
ANTIBIOTIC USE CAMPAIGN – RECRUITMENT SCREENER HEALTHCARE PROFESSIONAL VERSION

Hello. My name is _____ and I work with [recruiting firm]. We are working with ICF, a consulting firm in Atlanta, Georgia and the Centers for Disease Control and Prevention (CDC) to learn about antibiotic prescribing among healthcare professionals and your views about antibiotic resistance and adverse drug events. The interview will last about 45-60 minutes. We will not ask you any questions about your own health status or personal health issues.

If you participate in the interview, you will receive [\$75 (NP/PA), \$125 (physician)] in appreciation of your time. Do you think that you might be interested in participating in this type of interview?

- Yes – continue
- No – thank person for their time and end call

Would you mind if I ask you a few questions in order to determine whether or not you are eligible for the interview?

- Yes – continue
- No – thank person for their time and end call

[Recruiter: Please continue through all questions before letting individual know that they can or cannot be invited to be interviewed based on at least one of the responses they provided.]

Record and keep all screened data.

Recruiter: We will conduct [insert number] interviews with [HCP type]

1. Are you a licensed [physician, nurse practitioner, or physician’s assistant] currently treating patients in a [family practice, emergency department, urgent care clinic, non-critical care hospital unit]?

- Yes
- No (Terminate at end)

[Emergency department ONLY] Are you an attending physician?

- Yes
- No (Terminate at end)

[Urgent care ONLY] Do you own the urgent care clinic where you work?

- Yes
- No (Terminate at end)

[NPs/PAs] As part of your job, do you prescribe antibiotics?

- Yes
- No (Terminate at end)

2. What is your workplace zip code? _____ (Terminate at end any persons with zip codes not on the list from which to recruit)

Public reporting burden of this collection of information is estimated to average 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 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 NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA 0920-1154

3. Are you willing to participate in an interview in English only to discuss your views about antibiotic prescribing, antibiotic resistance, and adverse drug events for a health communications campaign about antibiotic use?
- Yes
 - No (Terminate at end)

TERMINATION SCRIPT: “We appreciate your willingness to answer each of the questions. Unfortunately, you do not meet all of the required criteria to participate in the interview. Thank you for your time.”

4. Thank you for answering those questions. You are eligible to participate in the interview. Are you still interested in participating?
- Yes
 - No (Thank person for their time, terminate, and end the conversation.)

I’m glad that you will be able to join us! The interview will last between 45 and 60 minutes. It will be held online and you will dial into a conference line.

[Recruiter: Provide 2-3 dates/times for the interview.]

5. Do any of these dates and times work for you?
- Yes
 - No (Get other available times for interview OR thank person for their time, terminate and end the conversation)

Please confirm your name, phone number, and e-mail so we can send you instructions on participating in this digital interview. We will also send reminders to this email address. Please also provide your mailing address so that we may send your incentive after the interview is over.

Name	
Mailing Address	
Home Telephone	Pager:
Best Number to Reach You	Cell Phone:
E-mail	

Also, please contact [Recruiter] at [PHONE NUMBER] if your plans change so that we may invite someone from the waiting list to attend instead. Otherwise, we’ll look forward to seeing you on [Month/Day/Year] at [Time].