

***Attachment 16***  
***Report of Findings***

## **Attachment 16 - Reports of Findings**

The contractor's advance arrangements team will contact county health officials and other community groups at each survey location to obtain lists of health clinics and/or doctors that are both acceptable and accessible to survey participants who do not have a source of health care.

There will be three circumstances in which communication between NCHS and a sample person and possibly source of health care will be made, based on the importance of the survey findings. This discussion describes three levels of referrals.

### **LEVEL I**

A Level I referral is made in situations in which a medical emergency is discovered by a member of the NHANES exam team and verified by the staff physician, who further determines that the medical findings require immediate attention by a health care provider.

An emergency medical kit will be kept in each MEC so that emergency aid can be provided when necessary to stabilize the individual's health status. The preferred manner of handling medical emergencies that occur at the examination center will be to contact local rescue squads, ambulance services and hospital emergency rooms. Contact information for all of these groups is kept at the NHANES examination centers. Level I contacts with a health care provider on behalf of a sample person occur infrequently.

An in-house NCHS response team is available to answer calls from NHANES participants regarding the results from the Report of Findings System. The response team effort works both as a triage mechanism and a surveillance system. A receipt and control record is kept on all sample person inquiries. Also available at no cost to sample persons, is a toll-free telephone number which can be accessed during normal business hours. The response team members consist of a physician and other staff who are Health Educators and have been trained to answer specific questions. Attachment 16-1 is used for MEC exams in which a participant refuses further medical attention.

### **LEVEL II**

Level II contacts occur frequently. An example of a Level II contact is when the examination center staff determines that there are major medical findings that can be expected to cause adverse effects within two or three weeks. When such a condition is identified based upon the information collected during the survey, the NHANES physician will do the following: explain the health concern to the participant, provide the participant with a written report of the findings, and encourage the respondent to see their personal medical provider within the next two weeks. If the survey participant does not have a health care provider or usual source of health care, the NHANES physician will assist the participant by reviewing the list of health care providers that are listed on the referral list for their community. The same procedure will be used for referrals that are needed for oral health care.

A second type of Level II contact occurs when abnormal findings are reported by a contract laboratory or consultant reviewing the examination data for a particular component off-site. The consultant or laboratory will contact NCHS staff immediately. The survey participant will be notified by mail (see Level II letter - Attachment 16-2). The letter will describe the findings and will encourage the survey participants to see medical care from their personal health care provider. This type of Level II contact with a sample person can occur as early as several days after the exam, but usually within two to three weeks of it. Attachments 16-3 and 16-4 shows other examples of a Level II report.

### LEVEL III

Level III refers to the routine Report of Findings that are sent to all examinees whether or not any extremely abnormal findings were present. The Report does not include the results of every test and exam that was performed but it will include a complete summary of findings that are of clinical interest (see Level III Routine Report of Findings – [page 11](#)). The Report will also remind the participant to consult their personal health care provider when the results include abnormal findings. The report includes height and weight results, and, depending on the age of the participant, blood pressure and the results from special studies and laboratory tests. The report packet will also contain the medical referral listing for the specific community and a list of health information resources. See [Attachments 7a and 16-5](#) for the laboratory and examination results which will be given to survey participants.

For examinees under 18 years of age, the reports of findings will be given to their parents or guardians, except for the results of testing for sexually transmitted diseases.

16-1. NHANES MEC RELEASE FORM

Date \_\_\_\_\_

This is to certify that, against the advice of the medical doctor, I:

- am leaving the Mobile Exam Center.
- am removing \_\_\_\_\_ from the Mobile (Name of Sample Person)  
Exam Center.
- choose no further medical referral or follow-up.

By so doing, I assume all responsibility for my act.

Signed

\_\_\_\_\_

Relationship

\_\_\_\_\_

Witness

\_\_\_\_\_

SP ID \_\_\_\_\_



Attachment 16-2 – Early Reporting Letter – General laboratory

**NHANES Early Reporting Letter Example**

*Sample person name*

*Address*

Telephone number

Sample Number:

Dear,

Recently, you participated in a voluntary health examination at special mobile facilities operated by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. We reviewed your test results from your examination on *<insert date>*, and found that some values were abnormal and require your immediate attention.

We cannot be sure whether or not these test results represent illness. Only your doctor can determine that. We **strongly recommend** that you talk to your doctor and give him or her your test results on the enclosed sheet. He or she can evaluate your findings and help you understand what they mean for your health. The NHANES program will not pay for further tests or treatment you may require.

The examination was not intended to be a complete physical examination nor a substitute for a visit to a doctor. Our survey physicians are not authorized to administer treatment or engage in any follow-up with examinees.

You will receive a full report of your examination findings in the future, but we thought you should know about these results right away.

If you have any questions, you may call me at our toll-free number, **1-800-452-6115**, between 8:30 AM and 6 PM Eastern Time, Monday through Friday.

Sincerely yours,

Duong T. Nguyen, DO  
Senior Medical Officer

Enclosure



DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Disease Control and Prevention

National Center for Health Statistics
3311 Toledo Rd.
Hyattsville, Maryland 20782

Laboratory

Table with 5 columns: Test, Result, Units, Flag, Reference Range. Includes sections for Abnormal value(s) (Glucose) and Other values (Glycohemoglobin, ALT, AST, etc.).

\*\*\* Test not done on this age group
^^^ Result still pending
--- Test not done
<< Lower than the limit of detection

Number of hours fasted prior to blood draw: 6 hours



### Attachment 16-3 – Early Reporting Letter – Hepatitis C

Sample person name  
Address  
Sample Number:

Date

Dear <insert name>,

Recently, you participated in a voluntary health examination at special mobile facilities operated by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. As part of this examination your blood was tested for hepatitis C virus. Your blood sample collected on <insert exam date>, indicates you were infected with the hepatitis C virus even though you may never have felt sick.

If no one has told you before that you have the virus, we **strongly recommend** you take this letter to your doctor as soon as you can. You will want to talk with your doctor about possible treatment for hepatitis C and how to prevent spreading the disease to other people. Your doctor may want to do more tests to find out if the virus has done any damage to your liver.

Almost four million Americans are infected with hepatitis C virus. Most persons who are infected carry the virus for the rest of their lives. The infection can lead to liver damage, although many people with the virus never feel sick. We have enclosed a fact sheet with information on hepatitis C. You may obtain other information on hepatitis C by calling toll free:

American Liver Foundation 1-800-223-0179  
Hepatitis Foundation International 1-800-891-0707  
Centers for Disease Control and Prevention 1-888-4HEPCDC  
or the CDC web site: <http://www.cdc.gov/hepatitis>

We want to give you this important information and urge you to see your doctor. The NHANES program will not pay for any follow-up tests or care you may require, but we will be available to talk with you or your physician about this letter and to answer any questions you may have. You can reach me on our toll-free number **1-800-452-6115** between 9 AM and 6 PM Eastern Time, Monday through Friday.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Duong T. Nguyen".

Duong T. Nguyen, DO  
Senior Medical Officer

Enclosure

Enclosure:

<http://www.cdc.gov/hepatitis/hcv/pdfs/hepcgeneralfactsheet.pdf>



# HEPATITIS C

## General Information

### What is hepatitis?

"Hepatitis" means inflammation of the liver. The liver is a vital organ that processes nutrients, filters the blood, and fights infections. When the liver is inflamed or damaged, its function can be affected.

Heavy alcohol use, toxins, some medications, and certain medical conditions can cause hepatitis. However, hepatitis is most often caused by a virus. In the United States, the most common types of viral hepatitis are Hepatitis A, Hepatitis B, and Hepatitis C.



Most people who get infected with the Hepatitis C virus develop a chronic, or lifelong, infection.

### What is Hepatitis C?

Hepatitis C is an infection of the liver that results from the Hepatitis C virus. **Acute** Hepatitis C refers to the first several months after someone is infected. Acute infection can range in severity from a very mild illness with few or no symptoms to a serious condition requiring hospitalization. For reasons that are not known, about 20% of people are able to clear, or get rid of, the virus without treatment in the first 6 months.

Unfortunately, most people who get infected are not able to clear the Hepatitis C virus and develop a chronic, or lifelong, infection. Over time, **chronic** Hepatitis C can cause serious health problems including liver disease, liver failure, and even liver cancer.

### How is Hepatitis C spread?

Hepatitis C is usually spread when blood from a person infected with the Hepatitis C virus enters the body of someone who is not infected. Today, most people become infected with Hepatitis C by sharing needles, syringes, or any other equipment to inject drugs. Before widespread screening of the blood supply in 1992, Hepatitis C was also spread through blood transfusions and organ transplants. While uncommon, poor infection control has resulted in outbreaks in healthcare settings.

While rare, sexual transmission of Hepatitis C is possible. Having a sexually transmitted disease or HIV, sex with multiple partners, or rough sex appears to increase a person's risk for Hepatitis C. Hepatitis C can also be spread when getting tattoos and body piercings in unlicensed facilities, informal settings, or with non-sterile instruments. Also, approximately 6% of infants born to infected mothers will get Hepatitis C. Still, some people don't know how or when they got infected.

### What are the symptoms of Hepatitis C?

Many people with Hepatitis C do not have symptoms and do not know they are infected. If symptoms occur, they can include fever, feeling tired, not wanting to eat, upset stomach, throwing up, dark urine, grey-colored stool, joint pain, and yellow skin and eyes.

### When do symptoms occur?

If symptoms occur with acute infection, they can appear anytime from 2 weeks to 6 months after infection. If symptoms occur with chronic Hepatitis C, they can take decades to develop. When symptoms appear with chronic Hepatitis C, they often are a sign of advanced liver disease.

Continued on next page



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

## How would you know if you have Hepatitis C?

The only way to know if you have Hepatitis C is to get tested. Doctors use a blood test, called a Hepatitis C Antibody Test, which looks for antibodies to the Hepatitis C virus. Antibodies are chemicals released into the bloodstream when someone gets infected. Antibodies remain in the bloodstream, even if the person clears the virus.

A positive or reactive Hepatitis C Antibody Test means that a person has been infected with the Hepatitis C virus at some point in time. However, a positive antibody test **does not** necessarily mean a person still has Hepatitis C. An additional test called a RNA test is needed to determine if a person is currently infected with Hepatitis C.

## Can Hepatitis C be treated?

Yes. However, treatment depends on many different factors, so it is important to see a doctor experienced in treating Hepatitis C. New and improved treatments are available that can cure Hepatitis C for many people.



Testing is the only way to know if you have Hepatitis C.

## How can Hepatitis C be prevented?

Although there is currently no vaccine to prevent Hepatitis C, there are ways to reduce the risk of becoming infected with the Hepatitis C virus.

- Avoid sharing or reusing needles, syringes or any other equipment to prepare and inject drugs, steroids, hormones, or other substances.
- Do not use personal items that may have come into contact with an infected person's blood, even in amounts too small to see, such as razors, nail clippers, toothbrushes, or glucose monitors.
- Do not get tattoos or body piercings from an unlicensed facility or in an informal setting.

## For more information

Talk to your health professional, call your health department, or visit [www.cdc.gov/hepatitis](http://www.cdc.gov/hepatitis).

## Who should get tested for Hepatitis C?

Testing for Hepatitis C is recommended for certain groups, including people who:

- Were born from 1945 - 1965
- Received donated blood or organs before 1992
- Have ever injected drugs, even if it was just once or many years ago
- Have certain medical conditions, such as chronic liver disease and HIV or AIDS
- Have abnormal liver tests or liver disease
- Have been exposed to blood from a person who has Hepatitis C
- Are on hemodialysis
- Are born to a mother with Hepatitis C

Updated 2015

[www.cdc.gov/hepatitis](http://www.cdc.gov/hepatitis)

## Attachment 16-4

{NCHS/NHANES Letterhead}

Date

Dear Parent/guardian,





Recently, your child participated in the National Health and Nutrition Examination Survey conducted by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. We reviewed your child's test results from your examination on <insert date>, and found that some values were abnormal and require your immediate attention.

As part of this examination your child's blood was tested for cytomegalovirus (CMV) infection. Your child's blood sample collected on <insert exam date>, was positive for CMV infection.<sup>1</sup> CMV is a very common infection that most people get. Once a person is infected with CMV, the virus stays in their body for life. Nearly all healthy children infected with CMV have no symptoms and parents will likely not even know that their child has been infected. If your child has serious medical problems including a weakened immune system, CMV can cause more serious problems and we recommend you take this letter to your doctor. Although CMV infection will not likely harm your child, children with a CMV infection can pass the infection to pregnant women. If a woman gets a new infection while pregnant, her baby can be harmed. If your child has CMV and you are pregnant or planning to get pregnant, we recommend you learn about CMV. There are simple steps you can take to lower your risk of infection at this website <http://www.cdc.gov/cmvi/index.html>. You may also call the number below for this information.

The NHANES program will not pay for any follow-up tests or care you may require, but we will be available to talk with you or your physician about this letter and to answer any questions you may have. You can reach me on our toll-free number 1-800-452-6115 between 8:30 AM and 5:30 PM Eastern Time, Monday through Friday.

Sincerely yours,

Duong T Nguyen, DO  
Senior Medical Officer

Enclosure

## Cytomegalovirus Fact Sheet

*Am Fam Physician*. 2003 Feb 1;67(3):526.

What is cytomegalovirus?

Cytomegalovirus (say: "si-toe-meg-ah-low-vi-russ") or CMV is a virus that infects cells and causes them to become enlarged. Many people are infected with CMV and don't even know it. People are usually infected by the time they are two years old or during their teenaged years.

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<sup>1</sup> As evidenced by the presence of CMV IgM and IgG antibodies.



CMV usually causes no long-term problems. However, CMV can cause problems in a newborn if the mother gets the infection during pregnancy.

CMV is only spread through contact with an infected person's body fluids (such as saliva, blood, urine, semen, or breast milk). It can also be sexually transmitted. Careful handwashing with soap and water can help prevent the spread of CMV.

What are the symptoms of CMV?

Usually, there are no symptoms. A few people will have symptoms that are similar to mononucleosis (such as a sore throat, fever, headache, and being tired). People who have weakened immune systems because of human immunodeficiency virus (HIV) or because they received an organ transplant may have severe symptoms.

How will my doctor know if I have CMV?

Because usually there are no symptoms, your doctor won't know that you have CMV. If you do have symptoms, your doctor may test your blood to look for CMV. People who have HIV should be seen by an eye doctor as recommended by their doctor to make sure the virus hasn't infected their eyes. Also, people with HIV should let their doctor know if they are having any painless blurring of their vision, "floaters" only in one eye, light flashes, areas of blindness, and shortness of breath.

Is there a treatment for CMV?

There is no vaccine for CMV. Because CMV is a virus, antibiotics won't work. If your body's immune system is normal, your body should be able to control the infection. If your immune system is weakened, your doctor may use one of several different medicines to treat CMV infection.



# National Health and Nutrition Examination Survey

## Final Report of Findings

*These measurements were obtained as part of a survey and do not represent a medical diagnosis. Interpretation of these measurements must be made by a physician.*

Date of Examination: January 1, 2017

Participant Name: John Q. Public

Participant Age: xxx

Participant Gender: Male

SP ID: 123456

### Body Measurements

Height: 5 ft. 8 in

Weight: 174 lbs.

Body Mass Index (BMI) 26.5

**For a person of your height, your weight is above the range of a healthy weight, and you may be overweight.**

Waist circumference 37 in.

**For men, a waist circumference greater than 40 inches is associated with an increased risk of health problems such as type 2 diabetes, high blood pressure, and cardiovascular disease. This is based on guidelines from the National Heart, Lung and Blood Institute, NIH, 1998.**



# National Health and Nutrition Examination Survey

## Final Report of Findings

### *Blood Pressure & Heart Rate*

		Normal
Systolic Blood Pressure:	128 mm Hg	< 120
Diastolic Blood Pressure:	88 mm Hg	< 80
Resting Pulse Rate:	64 bpm	
Cuff Size:	Adult	

**Your blood pressure today is within the normal range. Based on the Seventh Report of the Joint National Committee on the Prevention, Detection, Evaluation, and Treatment of High Blood Pressure. NIH Publication, 2003.**



### Oral Health

The dental examination you received today is not, and is not intended to be, a substitute for the examination usually given to persons seeking care from their own dentists. Neither a dental history nor x-rays are taken, and therefore the findings are solely the result of what can be seen at the time of the examination.

The examining dentist recommends that you: **Should see a dentist within the next 2 weeks**

The examining dentist observed the following conditions: **Decayed Teeth**  
**Gum disease/problems**  
**Oral hygiene**

### Hearing

The softest sounds you are able to hear are called hearing thresholds. Your thresholds at different frequencies (itches) are reported in the table below. The lower pitched sounds are towards the left of the table and the higher pitched sounds are toward the right. Values of 25 dB or less are considered normal hearing.

Hearing Levels by Ear and Frequency (Air Conduction)

	Frequency (Hz)						
	500	1000	2000	3000	4000	6000	8000
Right Ear (dB HL)	0	0	5	5	5	15	30
Left Ear (dB HL)	5	0	10	5	10	25	10

Your hearing was tested by a trained examiner. Results indicate a slight hearing loss (a few thresholds outside normal limits) in your right ear. In your left ear, results indicate that your hearing is entirely within normal limits.



# National Health and Nutrition Examination Survey

## Final Report of Findings

### Laboratory

Complete Blood Count	Result	Units	Flag	Reference Range
White Blood Count	7.4	( $\times 10^9/L$ )		3.9 - 12.1
Lymphocytes	23.5	(%)		17.8 - 52.8
Monocytes	7.2	(%)		0 - 12
Neutrophils	67.4	(%)		39.7 - 77.8
Eosinophils	1.9	(%)		0 - 8
Basophils	0.1	(%)		0 - 2
Red Blood Count	3.8	( $\times 10^{12}/L$ )		3.7 - 5.2
Nucleated Red Blood Count	0.0	/100 WBC		0.0 - 0.6
Hemoglobin	10.0	(g/dl)	Low	10.4 - 15.2
Hematocrit	35.0	(%)		32 - 45
MCV	78.9	(fL)		73.4 - 98.3
MCH	28.9	(pg)		23.2 - 33.3
MCHC	32.2	(g/dL)		31.4 - 35.1
RDW	12.0	(%)		11.8 - 16.6
Platelet Count	217.0	( $\times 10^9/L$ )		172 - 453



## Final Report of Findings

### Laboratory – Blood Tests

Laboratory Test	Result	Units	Flag	Reference Range
Glucose	96	mg/dL		60 - 109
Glycohemoglobin	5.3	%		< 6.5
AL T	22	U/L		< 40
AST	26	U/L		< 31
Alkaline Phosphatase	41	U/L		39 - 117
Albumin	4.1	g/dL		3.2 - 5.2
Bicarbonate	24	mmol/L		22 - 29
BUN	8	mg/dL		6 - 19
Calcium	9.4	mg/dL		8.4 - 10.2
Cholesterol	246	mg/dL	High	< 200
Triglycerides	129	mg/dL		< 150
HDL	107	mg/dL		> 39
LDL	83	mg/dL		< 130
Serum Creatinine	0.8	mg/dL		0.4 - 1.2
GGT	20	U/L		11 - 51
LDH	100	U/L		94 - 250
Phosphorus	4.2	mg/dL		2.6 - 4.5
Sodium	137	mmol/L		133 -145
Potassium	3.6	mmol/L		3.3 -5.1
Chloride	103	mmol/L		96 - 108
Total Protein	6.8	g/dL		5.9 - 8.4
Uric Acid	4.0	mg/dL		3.4 – 7.0
Bilirubin	0.9	mg/dL		0 -1.0
Serum Folate	9	ng/mL		2 - 21
RBC Folate	245	ng/mL RBC		70 - 424
Blood Lead	1.7	µg/dL		0 - 20
Cadmium	<<<	µg/L		0.3 - 1.2
Manganese	4.2	µg/L		4-15
Selenium	76	µg/dL		104-187
Copper	122	µg/dL		70-140
Zinc	113	µg/dL		80-120
Total Blood Mercury	0.6	µg/L		< 10.0
Fluoride	3.00	mmol/L		0.50-4.00

^^ Results Still Pending

--- Test not done

<<< Lower than the limit of detection

<<< Above the limit of detection

Number of hours fasted prior to blood draw: **12** hours



# National Health and Nutrition Examination Survey

## Final Report of Findings

### Laboratory – Urine Tests

	Result	Units	Flag	Reference Range
Total Urinary Arsenic	6	µg/L		<50
Albumin Creatinine Ratio – 1 <sup>st</sup> collection	33	mg/g	High	< 30

### Laboratory – Other Blood Tests

#### Kidney Health

Your kidneys filter your blood and help control blood pressure. We checked how healthy your kidneys are by doing a blood test that measures how much blood is being filtered. This test is called eGFR (estimated glomerular filtration rate).

**Your estimated glomerular filtration rate (eGFR) was 121 mL/min/1.73m<sup>2</sup>**

**This indicates normal function.**



## Body Composition

### Bone Density

The bone density measurement can help spot persons who may be at greater risk for fracture because they have weaker bones. In general, a lower bone density means that the bone is weaker. Yet, not all men or women with low bone density will have fractures.

The results from your hip (left or right) scan show:

Hip bone density	0.5980 g/cm <sup>2</sup>
T-score	-2.30

**Based on diagnostic criteria as recommended by the World Health Organization<sup>1</sup> and the International Society of Clinical Densitometry<sup>2</sup>, your hip bone density is low.**

The results from our spine (lumbar) scan show:

Spine bone density	0.7860 g/cm <sup>2</sup>
T-score	-2.80

**Based on diagnostic criteria as recommended by the World Health Organization<sup>1</sup> and the International Society of Clinical Densitometry<sup>2</sup>, your spine bone density is very low.**

Most people develop low bone density over many years. We recommend you discuss these results with your doctor as soon as possible, since fractures due to osteoporosis often occur at sites with very low bone density. Your doctor can review your diet and lifestyle and tell you what you can do to prevent more bone loss.

<sup>1</sup>Kanis J, Melton LJ, Christiansen C, Johnstron C, Khaltaev N. The diagnosis of osteoporosis. *J Bone Mineral Research* 1994;9:1137-1141.

[http://onlinelibrary.wiley.com/journal/10.1002/\(ISSN\)1523-4681](http://onlinelibrary.wiley.com/journal/10.1002/(ISSN)1523-4681)

<sup>2</sup>International Society for Clinical Densitometry. **Official positions 2015 Adult and pediatric.** Middletown CT <http://www.iscd.org/official-positions/2015-iscd-official-positions-adult/>

## *Liver Elastography*

Liver elastography measures the stiffness of your liver. In general, having liver stiffness may indicate liver damage.

Information from your liver ultrasound exam showed a value of 2.50 kiloPascals (kPa).

A scoring system<sup>1</sup>, was used to interpret your result. Using this recommended scoring system, the result showed you have little or no liver stiffness. No additional follow-up regarding this test is recommended at this time.

Published in GASTROENTEROLOGY 2005;128:343-350

## *Laboratory - Test on Water*

Fluoride is added to public drinking water to prevent tooth decay. For information on community water fluoridation see: [http://www.cdc.gov/fluoridation/fact\\_sheets](http://www.cdc.gov/fluoridation/fact_sheets)

Tap water was collected from your home on December 1, 2017

The level of fluoride in your tap water was **1.00** mg/L.

Fluoride levels under 4 mg/L are considered to be safe, according to the U.S. Environmental Protection Agency (EPA). Fluoride levels over 2 mg/L may cause tooth discolorations.

If your water's fluoride level is 4 mg/L or higher, we suggest you contact your water utility provider for more information. You can find the name and contact information of the water utility on your water bill.

**Attachment 16-5. List of Exam Measurements Noting Which Results Will Be Given to Respondent**

**Health Measurements:**

- \*Blood Pressure
- \*Heart Rate
- \*Bone Density Measurement (low dosage x-ray of spine)
- \*Oral Health Exam
- \*Height, Weight, and Other Body Measures
- \*Liver Elastography

**Laboratory Tests on Urine:**

- \*Kidney Tests
- \*Pregnancy Test
- \*Sexually Transmitted Diseases (STDs)
- \*Exposure to environmental chemicals
- \*

**Laboratory Tests on Blood:**

- \*Sexually Transmitted Diseases (STDs)
- \*Anemia
- \*Cholesterol
- \*Glucose Measures
- \*\*Infectious Diseases
- \*Kidney Tests
- \*\*Environmental chemicals
- \*Liver Tests
- \*Nutritional Status
- \* Markers of immunization status
- \* Bone Status Test

**Laboratory Tests on Swabs:**

Human Papillomavirus (HPV)

**Private Health Interviews:**

Health Habits  
Mental Health  
Nutrition  
Physical Activity  
Reproductive Health  
Sexual Experience

\*You will receive results

\*\*You will receive results only if abnormal

**Attachment 16-6. Referral for participants who may have suicidal thoughts**

Information volunteered or reported during the Depression Questionnaire can prompt a referral to the Mobile Examination Center (MEC) physician. MEC interviewers send a mental health observation to the physician if the participant's response to question 05DPQ.090 is 1, 2 or 3 – or if the participant becomes visibly upset while answering the question about suicide. The system will alert the physician and coordinator that the examinee needs to be seen by the physician prior to leaving the exam center. The physician is responsible for assessing the mental health concern and facilitating referral as needed.

