

**Evaluation of Emergency Use Fact Sheets Regarding Medical  
Countermeasures  
 Screener with Programming Notes  
Version 10-22-2018**

**PROGRAMMER:**

- Program all questions on a new screen.
- Program progresses through the questioning in a “one-way” manner; participants should not be able to return to questions after they have answered them.
- Responses to all questions are voluntary; if respondent does not answer a question, the respondent should stay on the same page and be shown the “MISSING ANSWER(S)” validation, after which they should be allowed to move to the next page. If any of the screener questions are missing after validations, please terminate.
- Include one additional variable in the dataset not shown in this document: **Respondent\_ID** (a unique identifier).
- If ineligible, please show THANK AND TERMINATE MESSAGE on NEW SCREEN:

“Thank you for your time. You do not qualify to participate in the current survey. Please continue to check for opportunities to participate in research through FieldGoals.”

**[INTRO TEXT]**

Thank you for your interest in participating in this project. Please make sure to answer all of the following questions during this initial screening process to determine if you are eligible to participate in this project.

**1. Medical.** Do you have any medical or public health training?

**[SINGLE PUNCH]**

Public reporting burden of this collection of information is estimated to average 65 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 Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0572).

- Yes, I am a medical doctor. 01
- Yes, I am a doctor of osteopathic medicine. 02
- Yes, I am a physician assistant. 03
- Yes, I am a nurse practitioner. 04
- Yes, I am a nurse. 05
- Yes, I am a pharmacist. 06
- Yes, I am a dentist. 07
- Yes, I am a public health professional (e.g., epidemiologist, health communicator, health educator) 08
- Yes, I have attended/am currently in school for any of the above. 09
- No 10

[IF **Medical**=01-09, THEN INELIGIBLE. THANK AND TERMINATE.]

**2. Research.** When, if ever, was the last time you participated in a marketing/research study interview or focus group?

[SINGLE PUNCH]

- Within the past three months 01
- More than three months ago 02
- Never 03

[IF **Research**=01, THEN INELIGIBLE. THANK AND TERMINATE.]

**3. Age.** What is your age?

[OPEN-END NUMERICAL]

years old

[SCHEDULING QUOTA FOR AGE]

Age Category	Scheduling Quota
18-34	25
35-64	47
65 or Older	18

**4. ETH.** Are you of Hispanic or Latino origin?

[SINGLE PUNCH]

- Yes, I am of Hispanic or Latino origin 01

[Type here]

No, I am not of Hispanic or Latino Origin

02

[Type here]

**5. RACE.** What is your race? (Mark one or more races to indicate what you consider yourself to be.)

[MULTI PUNCH]

American Indian or Alaska Native 01  
Asian 02  
Black or African American 03  
Native Hawaiian or Other Pacific Islander 04  
White 05

[SCHEDULING QUOTA FOR COMBINED RACE/ETH]

Race/Ethnicity Category	Scheduling Quota (Schedule no more than):
Asian	4
Black or African American	14
Hispanic or Latino	18
White	54

**6. Sex.** What is your sex?

[SINGLE PUNCH]

Male 01  
Female 02

[SCHEDULING QUOTA FOR GENDER]

Sex Category	Scheduling Quota:
Male	47
Female	48

[Type here]

7. Zip. What is your zip code?

[OPEN-END NUMERICAL]

[SCHEDULING QUOTA FOR ZIP]

Urbanicity Category	Scheduling Quota:
Urbanized areas (50,000 or more people)	64
Urban Clusters (at least 2,500 and less than 50,000 people)	8
Rural (all other areas not defined as above)	18

8. Education. What is the highest level of education you have completed?

[SINGLE PUNCH]

Less than high school	01
High school graduate	02
Some college but no degree	03
Associate degree	04
Bachelor's Degree	05
Advanced or postgraduate degree	06

[SOFT SCHEDULING QUOTA FOR EDUCATION]

Education Category	Scheduling Quota (Schedule no more than):
Less than high school	11
High school graduate	52
Bachelor's degree	27

9. Child Caregiver. Are you a parent of a child under the age of 18 who lives in your household at least part-time?

[SINGLE PUNCH]

Yes	01
No	02

[Type here]

**10. Elderly Caregiver.** Do you provide assistance or support for an individual above the age of 65 at least 1 day per week or for activities that equate to approximately 8 hours of care?

[SINGLE PUNCH]

Yes 01  
No 02

[SOFT SCHEDULING QUOTA FOR CAREGIVER]

Caregiver Category	Scheduling Quota:
Parents	36
Caregiver for elderly	13
Not a caregiver	41

**11. Health Lit.<sup>1</sup>** How confident are you filling out medical forms by yourself?

[SINGLE PUNCH]

Extremely 01  
Quite a bit 02  
Somewhat 03  
A little bit 04  
Not at all 05

HEALTH LEVEL	LITERACY	Response
Limited		Not at all A little bit
Adequate		Somewhat
High		Quite a bit Extremely

[SOFT SCHEDULING QUOTA FOR HEALTH LIT]

Health Literacy Category	Scheduling Quota (Schedule no more than):
Limited	32
Adequate	58

<sup>1</sup> Haun, J., Luther, S., Dodd, V., & Donaldson, P. (2012). Measurement variation across health literacy assessments: implications for assessment selection in research and practice. J Health Commu,17 Suppl 3:141-59. doi: 10.1080/10810730.2012.712615.

[Type here]

[Type here]

**12. Income.** Which of the following categories best describe your total, annual household income?

[SINGLE PUNCH]

- Under \$20,000/year 01
- \$20,001 - \$30,000/year 02
- \$30,001 - \$40,000/year 03
- \$40,001 - \$50,000/year 04
- \$50,001 - \$60,000/year 05
- \$60,001 - \$80,000/year 06
- \$80,001 - \$100,000/year 07
- Over \$100,000/year 08

[SOFT SCHEDULING QUOTA FOR INCOME]

Income Category	Scheduling Quota:
Under \$20,000/year - 30,000/year	30
\$30,001 - \$80,000/year	30
\$80,001 and above	30

[IF **INELIGIBLE** DISPLAY (THANK AND TERMINATE)]

Thank you for your time. You do not qualify to participate in the current survey. Please continue to check for opportunities to participate in research through FieldGoals.

[DISPLAY IF **ELIGIBLE**]

You are eligible to participate in the current project. Please continue to the next screen to provide your contact information and a member of the FieldGoals team will reach out to you to schedule your interview.

[Type here]