

APPENDIX A

Screener

PROGRAMMING NOTES:

Overall

- All questions should be programmed onto a new page/screen. Other page/screen breaks (e.g., for instruction text) are noted throughout as applicable.
- Program progresses through the questioning in a “one-way” manner; participants should not be able to return to questions after they have answered them.
- Refused=-99; Valid Skip=-100
- Include one additional variable in the data set not shown in this document:
Respondent_ID (a unique identifier).

Screener

- 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/screen. If any of the screener questions are missing after validations, please terminate after all screener questions have been shown.
- Per termination criteria, only terminate at end of screener after all screening questions are presented.
- If ineligible, display termination on new page/screen:
I’m sorry, but you are not eligible for this study. There are many possible reasons why people are not eligible. These reasons were decided earlier by the researchers. However, thank you for your interest in this study and for taking the time to answer our questions today.

[INTRO TEXT]

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

[SCREENER]

Question Type: Open End Numerical

Patientcare. In a typical week, what percentage of your time is spent on

direct patient care, such as seeing patients and reviewing their medical records? If you are not sure, please provide your best guess.

Variable Label: Patientcare: Percentage of time spent on patient care

%

Value	Value Label
-99	Refused

[TERMINATE AT END OF SCREENER IF LESS THAN 40%]

Question Type: Single Punch

Specialty. Which best describes your medical specialty?

Variable Label: Specialty: Which best describes your medical specialty?

Value	Value Label
01	Internal medicine
02	General medicine
03	Family medicine
04	Other [TERMINATE]
-99	Refused

Question Type: Open End Numerical

Age. What is your age?

Variable Label: Age: What is your age?

Years old

Value	Value Label
-99	Refused

[RANGE: 18 to 100] [Show "Please provide a number" if incorrect value is entered]

Question Type: Single Punch

Research. When, if ever, was the last time you participated in a market research or survey research study?

Variable Label: Research. When, if ever, was the last time you participated in a market research or survey research study?

Value	Value Label
01	Within the past three months [TERMINATE]
02	More than three months ago
03	Never
-99	Refused

Question Type: Single Punch **Job.** In the past five years up to today, have you worked for any of the following types of organizations and/or industries?

Variable Label: Job In the past five years up to today, have you worked for any of the following types of organizations and/or industries?

Value	Value Label
01	U.S. Department of Health and Human Services [TERMINATE]
02	Marketing [TERMINATE]
03	Advertising [TERMINATE]
04	Pharmaceutical [TERMINATE]
05	No
-99	Refused

[Termination Language]

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