

Attachment Q: Semi-Structured Reabstraction Telephone Protocol

Form Approved
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Exp. Date : _____

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- Introduction
 - This is [new Field Representative's name]; I am a colleague of [previous Field Representative's name] at the U.S. Census Bureau. I'm calling for the Centers for Disease Control and Prevention concerning your recent participation in the National Hospital Ambulatory Medical Care Survey.

- Explain why calling
 - The CDC is conducting a small study to verify the consistency of data previously collected for NHAMCS, to validate our data collection procedures. For this study, I will visit your [emergency service area/clinic/ambulatory surgery location] to reabstract data from 10 medical records previously abstracted by [previous Field Representative's name].
 - Your participation would only involve pulling and refiling the 10 medical records that have been randomly selected for reabstraction.

- Share confidentiality, informed consent, and voluntary participation information
 - As with the original NHAMCS survey, all information which would permit identification of an individual, a practice, or an establishment will be held confidential.
 - Participation is voluntary, but will assist greatly in helping us ensure the consistency of our data collection procedures.

- Set up time to reabstract
 - Make appointment to come in and reabstract.

- Thank you and closure.
 - Verify phone number and address for followup.