**Attachment 5b. Field User Eligibility Screening Script**

Form Approved

OMB No. 0923-XXXX

Exp. Date xx/xx/20xx xxxxxx/xx/xx/20xx

**Caller:** May I speak to [NAME OF Field User or NAME OF Parent of Field User]? I am \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ from the Agency for Toxic Substances and Disease Registry (ATSDR), and I am calling you to tell you about a federally funded study being conducted by the United States Environmental Protection Agency and the Agency for Toxic Substances and Disease Registry to study synthetic turf fields with crumb rubber infill and to determine your willingness to participate in the study. We received your name from FACILITY XX as someone who has used or the parent of someone who has used their synthetic turf fields.

Are you at least 18 years of age and interested in participating in a short 5 minute survey to find out if you (your child) can participate in this project?

*Field user is not 18 years of age:*

**Field User:** No, I am not 18 years of age.

**Caller:** May I please speak to your parent or guardian?

*Field user is not interested in the project:*

**Field User:** No, I am not interested at this time.

**Caller:** Ok, thank you for your time and have a good day.

*END CALL.*

*Field user is interested in the project:*

**Field user:** Yes, I would like to learn more.

**Caller:** The purpose of the exposure characterization study is to determine how people might be exposed to chemicals in the tire crumbs on synthetic turf fields. We need synthetic turf field users to:

1. Respond to a questionnaire to provide information about the types of activities performed on these fields and

2. Participate in an exposure measurement study during an athletic or training activity on a synthetic field with tire crumb rubber infill.

EPA and ATSDR would like to recruit 60 people who engage in physical activities on synthetic turf fields with tire crumbs to fill out a questionnaire about how they use the fields. The questionnaire will ask field users about the types of activities (sports, physical education and training), how much time they spend on fields and how they come in contact with the tire crumbs on the fields. EPA and ATSDR hope to perform measurements for a subset of the people (up to 45) who fill out the questionnaire. Additionally, we will be doing a video recording on a subset of those who participate in the exposure measurements (up to 24).

ATSDR estimates the average public reporting burden for this collection of information as 5 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 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, GA 30333, ATTN: PRA (0923-XXXX).

To find out if you are eligible, I will read the questions to you over the phone. If you are ready I’m going to read you a few questions.

*If respondent is an adult, ask question #1. If respondent is the parent/guardian of a child, skip question #1 and go straight to question #2:*

1. What is your age?....................................................................................................\_\_\_\_\_\_\_\_

If greater than 18 years of age, go to question #4.

*If respondent is the parent/guardian of a child:*

1. What is your child’s age?........................................................................................\_\_\_\_\_\_\_\_\_

*If the child is less than 7 years old, the respondent is not eligible to participate.*

**Caller**: As your child is not at least seven years old, your child is not eligible to participate in this project. I am sorry. Thank you for your time.

*END CALL.*

*If child is 7 years or older:*

1. What is your child’s grade in school? \_\_\_\_\_\_\_\_\_

*For respondents greater than 18 years of age and respondents that are parents/guardians of children at least seven years of age:*

1. Did you (did your child) participate in activities on a synthetic turf field with crumb rubber infill during the previous year? …………………………………………**⬜**

*If no, respondent is not eligible to participate.*

**Caller**: You are not eligible to participate in this project. I am sorry. Thank you for your time.

*END CALL.*

*If yes, the following questions will be used to determine eligibility:*

1. During the previous year, how many months did you (*did your child*) participate in activities on synthetic turf with crumb rubber infill? ……………………………………………………………\_\_\_\_\_\_\_\_\_
2. On average, how many days per week did you (did your child) practice or play football as part of an organized team on outdoor synthetic turf fields with crumb rubber infill? …\_\_\_\_\_\_\_\_\_\_

On indoor synthetic turf fields with crumb rubber infill?....................................\_\_\_\_\_\_\_\_\_\_

1. On average, how many days per week did you (did your child) practice or play soccer as part of an organized team on outdoor synthetic turf fields with crumb rubber infill? ……..\_\_\_\_\_\_\_\_\_\_

On indoor synthetic turf fields with crumb rubber infill?....................................\_\_\_\_\_\_\_\_\_\_

1. On average, how many days per week did you (did your child) participate in physical training, physical education classes, or general recreation use on outdoor synthetic turf fields with crumb rubber infill? …………………………………………………………………………………………………..\_\_\_\_\_\_\_\_\_\_

On indoor synthetic turf fields with crumb rubber infill?....................................\_\_\_\_\_\_\_\_\_\_

1. Would you (would your child) be willing to complete a short survey to collect information about your time and activities that might affect exposures to chemical and microbiological agents associated with synthetic turf fields?.................................................................. **⬜**
2. Would you (would your child) be willing to be recorded on video during a sports practice or play activity on a synthetic turf field with crumb rubber infill? The video would be used to collection information about how people contact the fields and field materials that might affect exposures to chemical and microbiological agents. Yes….. **⬜**

No…....**⬜**

Will Not Have Eligible Activity in Study Time Frame …..**⬜**

1. In addition to the survey, would you (would your child) be willing to participate in a study that measures potential chemical exposures while participating in an activity on a synthetic turf field with crumb rubber infill? This may include collecting a personal air sample (a small tube pinned to your/your child’s shirt), dermal wipe samples, and blood and urine samples around a normal period of your (*his or her*) activity on a synthetic turf field. Air, wipe, and dust samples would be collected around the field during the activity area as well. Yes….. **⬜**

No…....**⬜**

Will Not Have Eligible Activity in Study Time Frame …..**⬜**

1. Do you know anyone else who uses this facility and would you be willing to share their contact information?

Yes….. **⬜**

**Contact Information:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

No…....**⬜**

*The answers from the above questions will be used to determine eligibility at a later time.*

**Caller**: Thank you for answering my questions today. We will use the information you have provided to determine whether or not you (your child) meet the requirements to participate in the study. If you (your child) is determined to be eligible, may I contact you in the future for participation in our study?

*Field user is not interested in participating:*

**Caller:** Thank you for your time.

*END CALL.*

*If field user is willing to participate:*

**Caller**: Thank you for your willingness to participate. I will call you at a later date to notify you of your eligibility and to schedule an appointment time. If you have any questions in the meantime, please feel free to contact me at xxx-xxx-xxxx.

*END CALL.*