ	vered "no" to S3b, S	SKIP to Q37]	
Q36. How long ha	ve you been taking p	rescription drugs fo	or [condition]?	
□ At □ At □ At □ At □ At	ss than 2 weeks least 2 weeks but less least 2 months but les least 6 months but les least 1 year but less the	ss than 6 months ss than 1 year han 5 years		
Q37. In what year	were you diagnosed	with [medical cond	ition]?	
				This includes any private s well as a government

OMB Control # ____ Expires ____

program like Medicare or Medicaid.
□ Yes □ No [Skip to Q40] □ Don't Know [Skip to Q40]
Q39. Does your current insurance plan help pay for prescription drugs?
□ Yes
□ No
Don't Know
Q40. What did you use to complete today's survey?
 Desktop computer
□ Laptop computer
Tablet computer (e.g., Apple iPad, Samsung Galaxy Tab)Mobile phone or smartphone
Other:
Q41. Are you currently taking [DRUG]?
□ Yes
□ No
□ Don't Know
[Next page: Screen 15]
(Attitudes toward Disclosures; From Thomas et al., 2013)
[SCRIPT] We would now like to ask you some questions about how you feel about the use of disclosures.
A disclosure qualifies, clarifies, or otherwise limits a specific advertising claim.
Examples of disclosures include:
"Certain rules and restrictions apply"
• "Results not typical"
• "This is not a full list of risks and side effects. Talk to your doctor and read the patient labeling for more information"

"Past performance is not necessarily indicative for future performances and transactions in financial products (including but not limited to securities, futures, options and other financial

"Prices include all cost to be paid by individual except for taxes, licensing, and registration".

"This statement has not been evaluated by the Food and Drug Administration"

instruments) give rise to risks,"

OMB Control # _____ Expires _____

• "Pay no interest for one year. If you transfer a balance from another card, you will be charged a 3% fee."

Q42. Please indicate your level of agreement with each of the following items.

[PROGRAMMER: Randomize order of Q42a-h]

		Strongly disagree		Neither disagree nor agree		Strongly agree
a.	I think it should be illegal for companies to use			nor agree		
b.	disclosures. [R] Disclosures are immoral. [R]					
c.	Disclosures are ethical.					
d.	Disclosures only trick consumers. [R]					
e.	Disclosures stand out from the background.					
f.	The size of disclosures is too small. [R]					
g.	In television advertising, companies do not provide consumers with enough time to read disclosures. [R]					
h.	Disclosures are easy to read.					

(R indicates items that need to be reverse coded)

[Next page: Screen 16	[Next	nage:	Screen	16
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Q43. Would you like to receive the patient labeling	ng for [DRUG] at the end of this survey to learn more
about the complete list of risks and side effects?	

Yes
No

Q44. What is your gender?
□ Male □ Female
Q45. What is the highest level of school you have completed or the highest degree you have received?
Less than high schoolHigh school graduate—high school diploma or the equivalent (for example: GED)
 Some college but no degree Associate degree in college Bachelor's degree (for example: BA, AB, BS) Advanced or post-graduate degree (for example: Master's degree, MD, DDS, JD, PhD, EdD)
Q46. Are you:
Hispanic or LatinoNot Hispanic or Latino
Q47. What is your race? You may select one or more races.
American Indian or Alaska Native Asian Black or African American Native Hawaiian or other Pacific Islander White
Q48. What is your household income?
 Less than \$30,000 per year \$30,001 - \$75,000 per year \$75,001 - \$150,000 per year \$150,001+ per year
[End time:]
[Next page: Screen 17]
[SCRIPT] The purpose of this research is to learn about consumer reactions to prescription drug advertising. In order to get your realistic reaction to this information, we used a real product; however the prescription drug ad was modified for the purpose of this study. Use of the brand name does not imply endorsement of the product by FDA. Please see your healthcare professional for questions about [condition].
You have been very helpful. Thank you very much for your participation!

OMB Control # ____ Expires ____

[PROGRAMMER: If Respondent chooses "Yes" to Q43, at the end of the survey, after the debriefing, provide a link [or attach a PDF] to the patient labeling for the drug and include the following script: [SCRIPT] You indicated that you would like to receive the patient labeling for [DRUG] at the end of this survey to learn more about the complete list of risks and side effects. In the link below you will find the patient labeling for [DRUG]. Please see your healthcare professional for questions about [condition].

END