**SCREENER**

**[INTRO TEXT]**

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

**//NEW SCREEN//**

**Question Type:** Open End Numerical

**S1. How old are you?**

**Variable Label:** S1: How old are you?

|  |  |  |
| --- | --- | --- |
|  |  | years old |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| -99 | Refused |

**Question Type:** Single Punch

**S2. Are you trained or employed as a health care professional?**   
**Variable Label:** S2: Are you trained or employed as a health care professional?

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 01 | Yes |
| 00 | No |
| -99 | Refused |

**Question Type:** Single Punch

**S3. Do you work for the U.S. Department of Health and Human Services (HHS)?**

**Variable Label:** S3: Do you work for the U.S. Department of Health and Human Services (HHS)?

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 01 | Yes |
| 00 | No |
| -99 | Refused |

**Question Type:** Single Punch

**S4. Do you work for a pharmaceutical company, an advertising agency, or a market research company?**

**Variable Label:** S4: Do you work for a pharmaceutical company, an advertising agency, or a market research company?

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 01 | Yes |
| 00 | No |
| -99 | Refused |

**[PLEASE TERMINATE IF S1< 18 OR S1=-99 OR S2=01 OR S2=-99 OR S3=01 OR S3=-99 OR S4=01 OR S4=-99]**

**[Note: We will use a quota for health literacy to ensure a range of health literacy skills. Low literacy will be defined as S6 ≥03,]**

**Question Type:** Single Punch

**S6. How often do you need to have someone help you when you read instructions, pamphlets, or other written material from your doctor or pharmacy?**

**Variable Label:** S6: How often do you need to have someone help you when you read instructions, pamphlets, or other written material from your doctor or pharmacy?

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 01 | Never |
| 02 | Rarely |
| 03 | Sometimes |
| 04 | Often |
| 05 | Always |
| -99 | Refused |

**Question Type:** Single Punch

**S25. What is the highest level of education that you have completed?**

**Variable Label:** S25. What is the highest level of education that you have completed?

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 01 | Less than high school |
| 02 | Completed high school |
| 03 | Some college |
| 04 | Associate’s degree |
| 05 | Bachelor’s degree |
| 06 | Postgraduate degree (MA, PhD, MD, JD, etc.) |
| -99 | Refused |

**Question Type:** Single Punch

**Are you?**

**S26. Are you (Male/Female)?**

**Variable label:** S26 Are you (Male/Female)?

|  |  |
| --- | --- |
| Value | Value Label |
| 01 | Male |
| 02 | Female |
| -99 | Refused |

**Question Type:** Single Punch

**S27. Are you Hispanic or Latino?**

**Variable label**: S27 Are you Hispanic or Latino?

|  |  |
| --- | --- |
| Value | Value Label |
| 00 | Not Hispanic or Latino |
| 01 | Hispanic or Latino |
| -99 | Refused |

**Question Type:** Single Punch

**S28. What is your race? You may select one or more races**

Variable label: S28. What is your race? You may select one or more races

|  |  |
| --- | --- |
| Value | Value Label |
| 01 | American Indian or Alaska Native |
| 02 | Asian |
| 03 | Black or African American |
| 04 | Native Hawaiian or other Pacific Islander |
| 05 | White |
| -99 | Refused |

**[CLOSING FOR INELIGIBLE PARTICIPANTS]**

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.

**//NEW SCREEN//**

**[DISPLAY IF ELIGIBLE]**

You are eligible to participate in the current study. Please click the button below to read through our consent form and continue to the survey.