### Attachment 2f

### National Health and Nutrition Examination Survey (NHANES) Multi-Mode Screening Feasibility Study Screen Shots

| National Health and<br>Nutrition Examination Survey | nhanes |
|---|--------|
| User Account:  Password:  Forgot Password?  Log in  |        |
|   |        |

Logon screen. The respondent will use the user account and password included in their Web Screener advance letter to logon.

Home | Log out

Take Survey

### Assigned Survey(s)

National Health and

| # |              | Survey              | Survey Status | Status Date         |
|---|--------------|---------------------|---------------|---------------------|
| 1 | Start Survey | NHANES Web Screener | Not Started   | 09/13/2015 22:11:22 |

**Nutrition Examination Survey** 

Once the respondent successfully logs on they will see the status of the web screener which, the first time through, will be "Not Started". However this could change if they stop and come back later to complete the web screener.



Language: English ▼

Welcome to the National Health and Nutrition Examination Survey (NHANES). This is the first step in helping to learn more about the health habits in the U.S.

This is a secure website. All the information that you give us is voluntary and will be kept in the strictest confidence. Your name will not be attached to any of your answers without your specific permission.

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OMB no. 0920-0950 Expires: 12/31/2017

Public reporting burden of this collection of information is estimated to average 20 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, MS D-74, Atlanta, AS 30333. ATTN: PRA (0520-0550).

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Click Next to begin.

Next

Save and Continue Later

This introductory text contains the Assurance of Confidentiality and the OMB number and expiration date.

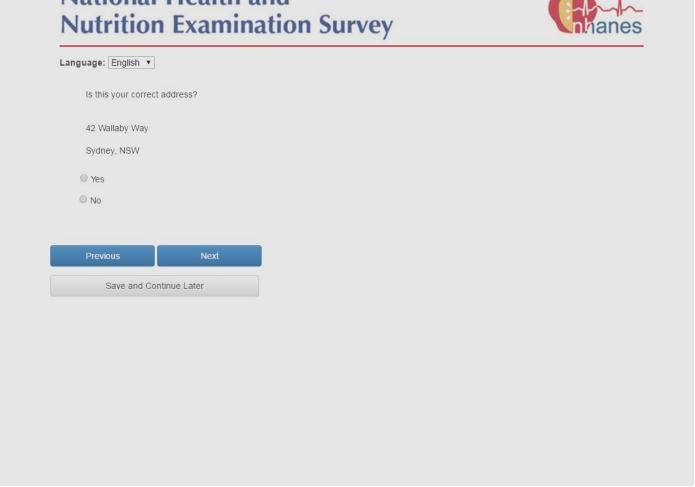


| anguage: English ▼         |  |
|----------------------------|--|
| Are you 18 years or older? |  |
| O Yes                      |  |
| ● No                       |  |
| Save and Continue Later    |  |
| Save and Continue Later    |  |
|                            |  |
|                            |  |
|                            |  |
|                            |  |

If the response is "No", then the Web Screener will terminate because the respondent has indicated that he is not 18 years of age or older.

## **National Health and** Language: English •





If the response is "Yes", then the screen on page 12 is skipped.

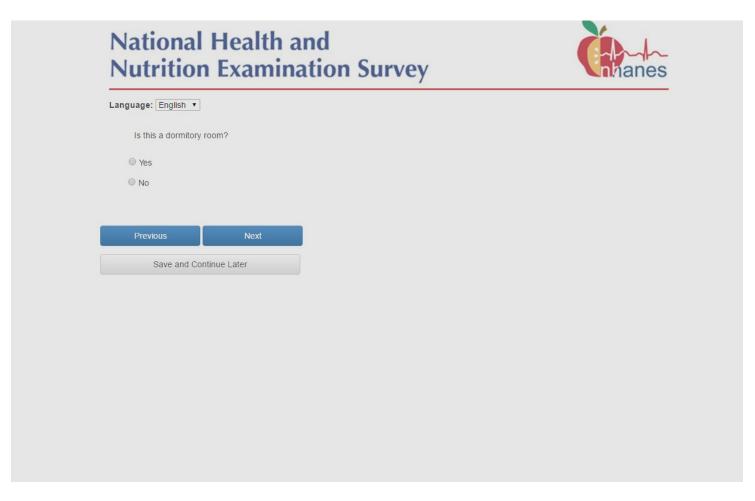
If the response is "No", then go to page 13.



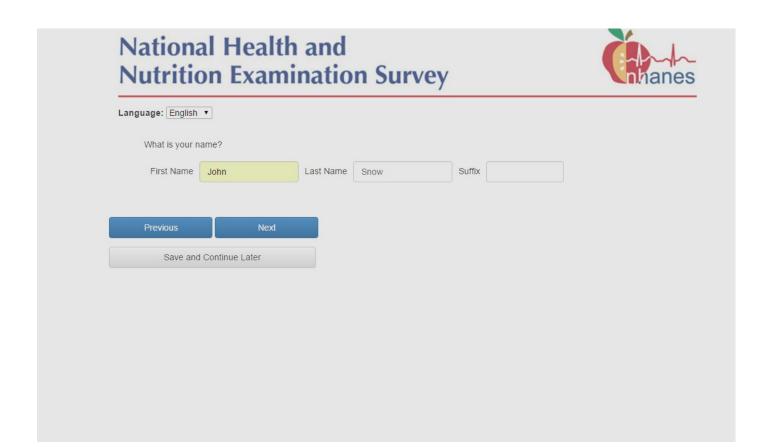
| Please enter your compl |       |            |                       |  |
|-------------------------|-------|------------|-----------------------|--|
| Street Number           |       |            |                       |  |
|                         | S     | treet Name | Apartment/Unit Number |  |
| City                    | State | Zip        |                       |  |
|                         |       | _          |                       |  |
| Previous                | Next  |            |                       |  |
| Save and Continue       | Later |            |                       |  |

The respondent is asked to enter their correct address since they stated in the prior question that the address displayed was not correct.

If the address is changed in anyway a flag is set indicating that the field office needs to review the change prior to sending an interviewer to the household to complete the in person screener.



If the response is "Yes", then the income question on page 32 is skipped.





| guage: English 🔻  |   |   |
|---|---|---|
| Including babies or young childrent, what usually lives somewhere else. | t is the total number of people who live in the house | ehold? Please do not include anyone who |
|   |   |   |
| Previous Next   |   |   |
| Save and Continue Later   |   |   |
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|                         |                            |                                  | ehold have the same name, please fi | Il out the last name and/or |
|-------------------------|----------------------------|----------------------------------|-------------------------------------|-----------------------------|
| suffix fields (Please   | do not to include anyone v | who usually lives somewhere else | e.)                                 |                             |
| First Name              |                            | Last Name                        | Suffix                              | Delete                      |
| John                    |                            | Snow                             |                                     |                             |
| Sansa                   |                            | Stark                            |                                     |                             |
| Brandon                 |                            | Stark                            |                                     |                             |
|                         |                            |                                  |                                     |                             |
| Previous                | Next                       |                                  |                                     |                             |
| Previous  Save and Cont |                            |                                  |                                     |                             |
|                         |                            |                                  |                                     |                             |
|                         |                            |                                  |                                     |                             |
|                         |                            |                                  |                                     |                             |

The respondent will click the "Add Member" button to create a new row for each member of the household that needs to be added.

If a person needs to be removed from the list, the respondent clicks the 'Delete' box and presses the 'Next' button.

# National Health and Nutrition Examination Survey Language: English T You have living here: First Name John Sansa Brandon Next Save and Continue Later

This is a confirmation screen which shows all of the household members entered on the roster.



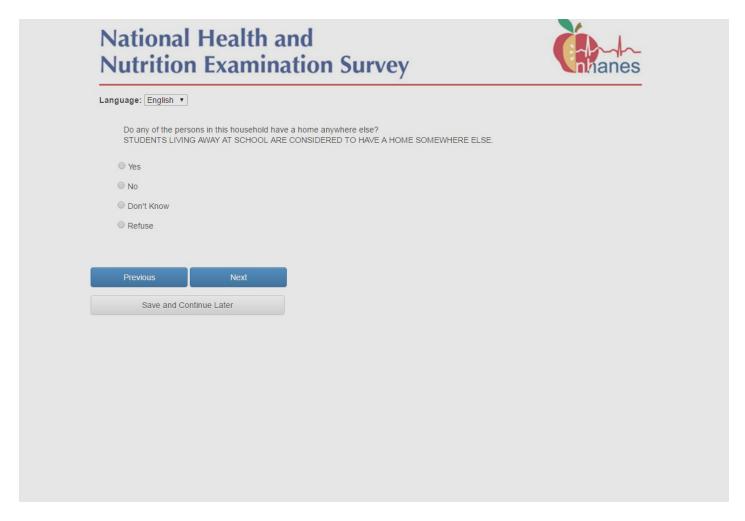
Language: English ▼

|  | Yes | No |
|--|-----|----|
| Are there any babies or small children that you did not include?                                   | 0   | 0  |
| Are there any lodgers, boarders, or persons in your employ who live here that you did not include? | 0   | 0  |
| Is there anyone who usually lives here but is now away from home?                                  | 0   | 0  |
| Is there anyone else living or staying here?   | 0   | 0  |

| Previous    | Next          |
|-------------|---------------|
| Save and Co | ontinue Later |

These questions confirm that all household members were entered and that the roster is complete. They are intended to help the respondent remember any household members whom they may have initially forgotten.

If any questions are marked "Yes", then the Web Screener will go back to page 16 so that they can add to the roster. A blank row will be displayed for them to fill in the person missed.



If the response is "Yes", then go to page 20.

If the response is "No", then go to page 21.

# National Health and Nutrition Examination Survey Language: English Where does each person usually live and sleep: here or somewhere else? First Name John Sansa Brandon Next Save and Continue Later

The respondent will select "Lives Here" or "Lives Elsewhere" for each household member listed on the roster.

If "Lives Elsewhere" is selected, the person is removed from the roster because it is assumed that he/she is not a member of the household and may be eligible at another address.



| Nutrition Examination Survey                                      | nhanes |
|---|--------|
| nguage: English ▼   |        |
| Who owns or rents this home? If more than one person, select one. |        |
| •   |        |
| Previous Next   |        |
| Save and Continue Later   |        |
| Save and Continue Later   |        |
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Household members will be displayed in the dropdown list. Selected household member is defined as the head of household. In subsequent questionnaires in the survey there are specific questions asked about the head of household.



| Language: English ▼   |                        |  |                                    |      |
|-----------------------|------------------------|--|------------------------------------|------|
| Are you or any of the | persons in this househ | nold now on full-time active duty with | the Armed Forces of the United Sta | tes? |
| ○ Yes                 |                        |  |                                    |      |
| ◎ No                  |                        |  |                                    |      |
| O Don't Know          |                        |  |                                    |      |
| Refuse                |                        |  |                                    |      |
| Save and Contin       | nue Later              |  |                                    |      |
| Previous              | Next                   |  |                                    |      |
|                       |                        |  |                                    |      |
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|                       |                        |  |                                    |      |

If the response is "Yes", then go to page 23.

If the response is "No", then go to page 25.



| nguage: English ▼              |  |          |
|--------------------------------|--|----------|
| Who is on full-time active d   | luty with the Armed Forces of the United States? |          |
| First Name                     | Last Name  | Military |
| John                           | Snow   | Yes ▼    |
| Sansa                          | Stark  | No ▼     |
| Brandon                        | Stark  | No ▼     |
| Previous  Save and Continue La | Next ater  |          |
|                                |  |          |
|                                |  |          |
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|                                |  |          |

If the respondent indicates that someone in the household is on full-time active duty with the Armed Forces of the United States by marking the member with "Yes", then go to page 24.

If all household members listed have a response of "No". then go to page 25.



| Where does John Snow usually live and sleep; here or somewhere else?  Here Somewhere Else Don't Know | Nutrition Examination Survey   | nhanes |
|--|--|--------|
| <ul> <li>Here</li> <li>Somewhere Else</li> <li>Don't Know</li> <li>Refuse</li> </ul> Previous Next   | anguage: English ▼   |        |
| <ul> <li>Somewhere Else</li> <li>Don't Know</li> <li>Refuse</li> </ul> Previous Next                 | Where does John Snow usually live and sleep; here or somewhere else? |        |
| Don't Know     Refuse  Previous  Next  | ● Here   |        |
| Previous Next  | O Somewhere Else   |        |
| Previous Next  | O Don't Know   |        |
|  | Refuse   |        |
|  |  |        |
|  | Previous Next  |        |
| Save and Continue Later  |  |        |
|  | Save and Continue Later  |        |
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This question will cycle through for each member flagged as full-time active duty with the Armed Forces on page 23. If "Somewhere Else" is selected the person is removed from the roster because it is assumed that he/she is not a member of the household and could be eligible at another address.



| Language: Eng | sh ▼  |   |  |
|---------------|---|---|--|
|               | e who lives here <b>ever</b> served on active do<br>just entered who is currently on active d | uty in the U.S. Armed Forces, Military Reserv<br>duty.) | es, or National Guard? (Do not include |
| Yes           |   |   |  |
| ◎ No          |   |   |  |
| O Don't Kno   | N   |   |  |
| Refuse        |   |   |  |
| Save          | and Continue Later  |   |  |
| Save          | and Continue Later  |   |  |
|               |   |   |  |
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There are no skips or roster changes regardless of the answer to this question.



| Nutrition  | Examination Survey      | nhanes |
|--|-------------------------|--------|
| _anguage: English ▼<br>Next, we will ask about eac | ch person individually. |        |
| What is your gender?                               |                         |        |
| Male   |                         |        |
| O Female   |                         |        |
| On't Know  |                         |        |
| Refuse   |                         |        |
| Save and Continu                                   | ue Later                |        |
| Save and Continu                                   | ue Later                |        |
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The questions on pages 26-31 are cycled through for each household member listed on the final household roster. The cycle begins with the respondent and continues down the list of household members inserting 'you' or the person's name as needed.



| Next, we will ask about each person individually.  What is Sansa's gender?  Male Female Don't Know Refuse  Previous Next  Save and Continue Later | vutritioi               | Examination Survey        | nhanes |
|---|-------------------------|---------------------------|--------|
| What is Sansa's gender?  Male Female Don't Know Refuse  Previous Next   | anguage: English ▼      |                           |        |
| <ul> <li>Male</li> <li>Female</li> <li>Don't Know</li> <li>Refuse</li> </ul> Previous <ul> <li>Next</li> </ul>                                    | Next, we will ask about | each person individually. |        |
| <ul> <li>□ Female</li> <li>□ Don't Know</li> <li>□ Refuse</li> </ul> Previous Next  | What is Sansa's ge      | ender?                    |        |
| <ul> <li>□ Don't Know</li> <li>□ Refuse</li> <li>Previous</li> <li>Next</li> </ul>  | Male                    |                           |        |
| © Refuse  Previous Next   | Female                  |                           |        |
| Previous Next   | O Don't Know            |                           |        |
|   | Refuse                  |                           |        |
| Save and Continue Later   |                         |                           |        |
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| Does Sansa consider herself to be Hispanic, Latino, or of Spanish origin?  Yes  No  Don't Know | utrition Examination Survey   | nnanes |
|--|---|--------|
| ○ Yes ○ No ○ Don't Know ○ Refuse  Previous Next  | uage: English ▼   |        |
| ○ No ○ Don't Know ○ Refuse  Previous  Next   | Does Sansa consider herself to be Hispanic, Latino, or of Spanish origin? |        |
| Don't Know  Refuse  Previous  Next   | ○ Yes   |        |
| Previous Next  | ◎ No  |        |
| Previous Next  | Opn't Know  |        |
|  | ○ Refuse  |        |
| Save and Continue Later  | Previous Next   |        |
|  | Save and Continue Later   |        |
|  |   |        |
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| Language: English •   |  |
|---|--|
| What race do you consider Sansa to be? Please select one or more. |  |
| American Indian or Alaskan Native                                 |  |
| Asian   |  |
| Asian Indian  |  |
| Cambodian   |  |
| Chinese     Filipino  |  |
| Hmong   |  |
| Japanese  |  |
| Korean  |  |
| Laotian   |  |
| Pakistani   |  |
| • Thai  |  |
| Metnamese   |  |
| Other Asian   |  |
| Black or African American   |  |
| Native Hawaiian or Pacific Islander                               |  |
| White   |  |
| Other   |  |
|   |  |
| Previous Next   |  |
| Save and Continue Later   |  |
|   |  |
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If "Other" race is checked but "Asian" AND "Black" are not checked, then go to page 30.



| Language: English •  |  |
|--|--|
| Do any of these groups represent Sansa's national origin or ancestry?  Asian Indian  Bangladeshi  Bengalese  Bharat  Bhutanese  Bumese  Cambodian  Cantonese  Chinese  Dravidian  Filipino  Goanese  Hmong  Indochinese  Indonesian  Iwo Jiman  Japanese  Korean  Laohmong  Laotian  Madaysian  Madaysian  Maldivian  Mong  Napalese  Nipponese  Okinawan  Pakistani  Siamese  Singaporean  Si Lankan  Talwanese  Thai |  |
| Vietnamese  Yes  No  |  |
| O Don't Know   |  |
| © Refuse   |  |

If the answer to this question is "Yes", the person's race is coded by the system as Asian. If "No", "Don't Know" or "Refused" is selected, the person's race remains as '"Other".



| guage: English ▼      |          |  |  |
|-----------------------|----------|--|--|
| About how old is Sans | a?       |  |  |
| 0-11 mos.             |          |  |  |
| ○ 1-2 yrs.            |          |  |  |
| 3-5 yrs.              |          |  |  |
| 6-11 yrs.             |          |  |  |
| 12-19 yrs.            |          |  |  |
| 20-29 yrs.            |          |  |  |
| 30-39 yrs.            |          |  |  |
| 40-49 yrs.            |          |  |  |
| O 50-59 yrs.          |          |  |  |
| © 60-69 yrs.          |          |  |  |
| O 70-79 yrs.          |          |  |  |
| © 80+ yrs.            |          |  |  |
| O Don't Know          |          |  |  |
| Refuse                |          |  |  |
|                       |          |  |  |
| Destribute            | Next     |  |  |
| Previous              | Next     |  |  |
| Save and Continu      | ie Later |  |  |



| Nutrition examination survey  | Manes |
|---|-------|
| Language: English ▼   |       |
| Please think for a moment about the various sources from which the members of this household red that is from 6/2015 to 5/2016. Thinking about all the sources of income, please tell me whether the this household during the last 12 months was more or less than \$3,000.75. |       |
| Note: if income is equal to \$3,000.75, select 'less.'  |       |
| ● More  |       |
| ○ Less  |       |
| O Don't Know  |       |
| O Refuse  |       |
| Save and Continue Later   |       |
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This question is asked of household where at least one household member is non-Hispanic, non-black, and non-Asian to select participants as part of the low-income white/other sample domain.



| uage: English ▼                               |                      |            |   |
|---|----------------------|------------|---|
| Please enter your telephone number in case we | need to contact you  |            |   |
|   | need to contact you. |            |   |
| Phone ( )                                     | Ext.                 | Phone Type | • |
| Previous Next                                 |                      |            |   |
| Save and Continue Later                       |                      |            |   |
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| National Fleatin and<br>Nutrition Examination Survey | nhanes |
|--|--------|
| inguage: English ▼                                   |        |
| In whose name is the telepone listed?                |        |
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| Previous Next  |        |
| Save and Continue Later                              |        |
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| _anguage: English ▼        |                          |   |  |
|----------------------------|--------------------------|---|--|
|                            | take part in the Nationa | ortant survey. One of our representatives may w<br>Health and Nutrition Examination Survey (NHAI<br>www.cdc.gov/NHANES. |  |
| Please click Next to go to | the submission page      |   |  |
|                            |                          |   |  |
| Previous                   | Next                     |   |  |
|                            |                          |   |  |
|                            |                          |   |  |
|                            |                          |   |  |

Note: For the pilot this screen will be updated to read "Thank you for taking the time to complete this important survey. One of our representatives may will visit your home to talk to you about the opportunity to continue to take part in the National Health and Nutrition Examination Survey (NHANES). If you have any questions, please call 1-800-452-6115 or visit www.cdc.gov/NHANES."



| Language: | English | • |
|-----------|---------|---|

### Submit your Survey

You have reached the end of the survey. If you are satisfied that you are finished with the survey, please click the submit button below. Once you click this button, your survey is considered complete and you will not be able to change your responses.

| Submit Survey    |  |
|------------------|--|
| Return to Survey |  |