**Attachment 1e**

**National Health Interview Survey (NHIS) Follow-up Health Study**

**Appointment scheduling and reminders (phone, email, text)**

Form Approved

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The following document shows example language that will be used to schedule home health visits and remind respondents about those appointments.

The COVID screening questions mentioned in this first part are in Part 2. The visit preparation instructions are in Part 3.

**Example phone, text, and email scripts for SCHEDULING**

**NHIS Follow-up Health Study visits**

**Voice Mail script for scheduler:**

Hello, my name is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I’m calling on behalf of the CDC’s National Center for Health Statistics. I’m trying to reach {participant name} about scheduling a home health visit. Please call our toll-free number (1-833-996-2771) and let us know what time would be convenient for you. That’s (1-833-996-2771). Thank you. We look forward to hearing from you!

**Phone script for scheduler:**

Hello, my name is \_\_\_\_\_\_\_, may I please speak with (PARTICIPANT NAME)?

***Participant not home or unavailable:***

Can you please ask {him/her} to call me at 1-833-996-2771?When is the best time to reach {participant name}?

***Participant is available but person on the phone wants to know who is calling before handing the phone over:***

I’m calling on behalf of the CDC’s National Center for Health Statistics.

***Participant is on the line now but wasn’t the person who answered the phone****:*

Hello, my name is\_\_\_\_\_\_\_\_\_\_\_\_. **[Continue with Speaking to the participant.]**

***Speaking to the participant:***

I’m calling from the National Health Interview Survey Follow-Up Health Study to schedule your home health visit.

***Read if necessary:*** You spoke with an interviewer recently about general health topics like doctor’s visits and health conditions and agreed to be contacted for this study.

**[Answer any questions the respondent has.]**

Before making the appointment, I need to ask about COVID-19 symptoms you may have or possible exposure to someone with COVID-19*.*

**[Read COVID screening questions as shown in Part 2 below.]**

**[If participant responds “YES” to any COVID screening question, schedule the participant’s home health visit for a date more than 14 days after the current date, if the study will still be active at that time.]**

**[If participant responds “No” to all COVID screening questions, schedule the appointment as soon as is convenient for the participant and possible given health representative schedules.]**

There are a few ways you can prepare for the visit.

**[Read visit preparation instructions in Part 3]**

Your home health visit is scheduled with (NAME OF HEALTH REPRESENTATIVE). How would you prefer {she/he} contact you to remind you of the appointment– phone, text, or email? There may be fees to get a text message, depending on your plan.

**Read if necessary:** NCHS will not reimburse you for any text message charges.

[**Enter preferred contact mode and phone number or email address in the scheduling system.]**

Thank you for agreeing to take part in this study.

**Example computer-generated email and text message template**

**Note: Email and text will only be sent if the scheduler is unable to reach the participant by phone and the participant provided an email address or permission to receive texts, respectively**

Email subject line/first line of the text message: Please call to schedule your CDC/NCHS home health visit

Thank you for agreeing to take part in our study.

Please call our toll-free number (1-833-996-2771) to schedule your home health visit at a time that is convenient for you.

We look forward to hearing from you!

National Center for Health Statistics

Centers for Disease Control and Prevention

**Example phone, text, and email scripts for NHIS Follow-up Health Study appointment**

**REMINDER**

**Voice Mail script for health representative:**

Hello, this is (NAME) from <Contractor Name>. I’m calling to confirm your home health visit with me on (MONTH, DAY) at (TIME). Please call 1-833-996-2771 for important reminders about the visit. Thanks and see you soon.

**Phone script for health representative:**

Hello, my name is \_\_\_\_\_\_\_, may I please speak with (PARTICIPANT NAME)?

***Participant not home or unavailable:***

Can you please ask {him/her} to call me at 1-833-996-2771?When is the best time to reach {PARTICIPANT NAME}?

***Participant is available but person on the phone wants to know who is calling before handing the phone over:***

I’m calling on behalf of the CDC’s National Center for Health Statistics.

***Participant is on the line now but wasn’t the person who answered the phone****:*

Hello, my name is\_\_\_\_\_\_\_\_\_\_\_\_. **[Continue with Speaking to the participant.]**

***Speaking to the participant:***

I’m calling from the National Health Interview Survey Follow-Up Health Study. I’m calling to confirm your home health visit with me on (MONTH, DAY) at (TIME).

Before I come to your home, I need to ask you again about COVID-19 symptoms you may have or possible exposure to someone with COVID-19

**[Read COVID screening questions in Part 2 below]**

**[If participant responds “YES” to any COVID screening question, reschedule the participant’s home health visit for a date more than 14 days after the current date, if the study will still be active at that time.]**

Before the visit, please be sure to drink plenty of water, wear short sleeves, and have a photo ID ready. We also recommend that you wear a mask. Some of your tests will be more accurate if you do not eat for 8 hours before the appointment. But you can still take part in the study no matter when you last ate. Do you have any questions?

**[Answer any questions the respondent has.]**

If any of your answers to the COVID-19 questions change before my visit, please call me. My phone number is 1-833-996-2771. Thank you.

**Example computer-generated email message reminder template:**

**Subject line:** APPOINTMENT REMINDER

**Message content:**

Your home health visit is scheduled for (MONTH, DAY) at (TIME).

Reminder: There are a few things you can do to prepare for the visit.

1. Drink water – it is important that you stay hydrated during the health visit
2. Wear short sleeves.
3. Please have photo identification ready to show the health representative. Examples include a driver’s license, non-driver’s ID, military ID, state ID, or passport.

Some of the tests are more accurate if you do not eat for 8 hours before the appointment. But you can still take part in the study no matter when you last ate.

During the home visit the health representative will be wearing full personal protective equipment including a face shield. NCHS recommends you wear a facemask at all times during the visit.

If you have any questions, please call your health representative, {NAME} at {PHELBOTOMIST PHONE NUMBER}.

**Example computer-generated text message reminder template:**

Your home health visit is scheduled for (MONTH, DAY) at (TIME).

If you have any questions, please call your health representative, {NAME} at {PHELBOTOMIST PHONE NUMBER}.

**Part 2. The four CDC-recommended COVID screening questions**

(Note: The second question has been edited for brevity, without changing the meaning of the question)

1. Have you experienced any of the following symptoms in the past 48 hours:

* fever or chills
* cough
* shortness of breath or difficulty breathing
* fatigue
* muscle or body aches
* headache
* new loss of taste or smell
* sore throat
* congestion or runny nose
* nausea or vomiting
* diarrhea

1. Within the past 14 days, have you been in close physical contact with a person who tested positive for COVID-19 or has any symptoms of COVID-19?

**Read if necessary:** Close physical contact means being 6 feet or closer for at least 15 minutes

1. Are you isolating or quarantining because you were diagnosed with COVID-19, you may have been exposed to a person with COVID-19, or are worried that you may be sick with COVID-19?
2. Are you currently waiting on the results of a COVID-19 test?

**Part 3. Pre-visit instructions**

1. Drink water – it is important that you stay hydrated during the health visit
2. Wear short sleeves.
3. Please have photo identification ready to show the health representative. Examples include a driver’s license, non-driver’s ID, military ID, state ID, or passport.

Some of the tests are more accurate if you do not eat for 8 hours before the appointment. But you can still take part in the study no matter when you last ate. Would you like to know more about this topic?

**If the participant says yes:** If you choose not to eat for 8 hours before your appointment, you should still drink water and take your prescription medications as instructed by your doctor during that time. But avoid gum, breath mints, vitamins, and non-prescription medicine. Also, if you need to take any of your prescription medications with food, please do so. Remember, if you do eat in the 8 hours before your appointment, you can still take part in the study, and most of your results will be unaffected.

During the home visit, our health representative will need to be close to you in order to take measurements such as height and blood pressure. Therefore, they are required to wear full personal protective equipment including face shields. We recommend you wear a facemask at all times during the visit.

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**Read if necessary (Answers to possible participant questions)**

**Which tests are more accurate if I don’t eat for 8 hours before the appointment?**

The tests for pre-diabetes, diabetes, and cholesterol.

**What if I have diabetes and take pills or insulin to treat it?**

We will be testing to see how well your medicines are working to treat your diabetes. If your diabetes treatment plan will allow you to wait to take them until after your blood sample is taken, you can do so. Please consult with your medical provider if you have any questions about this. If you need to eat or drink with any of your medications, **please do so**. You can still take part in the study even if you do take your diabetes pills or insulin first.

**What is personal protective equipment?**

Personal protective equipment includes face shield, surgical mask, lab coat or long sleeves under scrubs, gloves, and close-toed shoes.

**Will you provide a mask?**

We will offer you a mask to wear during the visit.

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