# CET – Annotated Questionnaire (Wave 78)

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| --- |
| *Note: The questions below are the proposed questions for the 78th wave of the Weekly Current Events Tracker (CET). Questions highlighted in yellow will be asked every week; questions highlighted in blue will be rotated into the survey on a monthly basis; and questions highlighted in green are meant to be asked in this wave only or are being asked again to update data on a variable of interest.* |

For the next section we would like to talk about current events.

**// Page Break //**

**//BASE: All respondents//**

**Item #:**Q1
**Question Type**:Single punch

**// Soft Prompt: “We would like your response to this question.”//**

**boost\_auth:** Have you heard that the FDA recently authorized updated vaccines for people ages 12 and older who have received their primary vaccine series?

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | Refused |

**// Page Break //**

**//BASE: All respondents//**

**Item #:** Q2

**Question Type**:Single punch

**// Soft Prompt: “We would like your response to this question.” //**

**beh1\_cet\_r:** Have you received a COVID-19 vaccine?

**Variable Label:** beh1\_cet\_r: Vaccination behavior

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No, I have not received a COVID-19 vaccine |
| 1 | Yes, but I have only received one shot out of the two required shots  |
| 2 | Yes, I have received all of the required shots  |
| -99 | Refused |

**// Page Break //**

**//BASE: beh1\_cet\_r=1 or 2//**

**Item #:** Q3

**Question Type**:Single punch

**// Soft Prompt: “We would like your response to this question.” //**

**vaccine\_id:** Which COVID-19 vaccine did you receive?

**Variable Label:** vaccine\_id: Vaccine ID

|  |  |
| --- | --- |
| **Value**  | **Value Label**  |
| 2 | Johnson & Johnson/Janssen |
| 3  | Moderna |
| 4  | Pfizer-BioNTech |
| 6 | Novavax |
| 5 | Other |
| 99 | I do not remember |
| -99 | Refused |
| -100 | Valid skip |

**// Page Break //**

**//BASE: beh1\_cet\_r=2//**

**Item #:** Q4

**Question Type**:Multi-punch

**// Soft Prompt: “We would like your response to this question.” //**

**booster\_uptake6:** U.S. health officials and medical experts now recommend additional COVID-19 doses after the primary vaccine series (two doses of Pfizer, Moderna, or Novavax; or one dose of Johnson & Johnson).

Boosters are additional doses you may have received after your primary series.

Updated vaccines are COVID-19 vaccines reformulated to better target Omicron variants that were recently authorized for people 12 and older who have received their primary vaccine series. You may have seen the updated vaccines for COVID-19 referred to as “bivalent boosters” or “updated boosters”.

Have you received a COVID-19 vaccine booster dose or updated vaccine dose?

Select all that apply.

**Variable Label:** booster\_uptake6: Booster uptake – Fall 2022

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No [EXCLUSIVE] |
| 1 | Yes, I have received one or more booster dose(s) |
| 2 | Yes, I have received an updated vaccine dose |
| -99 | Refused |
| -100 | Valid skip |

**// Page Break //**

**//BASE: beh1\_cet\_r=2//**

**Item #:** Q5

**Question Type**:Dropdown menu

**// Soft Prompt: “We would like your response to this question.” //**

**last\_dose:** Approximately when did you receive your **most recent** COVID-19 vaccine, booster, or updated vaccine dose? If you do not remember the exact date, give your best guess.

**Variable Label:** last\_dose: Date of most recent dose

Participants select date from range: December 1, 2021 to present

**// Page Break //**

**//BASE: booster\_uptake6=/=2**

**Item #:** Q6

**Question Type**:Single punch

**// Soft Prompt: “We would like your response to this question.” //**

**booster\_likely\_v4:** What is the likelihood that you will get an updated COVID-19 vaccine?

**Variable Label:** booster\_likely\_v4: updated vaccine uptake likelihood

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very unlikely |
| 2 | Somewhat unlikely |
| 3 | Neither likely nor unlikely |
| 4 | Somewhat likely |
| 5 | Very likely |
| -99 | Refused |
| -100 | Valid skip |

**// Page Break //**

**//BASE: beh1\_cet\_r=0 OR -99//**

**Item #:** Q7

**Question Type**:Single punch

**// Soft Prompt: “We would like your response to this question.” //**

**beh2a\_cet:** What is the likelihood that you will get a COVID-19 vaccine?

**Variable Label:** beh2a: Intention to get vaccinated

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very unlikely |
| 2 | Somewhat unlikely |
| 3 | Neither likely nor unlikely |
| 4 | Somewhat likely |
| 5 | Very likely |
| -99 | Refused |
| -100 | Valid Skip |

**// Page Break //**

**//BASE: beh1\_cet\_r=0 OR -99//**

**Item #:** Q8

**Question Type**:Single punch

**// Soft Prompt: “We would like your response to this question.” //**

**beh3a\_cet\_r:** How soon will you get vaccinated?

**Variable Label:** beh3a\_cet\_r: Wait to get vaccinated

|  |  |
| --- | --- |
| **Value**  | **Value Label**  |
| 1  | I will get a vaccine as soon as I can |
| 2  | I will wait to get a vaccine for one or more reasons |
| 3  | I will never get a COVID-19 vaccine |
| -99 | Refused |
| -100 | Valid Skip |

**// Page Break //**

**//BASE: All respondents//**

**Item #:** Q9

**Question Type**:Multi punch

**// Soft Prompt: “We would like your response to this question.” //**

**parent:** Are you the parent of a child or children in the following age groups?

**Variable Label:** parent: Parent of children in following age groups

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Younger than 6 months old |
| 2 | 6 months to <2 years old |
| 3 | 2 to 4 years old |
| 4 | 5 to 11 years old |
| 5 | 12 to 15 years old |
| 6 | 16 to 17 years old |
| 99 | None of the above, I do not have children in those age groups [EXCLUSIVE] |
| -99 | Refused |

**// Page Break //**

**//BASE: parent=2-6//**

**Item #:** Q10

**Question Type**:Single punch grid

**// Soft Prompt: “We would like your response to this question.” //**

**child\_vaxxed\_2:** Has your child(ren) in the following age group(s) received a COVID-19 vaccine?

*Note: If you have more than one child in the same age group, please answer for at least one of them.*

\*Children ages 6 months–4 years old who received a Pfizer vaccine have **3 doses** included in their vaccine series. Children ages 5–17 years old who received a Pfizer vaccine, or children of any age who received a Moderna vaccine, have **2 doses** included in their vaccine series.

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| child\_vaxxed\_2\_2 | 6 months to <2 years old [ONLY SHOW IF parent=2] | child\_vaxxed\_2\_2: 6 months to <2 years old |
| child\_vaxxed\_2\_3 | 2 to 4 years old [ONLY SHOW IF parent=3] | child\_vaxxed\_2\_3: 2 to 4 years old |
| child\_vaxxed\_2\_4 | 5 to 11 years old [ONLY SHOW IF parent=4] | child\_vaxxed\_2\_4: 5 to 11 years old |
| child\_vaxxed\_2\_5 | 12 to 15 years old [ONLY SHOW IF parent=5] | child\_vaxxed\_2\_5: 12 to 15 years old |
| child\_vaxxed\_2\_6 | 16 to 17 years old [ONLY SHOW IF parent=6] | child\_vaxxed\_2\_6: 16 to 17 years old |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No, has not received a COVID-19 vaccine |
| 1 | Yes, has started **but not yet finished** their vaccine series.\* |
| 2 | Yes, has received **all** of the required shots in their vaccine series.\*  |
| -99 | Refused |
| -100 | Valid skip |

**// Page Break //**

**//BASE: child\_vaxxed\_2\_4=2 AND/OR child\_vaxxed\_2\_5=2 AND/OR child\_vaxxed\_2\_6=2//**

**Item #:** Q11

**Question Type**:Single punch grid

**// Soft Prompt: “We would like your response to this question.” //**

**child\_boosted:** Has your child(ren) in the following age group(s) received a COVID-19 vaccine booster or updated vaccine for COVID-19?

*Note: If you have more than one child in the same age group, please answer for at least one of them.*

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| child\_boosted\_4 | 5 to 11 years old [ONLY SHOW IF child\_vaxxed\_2\_4=2] | child\_boosted\_4: 5 to 11 years old |
| child\_boosted\_5 | 12 to 15 years old [ONLY SHOW IF child\_vaxxed\_2\_5=2] | child\_boosted\_5: 12 to 15 years old |
| child\_boosted\_6 | 16 to 17 years old [ONLY SHOW IF child\_vaxxed\_2\_6=2] | child\_boosted\_6: 16 to 17 years old |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No, has not received a COVID-19 vaccine booster shot or updated vaccine for COVID-19 |
| 1 | Yes, has received at least one COVID-19 vaccine booster shot or updated vaccine for COVID-19 |
| -99 | Refused |
| -100 | Valid skip |

**// Page Break //**

**//BASE: All respondents//**

**Item #:**Q12

**Question Type**:Single punch grid

**// Soft Prompt: “We would like your response to this question.” //**

**covid\_risk:** When it comes to getting sick with COVID-19, how concerned are you personally about each of the following?

**//PROGRAMMING NOTE: RANDOMIZE**variables in grid//

|  |  |  |
| --- | --- | --- |
| **Variable Name**    | **Variable Text**    | **Variable Label**    |
| covid\_risk\_1 | Developing short-term COVID symptoms. | covid\_risk\_1: Short term symptoms     |
| covid\_risk\_2 | Developing long-term COVID symptoms.  | covid\_risk\_2: Long term symptoms    |
| covid\_risk\_3 | Being hospitalized because of COVID.     | covid\_risk\_3: Hospitalization  |
| covid\_risk\_4 | Dying because of COVID.   | covid\_risk\_4: Death   |
| covid\_risk\_5 | Infecting family or friends with COVID.    | covid\_risk\_5: Infecting others    |

|  |  |
| --- | --- |
| **Value**    | **Value Label**    |
| 1    | Not at all concerned    |
| 2    | Slightly concerned    |
| 3    | Moderately concerned    |
| 4     | Very concerned    |
| -99    | Refused    |

**// Page Break //**

**//BASE: All respondents//**

**Item #:** Q13

**Question Type**:Single punch grid

**// Soft Prompt: “We would like your response to this question.” //**

**testing2:** COVID-19 tests fall into two categories: Rapid tests (such as antigen tests) give results in a few minutes, and can be at-home tests or tests given at a pharmacy or other location. Laboratory tests (such as PCR tests) can also be taken at home or given at a pharmacy or other location, but must be sent to a laboratory to determine the results and it often takes a few days to receive results.

In the last month, have you…

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| testing2\_1 | Taken a rapid test for COVID-19 | testing2\_1: Took rapid test |
| testing2\_2 | Taken a laboratory test for COVID-19 | testing2\_2: Took laboratory test |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No, I have not taken this kind of test in the last month |
| 1 | Yes, and I tested negative for COVID-19 |
| 2 | Yes, and I tested positive for COVID-19 |
| -99 | Refused |

**// Page Break //**

**//BASE: All respondents//**

**Item #:**Q14-16
**Question Type**:Single punch grid

**// Soft Prompt: “We would like your response to this question.”//**

**lc\_perc3:** Some people experience long COVID (also called long haul COVID or post-COVID conditions), which includes a wide range of new, returning, or ongoing health problems people can experience 3 months or longer after first being infected with COVID.

How much do you agree or disagree with the following statements about long COVID?

**//PROGRAMMING NOTE: randomize variables in grid//**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| lc\_perc3\_1 | Most people who get COVID end up having long COVID. | lc\_perc3\_1: Most get LC |
| lc\_perc3\_2 | Concern about getting long COVID was one of the main reasons I got vaccinated. [ONLY SHOW IF beh1\_cet\_r=1 or 2] | lc\_perc3\_2: Reason got vaccinated |
| lc\_perc3\_3 | Concern about long COVID makes me more likely to get vaccinated. [ONLY SHOW IF beh1\_cet\_r=0 or -99] | lc\_perc3\_3: More likely to get vaccinated |
| lc\_perc3\_4 | Adults are more likely than children to get long COVID. | lc\_perc3\_4: Children less likely than adults |
| lc\_perc3\_5 | Concern about my child(ren) getting long COVID was one of the main reasons I got them vaccinated. [ONLY SHOW IF child\_vaxxed\_2\_2 OR child\_vaxxed\_2\_3 OR child\_vaxxed\_2\_4 OR child\_vaxxed\_2\_5 OR child\_vaxxed\_2\_6=1/2] | lc\_perc3\_5: Concern about children |
| lc\_perc3\_6 | Concerns about long COVID are overblown. | lc\_perc3\_6: Concerns overblown |
| lc\_perc3\_7 | Concern about long COVID has made me more likely to practice preventive behavior (such as masking, social distancing). | lc\_perc3\_7: Preventive behavior |
| lc\_perc3\_8 | At this point, I am more concerned about long COVID than I am about the virus. | lc\_perc3\_8: More concerned about long COVID |
| lc\_perc3\_9 | Concern about long COVID makes me more likely to get an updated COVID vaccine. [ONLY SHOW IF booster\_uptake6=0-1] | lc\_perc3\_9: More likely to get a booster |
| lc\_perc3\_10 | Concern about long COVID was one of the main reasons I got a booster shot. [ONLY SHOW IF booster\_uptake6=1] | lc\_perc3\_10: Reason got a booster |
| lc\_perc3\_11 | Getting a COVID-19 vaccine decreases the chances of getting long COVID. | lc\_perc3\_11: Vaccine decreases risk |
| lc\_perc3\_12 | Concern about long COVID is one of the main reasons I [PIPE “got” if booster\_uptake6=2; “plan to get” if booster\_uptake6=0-1] an updated COVID vaccine. | lc\_perc3\_12: Updated COVID vaccine |

|  |  |
| --- | --- |
| **Value**    | **Value Label**    |
| 1    | Strongly disagree    |
| 2  | Somewhat disagree  |
| 3  | Neither agree nor disagree    |
| 4  | Somewhat agree  |
| 5    | Strongly agree    |
| -99  | Refused  |
| -100 | Valid skip |

**// Page Break //**

**//BASE: All respondents//**

**Item #:**Q17
**Question Type**:Single punch

**// Soft Prompt: “We would like your response to this question.”//**

**lc\_know\_other:** Do you personally know anyone who experienced COVID symptoms lasting 3 months or longer after being diagnosed with COVID-19? Please only think about symptoms that they did not have prior to having COVID.

*Long term COVID symptoms may include tiredness or fatigue; difficulty thinking, concentrating, forgetfulness, or memory problems (sometimes referred to as "brain fog"); difficulty breathing or shortness of breath; joint or muscle pain; fast-beating or pounding heart (also known as heart palpitations); chest pain; dizziness on standing; menstrual changes; changes to taste/smell; or inability to exercise.*

**Variable Label:** lc\_know\_other: Know someone with long COVID

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | Refused |

**// Page Break //**

**//BASE: All respondents//**

**Item #:**Q18
**Question Type**:Single punch

**// Soft Prompt: “We would like your response to this question.”//**

**cv\_diagnose\_8:** Have you ever been diagnosed with or tested positive for COVID-19?

**Variable Label:** cv\_diagnose\_8: Ever diagnosed with or tested positive for COVID

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes, once |
| 2 | Yes, more than once |
| -99 | Refused |

**// Page Break //**

**//BASE: cv\_diagnose\_8=1/2 //**

**Item #:**Q19
**Question Type**:Single punch

**// Soft Prompt: “We would like your response to this question.”//**

**got\_treat:** When you had COVID-19, did you try to get any COVID-specific treatment?

COVID-specific treatments include antivirals (Paxlovid, Veklury, Lagevrio) and monoclonal antibodies (Bebtelovimab).

**Variable Label:** got\_treat: sought COVID treatment

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | I did not try to get COVID-specific treatment |
| 1 | I tried to get COVID-specific treatment, but was not able to get it |
| 2 | I was able to get COVID-specific treatment |
| -99 | Refused |
| -100 | Valid skip |

**// Page Break //**

**//BASE: cv\_diagnose\_8=1/2 //**

**Item #:**Q20
**Question Type**:Single punch

**// Soft Prompt: “We would like your response to this question.”//**

**lc\_self:** Did you experience any COVID symptoms lasting 3 months or longer after being diagnosed with COVID-19? Please only think about symptoms that you did not have prior to having COVID.

*Long term COVID symptoms may include tiredness or fatigue; difficulty thinking, concentrating, forgetfulness, or memory problems (sometimes referred to as "brain fog"); difficulty breathing or shortness of breath; joint or muscle pain; fast-beating or pounding heart (also known as heart palpitations); chest pain; dizziness on standing; menstrual changes; changes to taste/smell; or inability to exercise.*

**Variable Label:** lc\_self: Ever had long COVID

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | Refused |

**// Page Break //**

**//BASE: lc\_self=1 //**

**Item #:**Q21
**Question Type**:Single punch

**// Soft Prompt: “We would like your response to this question.”//**

**lc\_sx\_self:** Are you currently experiencing symptoms of long COVID?

**Variable Label:** lc\_sx\_self: Currently experiencing long COVID symptoms

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 0 | No |
| 1 | Yes |
| -99 | Refused |

**// Page Break //**

**//BASE: All respondents//**

**Item #:**Q22
**Question Type**:Single punch grid

**// Soft Prompt: “We would like your response to this question.”//**

**cv\_sx:**If you were experiencing symptoms of COVID-19, how likely would you be to do each of the following?

**//PROGRAMMING NOTE:  RANDOMIZE options //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| cv\_sx\_1 | Wear a mask in public | cv\_sx\_1: Wear mask |
| cv\_sx\_2 | Isolate from others | cv\_sx\_2: Isolate |
| cv\_sx\_3 | Avoid going out in public | cv\_sx\_3: Avoid public |
| cv\_sx\_4 | Get tested for COVID-19 | cv\_sx\_4: Get tested |
| cv\_sx\_5 | Seek treatment for COVID-19, if you tested positive | cv\_sx\_5: Seek treatment |
| cv\_sx\_6 | Contact a doctor or healthcare provider for guidance | cv\_sx\_6: Contact HCP |

|  |  |
| --- | --- |
| **Value**  | **Value Label**  |
| 1  | Not at all likely  |
| 2  | Slightly likely |
| 3  | Moderately likely |
| 4  | Very likely |
| -99  | Refused  |

**// Page Break //**

**//BASE: All respondents//**

**Item #:**Q23
**Question Type**:Single punch grid

**// Soft Prompt: “We would like your response to this question.”//**

**upvax\_mot:** How likely do you think the following messages would be to motivate someone to get an updated vaccine?

**//PROGRAMMING NOTE:  RANDOMIZE options //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| upvax\_mot\_1 | Updated COVID vaccines offer you the only targeted protection you can get against the Omicron strain out there now. | upvax\_mot\_1: Targeted protection |
| upvax\_mot\_2 | Updated vaccines provide the strongest available protection from the Omicron strain of the COVID virus. | upvax\_mot\_2: Strongest available protection |
| upvax\_mot\_3 | Updated vaccines provide broad protection against COVID and the strongest protection available against the current Omicron strain. | upvax\_mot\_3: Broad protection |
| upvax\_mot\_4 | Updated vaccines protect against both the original COVID strain and the current Omicron strain. | upvax\_mot\_4: OG and current |
| upvax\_mot\_5 | Updated vaccines are designed to provide extra protection against the worst outcomes of COVID. | upvax\_mot\_5: Extra protection against worst outcomes |

|  |  |
| --- | --- |
| **Value** | **Value Label** |
| 1 | Very unlikely |
| 2 | Somewhat unlikely |
| 3 | Neither likely nor unlikely |
| 4 | Somewhat likely |
| 5 | Very likely |
| -99 | Refused |
| -100 | Valid skip |

**// Page Break //**

**//BASE: All respondents//**

**Item #:**Q24
**Question Type**:Single punch grid

**// Soft Prompt: “We would like your response to this question.”//**

**treat\_perc:** How much do you agree or disagree with the following statements about available treatments for COVID-19?

COVID-specific treatments include antivirals (Paxlovid, Veklury, Lagevrio) and monoclonal antibodies (Bebtelovimab).

**//PROGRAMMING NOTE:  RANDOMIZE options //**

|  |  |  |
| --- | --- | --- |
| **Variable Name** | **Variable Text** | **Variable Label** |
| treat\_perc\_1 | If I tested positive for COVID, I would be willing to take a COVID-specific treatment (antivirals, antibodies). | treat\_perc\_1: Willing to take |
| treat\_perc\_2 | If I tested positive for COVID, I know when I would have to start treatment so it would be effective. | treat\_perc\_2: When to start |
| treat\_perc\_3 | I understand the guidelines for who should get COVID-19 treatments when infected. | treat\_perc\_3: Who should get treatment |
| treat\_perc\_4 | If I tested positive for COVID, I would know where to go for treatment. | treat\_perc\_4: Where to go for treatment |
| treat\_perc\_5 | I am familiar with the different COVID-19 treatments available.  | treat\_perc\_5: Familiar with treatment options |
| treat\_perc\_6 | If I tested positive for COVID, I would not seek treatment and just treat it at home with over-the-counter (OTC) medicine (for example, Tylenol, Theraflu). | treat\_perc\_6: Treat with OTC medication |

|  |  |
| --- | --- |
| **Value**    | **Value Label**    |
| 1    | Strongly disagree    |
| 2  | Somewhat disagree  |
| 3  | Neither agree nor disagree    |
| 4  | Somewhat agree  |
| 5    | Strongly agree    |
| -99  | Refused  |

**// Page Break //**

**//BASE: All respondents//**

**Item #:**Q25
**Question Type**:Single punch grid

**// Soft Prompt: “We would like your response to this question.”//**

**ptn\_w78:** We are interested in your opinion of a few messages about COVID-19 vaccines or boosters.

For each of the below messages, please indicate how much you agree or disagree with the following statement:

**“I would share the information in the message with a friend or family member who wants to know more about COVID-19 vaccines or boosters.”**

**//PROGRAMMING NOTE: randomize variables in grid//**

|  |  |  |
| --- | --- | --- |
| **Variable Name**    | **Variable Text**    | **Variable Label**    |
| ptn\_w78\_1  | Anybody 12 and older (including people who have had multiple boosters) is eligible for an updated COVID vaccine, as long as 2 months have passed since your last dose. | ptn\_w78\_1: 12 plus |
| ptn\_w78\_2  | Updated COVID vaccines that are specific to Omicron give you the only targeted protection available against the variants that are infecting people now | ptn\_w78\_2: Specific to omicron |
| ptn\_w78\_3  | If you already have your primary vaccine series, you can get targeted protection from Omicron with an updated COVID vaccine. | ptn\_w78\_3: Targeted protection |
| ptn\_w78\_4  | Only people who have completed a primary vaccine series can get an updated COVID vaccine that targets the Omicron variant. | ptn\_w78\_4: Only if vaccinated |
| ptn\_w78\_5  | Getting an updated vaccine extends your protection against the original COVID virus and gives you the best protection available against the Omicron variant. | ptn\_w78\_5: Extends protection |
| ptn\_w78\_6 | Getting COVID and flu vaccines is safe and getting multiple vaccines at one time has been standard practice for decades. Millions of Americans have gotten their flu and COVID-19 vaccines at the same time. | ptn\_w78\_6: Multiple vaccines at one time |
| ptn\_w78\_7 | By getting both vaccines at the same time, you can save yourself a second trip to the pharmacy or doctor’s office. It’s easy and convenient. Get all protection you need this fall and winter in one stop! | ptn\_w78\_7: Save a trip |

|  |  |
| --- | --- |
| **Value**    | **Value Label**    |
| 1    | Strongly disagree    |
| 2  | Disagree  |
| 3  | Neither agree nor disagree    |
| 4  | Agree  |
| 5    | Strongly agree    |
| -99  | Refused  |