

[PLEASE SHOW THE FOLLOWING STATEMENT AT THE BOTTOM OF THE FIRST SCREEN IN SMALL FONT]

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

OMB Control #TBD. Expires TBD.

[FORCE TO ANSWER ALL QUESTIONS]

[DISPLAY ON THE SAME SCREEN WITH S1]

First, please answer the following questions.

S1. What is your current occupation?

- Healthcare Provider (e.g., physician, nurse, counselor, physical therapist) → TERMINATE
- Pharmaceuticals (e.g., pharma rep) → TERMINATE
- Market research / Advertising → TERMINATE
- None of the above → CONTINUE TO S2

S2. Have you ever experienced any chronic or long-lasting pain (more than aches and pains that go away quickly or are minor)?

- Yes → CONTINUE TO S3
- No → SKIP TO S6

S3. Did you experience this chronic or long-lasting pain for at least six months?

- Yes → CONTINUE TO S4
- No → SKIP TO S6

S4. Do you still have this chronic or long-lasting pain?

- Yes → ASSIGN TO CHRONIC PAIN GROUP
- No → CONTINUE TO S5

S5. Have you taken any medication for this chronic or long-lasting pain in the last 12 months?

- Yes → ASSIGN TO CHRONIC PAIN GROUP
- No → CONTINUE TO S6

S6. Have you ever been diagnosed by a health professional with high blood pressure?

- Yes → CONTINUE TO S7
- No → HOLD FOR MAIN STUDY WAVES 3 AND 4

S7. Do you still have high blood pressure?

- Yes → ASSIGN TO HYPERTENSION GROUP
- No → CONTINUE TO S8

S8. Have you taken any medication for high blood pressure in the last 12 months?

Yes → ASSIGN TO HYPERTENSION GROUP

No → HOLD FOR MAIN STUDY WAVES 3 AND 4