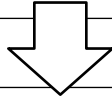


Telephone Screener

The field representative (FR) speaks with the hospital administrator over the phone to determine the eligibility of the hospital.

During this call, the FR determines whether the administrator had received the introductory letter for the NHAMCS study.



If the administrator has received the letter, the FR obtains verbal consent and then proceeds to ask the eligibility questions.

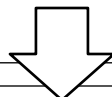
If the administrator has not received the letter or does not recall receiving the letter, the FR will give a brief description of the study stating that it is a **voluntary** study that should **not impact their benefits negatively** should the facility decide not to participate.

Afterwards, the FR obtains verbal consent and then proceeds to ask the eligibility questions.



Once the screener is complete, the FR will attempt to schedule an in-person meeting to conduct the hospital induction.

With some hospitals we've found that the respondent is willing to have some/most of the induction conducted over the phone. Most often, the induction is conducted as an in-person interview.

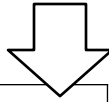


Hospital Induction

During the hospital induction, the FR determines which departments are eligible for the study, and the number of ambulatory units that can be sampled.

The FR also determines whether the facility uses an electronic health record (EHR) system. Questions are about what type of system is being used and which capabilities are functional.

The emergency service area (ESA) is the ambulatory unit (AU) of the emergency department (ED).

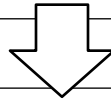


Ambulatory Unit Induction

During the interview, which is usually contacted at the eligible ambulatory unit, the FR first determines if the respondent is aware of the study and their rights as a participant.

Once that is done, the FR determines the specialty type for the eligible ambulatory units. The estimated visit volumes for each eligible ambulatory unit and/or department is also obtained. This information is typically provided by the administrators for each of the eligible departments.

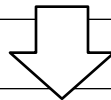
The visit volume information is entered into the computerized instrument, and it determines the sampling pattern to be applied to the patient visits over the 4-week reporting period.



Abstraction

At this point, the FR is ready to retrieve patient visit medical information from the EHR system or medical records. The FR is usually trained by the Health Information Management (HIM) department on how to access the medical records system.

This step is usually conducted by the FR but sometimes they may be assisted by hospital staff.



Reinterview

Hospital administrators will be contacted by telephone and asked about their perception of their induction interview.