



## **EARN \$10 AMAZON GIFT CARD BY COMPLETING AN INTERVIEW!**

- Have you had an on-the-job injury since March 2016?
- Have you had an illness related to your job since March 2016?

If you said YES to *either* of these questions, we want you to take part in a short, confidential telephone interview on workplace injuries and illnesses!

The interview will last about 30 minutes and can be completed by phone during day or evening hours.

If you are interested, please complete the screener questions at [\\_\\_\\_\\_\\_.surveymonkey.com](http://_____.surveymonkey.com) to see if you are qualified. A researcher will contact you if you are selected for the Work Injury Study.

Thank you.

## HSOII pretest - Surveymonkey screening questions



Thank you for contacting us about the Work Injury Study. This study is about work-related injuries and illnesses that you may have experienced in the past year. If you are qualified, you may be selected for a 30-minute confidential interview and you will receive a \$10 Amazon gift code to thank you for your time.

ISADLT. Are you at least 18 years old and a resident of the United States?

- 1 YES [CONTINUE]
- 2 NO [TERMINATE]
- 3 DON'T KNOW [TERMINATE]
- 4 REFUSED [TERMINATE]

TERMINATE SCRIPT 1: Thank you very much, but we are only interviewing persons adults 18 and older who live in the United States. STOP [TERMINATE, ASSIGN DISPO]

PVTRES. Do you live in a private residence? By private residence, we mean someplace like a house or apartment.

- 1 YES [CONTINUE]
- 2 NO [TERMINATE]
- 3 DON'T KNOW [TERMINATE]
- 4 REFUSED [TERMINATE]

TERMINATE SCRIPT 2: Thank you very much, but we are only interviewing persons who live in a private residence at this time. STOP [TERMINATE, ASSIGN DISPO]

S1\_SCR1. In the last 12 months, since March of 2016, did you do ANY work for pay or profit?

- 1 YES [CONTINUE]
- 2 NO [TERMINATE]
- 3 DON'T KNOW [TERMINATE]
- 4 REFUSED [TERMINATE]

TERMINATE SCRIPT 3: Thank you very much. That's all of the questions I have. STOP [TERMINATE, ASSIGN DISPO]

**//ASK ALL //**

A2. In the last 12 months, since March 2016, have you experienced any injuries or illnesses related to any job you held?

This could include (but is not limited to) things like sprains, strains, or tears, soreness or pain, bruises, cuts or punctures, broken bones, injury to muscles or joints, open wounds, burns, carpal tunnel syndrome, injury to muscles or joints, open wounds, skin disorders, respiratory conditions, poisoning, hearing loss, disease or infection, cancer, anxiety or depression.

1. Yes, had work-related injuries or illnesses in past 12 months [CONTINUE]
2. No [TERMINATE]
3. DON'T KNOW [TERMINATE]
4. REFUSED [TERMINATE]

TERMINATE SCRIPT 3: Thank you very much. That's all of the questions I have. **STOP**  
[TERMINATE, ASSIGN DISPO]

A2b. Briefly describe the work-related injury or illness and how it happened:

A3a. Did this injury or illness occur on a specific day in the past 12 months OR did it develop over time and you experienced symptoms in the past 12 months?

1. My injury or illness occurred on a specific day during the past 12 months
2. My symptoms developed over time and I experienced symptoms in past 12 months

A3b. In what month and year did this injury or illness occur?

\_\_ MONTH

\_\_ YEAR

EMP. What kind of business or industry did you work in at the time of your injury or illness?

\_\_\_\_\_

JOB. What was your job title or occupation when this injury or illness happened?

\_\_\_\_\_

CLOSE. Thank you very much for completing the screener. If you are qualified someone will contact you to schedule a time to complete the telephone interview.

NAME. What is your first name so we can contact you? \_\_\_\_\_

PHONE. What is the best telephone number to contact you about the study?

(\_\_\_\_) \_\_\_\_\_-\_\_\_\_\_

TIMEZONE: What time zone do you live in?

1. Eastern
2. Central
3. Mountain
4. Pacific
5. Hawaii
6. Alaska

TIME. What is the best time to contact you at this number?

1. Morning (9 AM-noon)
2. Afternoon (Noon - 5 PM)
3. Evening (5 PM - 9 PM)

Thank you again for your help with this important study. If you have any questions you can contact us at [WorkInjuryStudy@icfsurveysupport.com](mailto:WorkInjuryStudy@icfsurveysupport.com)