***Attachment 6o***

***MEC and Dietary Reminder Call Instrument***

**Attachment 6o: MEC and Dietary Reminder Call Instrument**

Form Approved

OMB No. 0920-0950

Exp. Date XX/XX/20XX

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| **LEAD\_IN** | |
| **ASK** | All respondents |
| Display:   * Case Level Status * Line Level Status * Case-Level Comments * Date of last Call * Last Appointment * [FILL NAME OF PERSON TO CALL (Dietary name/MEC name)] * [FILL SP Name of Child] (for reference) * [FILL SP Name Adult 18+ who has a proxy] (for reference) * SP Age | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Text display |
| **FILLS** | FILL NAME OF PERSON TO CALL:   * FILL SP NAME IF (SP AGE 18+ YEARS AND NO PROXY) * FILL PROXY NAME IF (SP AGE IS <18 YEARS) OR (SP AGE IS 18+ AND YES PROXY) * IF MULTIPLE APPOINTMENTS ON SAME DAY AND ALL SAME PHONE NUMBER, THEN LIST ALL SP NAMES (SP AGE 18+ WITHOUT A PROXY) OR PROXY NAMES |
| **NOTES** |  |
| **HELP SCREEN** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | TW |

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| **TW** | |
| **ASK** | All Respondents |
| WHAT DO YOU WANT TO DO?   1. CONTINUE WITH THIS CASE 2. REVIEW RECORD OF EVENTS 3. REVIEW ROSTER OF NUMBERS AND NAMES 4. REVIEW/ENTER CASE LEVEL COMMENTS 5. SAVE THE CURRENT CASE; GET ANOTHER CASE OR EXIT CATI-CMS 6. SCHEDULE A CALLBACK 7. CHOOSE A NEW NUMBER TO CALL 8. CALL-IN CASE 9. SPECIAL OPTIONS | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF TW=1: AUTO\_DIAL FOLLOWED BY DIAL1  IF TW=2: RECORD OF EVENTS  IF TW=3 OR 8: ROSTER LINES  IF TW=4: CASE COMMENTS  IF TW=6: SAVE AND EXIT CASE  IF TW=7: LAUNCH WEB SCHEDULER  IF TW=13: REMINDER  IF TW=90: SPECIAL OPTIONS |

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| **DIAL1** | |
| **ASK** | IF TW=1 |
| PHONE NUMBER TO CALL: [FILL PHONE NUMBER]  DID A PERSON ANSWER THE PHONE (NOT OPERATOR)?   1. YES 2. NO 3. CALL-IN CASE | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** | FILL PHONE NUMBER FROM PRELOAD – SP PHONE NUMBER |
| **NOTES** |  |
| **HELP SCREEN** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF DIAL1=(1, 9), GO TO REMINDER  ELSE, GO TO DIAL2 |

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| **DIAL2** | |
| **ASK** | IF DIAL1=2 |
| WHAT IS THE RESULT OF THE CALL?  1264. VOICEMAIL  1266. HANG UP / DID NOT SPEAK TO ANYONE  1201. RING NO ANSWER  1202. BUSY SIGNAL / ALL CIRCUITS BUSY  1273. DISCONNECTED NUMBER / CALL CANNOT BE COMPLETED AS DIALED  1274. TEMPORARILY DISCONNECTED / LINE TROUBLE  1271. RECORDING CHANGED NUMBER  1272. WRONG NUMBER  1275. BLOCKED LINE / # DOES NOT ACCEPT INCOMING CALLS  1281. MODEM / FAX MACHINE  1282. BEEPER / PAGER  1287. PRIVACY MANAGER  1543. TDD (DEVICE FOR THE DEAF) REQUIRED. | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF DIAL2 = 1264, GO TO DIAL2C  IF DIAL2 = (1201, 1202, 1266, 1272, 1281, 1282, 1543), GO TO END  IF DIAL2 = (1273, 1274, 1271, 1275), GO TO DIAL2A  IF DIAL2 =1287, GO TO DIAL2E |

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| **DIAL2C** | |
| **ASK** | IF DIAL2 = 1264 OR DIAL2A = 1264 OR DIAL2E = 1264 |
| THE RECORDING:   1. MENTIONED THE SUBJECT’S NAME 2. VERIFIED ONLY THE PHONE NUMBER 3. DID NOT PROVIDE ANY INFO 4. BUSINESS VOICEMAIL (NOT A BUSINESS FROM HOME) 5. RECORDING IN A FOREIGN LANGUAGE 6. COULD NOT LEAVE A MESSAGE / VOICEMAIL FULL / NOT SET UP 7. TDD (TELEPHONE DEVICE FOR THE DEAF) OR TTY (SOUNDS LIKE LITTLE BELLS) | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF DIAL2C = (1, 2, 3), GO TO DIAL2D  IF DIAL2C = (4, 6, 9), GO TO END  IF DIAL2C = 5: GO TO LANG |

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| **DIAL2D** | |
| **ASK** | IF DIAL2C = (1, 2, 3) OR REMINDER = (3, 4) OR DIAL2E = 1264 |
| [THIS IS THE VOICEMAIL MESSAGE SCRIPT]  Hello, my name is {Interviewer Name}. I am calling about a Centers for Disease Control and Prevention national health study. I am calling to remind <TEXT FILL 1> about the <TEXT FILL 5> appointment(s) scheduled for:  INTERVIEWER: READ OFF THE NAME AND APPOINTMENT DATE AND TIME FOR THE LISTED HOUSEHOLD MEMBERS (FROM SCHEDULER). NOTE THAT PARTICIPANTS WITH A DIFFERENT APPOINTMENT DATE AND/OR CONTACT PHONE WILL GET A SEPARATE REMINDER CALL.   * [First SP –First Name, Appointment Date and Time] * [Second SP – First Name, Appointment Date and Time] * [Third SP – First Name, Appointment Date and Time]   [MEC ONLY: Please review the appointment reminder letter(s) we mailed or the appointment slip(s) you received during the interview in your home, so that you can review the instructions and the directions to the Mobile Exam Center.]  [MEC ONLY: IF ONLY ONE APPOINTMENT READ: <TEXT FILL 2> prescription medications as directed by <TEXT FILL 3> medical provider <TEXT FILL 4>.]  [MEC ONLY: IF MORE THAN ONE APPOINTMENT READ: Please have everyone take their prescription medications as directed by their medical provider <TEXT FILL 4>.]  [DIETARY DAY 1: We will call you to conduct this interview over the phone. It should take about 30 minutes. Please have the hand card booklet that we left during the interview in your home.]  [DIETARY DAY 2: We will call you for the second phone interview. This should take about 30 minutes.]  For any questions or to reschedule the appointment, call <TEXT FILL 6> toll-free. Thank you.   1. LEFT VOICEMAIL MESSAGE 2. PERSON PICKED-UP DURING MESSAGE 3. UNABLE TO LEAVE MESSAGE | |
| **SPANISH** | [THIS IS THE VOICEMAIL MESSAGE SCRIPT]  Buenos días/Buenas tardes, mi nombre es {Interviewer Name}. Estoy llamando sobre un estudio nacional de salud de los Centros para el Control y la Prevención de Enfermedades. Estoy llamando para <TEXT FILL 1> sobre la(s) cita(s) programada(s) <TEXT FILL 5> para:  INTERVIEWER: READ OFF THE NAME AND APPOINTMENT DATE AND TIME FOR THE LISTED HOUSEHOLD MEMBERS (FROM SCHEDULER). NOTE THAT PARTICIPANTS WITH A DIFFERENT APPOINTMENT DATE AND/OR CONTACT PHONE WILL GET A SEPARATE REMINDER CALL.   * [First SP –First Name, Appointment Date and Time] * [Second SP – First Name, Appointment Date and Time] * [Third SP – First Name, Appointment Date and Time]   [MEC ONLY: Le pedimos que revise la(s) carta(s) de recordatorio de cita que le enviamos por correo o la(s) hoja(s) de cita que recibió durante la entrevista en su hogar, para que pueda revisar las instrucciones y las indicaciones para llegar al centro móvil de examen.]  [MEC ONLY: IF ONLY ONE APPOINTMENT READ: <TEXT FILL 2> medicamentos recetados según las indicaciones de su proveedor médico, <TEXT FILL 4>.]  [MEC ONLY: IF MORE THAN ONE APPOINTMENT READ: Dígales a todos que tomen sus medicamentos recetados según las indicaciones de su proveedor médico, <TEXT FILL 4>.]  [DIETARY DAY 1: Le llamaremos para realizar esta entrevista por teléfono. Debe tomar como 30 minutos. Tenga a mano el libro de tarjetas que le dejamos durante la entrevista en su hogar.]  [DIETARY DAY 2: Le llamaremos para la segunda entrevista telefónica. Debe tomar como 30 minutos.]  Si tiene cualquier pregunta o para cambiar la cita, llame gratis al <TEXT FILL 6>. Gracias.   1. LEFT VOICEMAIL MESSAGE 2. PERSON PICKED-UP DURING MESSAGE 3. UNABLE TO LEAVE MESSAGE |
| **QUESTION TYPE** | Radio button |
| **FILLS (ENG)** | TEXT FILL 1: FILL “you” IF ONLY ONE APPOINTMENT  ELSE, FILL “everyone” IF MORE THAN ONE APPOINTMENT  TEXT FILL 2: “Please take your” IF SP AGE 18+ AND NO PROXY  ELSE, FILL “Please have [SP’s NAME] take their” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  TEXT FILL 3: “BLANK” IF SP AGE 18+ AND NO PROXY  ELSE, FILL “BLANK” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  TEXT FILL 4: FILL “unless they are required to be taken with food. Please remember not to eat or drink anything except water for 8 hours prior to the appointment.” IF SP AGE 12+ WITH A MORNING APPOINTMENT  ELSE, FILL IS EMPTY  TEXT FILL 5: FILL “health exam” IF MEC  FILL “dietary telephone interview” IF DIETARY  TEXT FILL 6: FILL “800-344-1386” IF MEC  FILL “844-340-9367” IF DIETARY |
| **FILLS (SPA)** | TEXT FILL 1: FILL “recordarle a usted” IF ONLY ONE APPOINTMENT  ELSE, FILL “recordarles a todos” IF MORE THAN ONE APPOINTMENT  TEXT FILL 2: “Tome sus” IF SP AGE 18+ AND NO PROXY  ELSE, FILL “[SP NAME] debe tomar sus” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  TEXT FILL 3: “de su doctor” IF SP AGE 18+ AND NO PROXY  ELSE, FILL “de ellos(as)” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  TEXT FILL 4: FILL “a menos que sea necesario tomarlos con comida. Recuerde no comer ni beber nada excepto agua durante las 8 horas antes de la cita.” IF SP AGE 12+ WITH A MORNING APPOINTMENT  ELSE, FILL IS EMPTY  TEXT FILL 5: FILL “del examen de salud” IF MEC  FILL “de la entrevista telefónica sobre alimentación” IF DIETARY  TEXT FILL 6: FILL “800-344-1386” IF MEC  FILL “844-340-9367” IF DIETARY |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF DIAL2D = (1, 1201), GO TO END  IF DIAL2D = 2, GO TO REMINDER |

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| **DIAL2E** | |
| **ASK** | IF DIAL2 = 1287 OR DIAL2A = 1287 |
| PRIVACY MANAGER SCREEN:  If asked to state name: Centers for Disease Control and Prevention national health study  If asked to state ph#: 800-344-1386   1. SOMEONE PICKS UP 2. RING NO ANSWER 3. BUSY SIGNAL / ALL CIRCUITS BUSY 4. BLOCKED LINE / # DOES NOT ACCEPT INCOMING CALLS 5. VOICEMAIL | |
| **SPANISH** | PRIVACY MANAGER SCREEN:  If asked to state name: Estudio nacional de salud de los Centros para el Control y la Prevención de Enfermedades  If asked to state ph#: 800-344-1386   1. SOMEONE PICKS UP 2. RING NO ANSWER 3. BUSY SIGNAL / ALL CIRCUITS BUSY 4. BLOCKED LINE / # DOES NOT ACCEPT INCOMING CALLS 5. VOICEMAIL |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF DIAL2E = 1: REMINDER  IF DIAL2E = 1264: DIAL2D  ELSE: END OF MODULE |

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| **DIAL2A** | |
| **ASK** | IF DIAL2 = (1273, 1274, 1271, 1275) |
| PLEASE MANUALLY REDIAL THE NUMBER.  WHAT IS THE RESULT OF THE CALL?   1. A PERSON ANSWERED THE PHONE (NOT OPERATOR) 2. VOICEMAIL 3. DISCONNECTED NUMBER / CALL CANNOT BE COMPLETED AS DIALED 4. PHONE COMPANY RECORDING GIVES A NEW NUMBER 5. BEEPER / PAGER 6. TEMPORARILY DISCONNECTED / LINE TROUBLE 7. PRIVACY MANAGER 8. BLOCKED LINE / # DOES NOT ACCEPT INCOMING CALLS 9. COMPUTER MODEM / FAX MACHINE 10. TDD (DEVICE FOR THE DEAF) OR TTY (SOUNDS LIKE LITTLE BELLS) | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF DIAL2A = 1, GO TO REMINDER  IF DIAL2A = 1264, GO TO DIAL2C  IF DIAL2A = 1273, GO TO DIAL2B  IF DIAL2A = 1287, GO TO DIAL2E  IF DIAL2A = 1271, GO TO END AND ADD A NEW NUMBER ON THE ROSTER LINE SCREEN  ELSE, GO TO END |

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| **DIAL2B** | |
| **ASK** | IF DIAL2A = 1273 |
| DID THE PHONE COMPANY RECORDING SAY:   1. TEMPORARILY DISCONNECTED 2. DISCONNECTED 3. CANNOT BE COMPLETED AS DIALED 4. NUMBER HAS BEEN CHANGED TO A NON-PUBLISHED NUMBER 5. NUMBER HAS BEEN CHANGED AND GIVES A NEW NUMBER, WILL NEED TO ADD A NEW PHONE NUMBER 6. NUMBER DOES NOT ACCEPT INCOMING CALLS | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF DIAL2B = 5, GO TO END AND ADD NEW NUMBER ON THE ROSTER LINE SCREEN  ELSE, GO TO END |

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| **REMINDER** | |
| **ASK** | IF DIAL2E = 1 OR DIAL2A = 1 OR DIAL2D = 2 OR DIAL1 = (1, 9) OR TW = 13 |
| [TALKING TO A LIVE PERSON, EITHER OUTGOING OR INCOMING CALL]  Hello, my name is {Interviewer Name}. <TEXT FILL 1> RTI International about a national health study sponsored by the Centers for Disease Control and Prevention. For training and quality assurance purposes, this call may be monitored or recorded. <TEXT FILL 2>   1. SPEAKING TO TARGET RESPONDENT 2. TRANSFERRED TO NAMED PERSON / NAMED PERSON COMING TO PHONE (WAIT FOR R TO COME TO PHONE BEFORE CONTINUING) 3. TRANSFERRED TO PERSON-SPECIFIC VOICEMAIL 4. TRANSFERRED TO GENERIC VOICEMAIL 5. NAMED PERSON NOT AVAILABLE / GATEKEEPER CAN TAKE MESSAGE 6. NAMED PERSON NOT AVAILABLE / NO ONE TO TAKE MESSAGE 7. NAMED PERSON UNKNOWN TO GATEKEEPER 8. MORE CODES   INTERVIEWER: SELECTING “MORE CODES” WILL PROVIDE MORE OPTIONS TO RECORD DETAILED BUT LESS COMMON OUTCOMES SUCH AS MOVED, PASSED AWAY | |
| **SPANISH** | [TALKING TO A LIVE PERSON, EITHER OUTGOING OR INCOMING CALL]  Buenos días/Buenas tardes, mi nombre {Interviewer Name}. <TEXT FILL 1> RTI International acerca de un estudio nacional de salud patrocinado por los Centros para el Control y la Prevención de Enfermedades. Esta llamada puede ser supervisada o grabada con fines de capacitación y control de calidad. <TEXT FILL 2>   1. SPEAKING TO TARGET RESPONDENT 2. TRANSFERRED TO NAMED PERSON / NAMED PERSON COMING TO PHONE (WAIT FOR R TO COME TO PHONE BEFORE CONTINUING) 3. TRANSFERRED TO PERSON-SPECIFIC VOICEMAIL 4. TRANSFERRED TO GENERIC VOICEMAIL 5. NAMED PERSON NOT AVAILABLE / GATEKEEPER CAN TAKE MESSAGE 6. NAMED PERSON NOT AVAILABLE / NO ONE TO TAKE MESSAGE 7. NAMED PERSON UNKNOWN TO GATEKEEPER 8. MORE CODES   INTERVIEWER: SELECTING “MORE CODES” WILL PROVIDE MORE OPTIONS TO RECORD DETAILED BUT LESS COMMON OUTCOMES SUCH AS MOVED, PASSED AWAY |
| **QUESTION TYPE** | Radio button |
| **FILLS (ENG)** | TEXT FILL 1: FILL “I am calling from” IF OUTGOING CALL  ELSE, FILL “Thank you for calling” IF CALL IN  TEXT FILL 2: FILL “May I speak with <TEXT FILL 3>?” IF OUTGOING CALL  ELSE, BLANK.  TEXT FILL 3: IF ONLY ONE APPOINTMENT, FILL “[SP’s NAME]” IF (SP AGE 18+ AND NO PROXY)  IF MORE THAN ONE APPOINTMENT AND 2 SP (SP AGE 18+ AND NO PROXY), FILL “[SP1 NAME] or [SP2 NAME]”  IF MORE THAN ONE APPOINTMENT AND 3 SP (SP AGE 18+ AND NO PROXY),  FILL “[SP1 NAME], [SP2 NAME] or [SP3 NAME]”  ELSE, FILL “[PROXY’S NAME OR NAMES]” |
| **FILLS (SPA)** | TEXT FILL 1: FILL “Estoy llamando de” IF OUTGOING CALL  ELSE, FILL “Gracias por llamar a” IF CALL IN  TEXT FILL 2: FILL “¿Puedo hablar con <TEXT FILL 3>?” IF OUTGOING CALL  ELSE, BLANK.  TEXT FILL 3: IF ONLY ONE APPOINTMENT, FILL “[SP’s NAME]” IF (SP AGE 18+ AND NO PROXY)  IF MORE THAN ONE APPOINTMENT AND 2 SP (SP AGE 18+ AND NO PROXY), FILL “[SP1 NAME] o [SP2 NAME]”  IF MORE THAN ONE APPOINTMENT AND 3 SP (SP AGE 18+ AND NO PROXY),  FILL “[SP1 NAME], [SP2 NAME] o [SP3 NAME]”  ELSE, FILL “[PROXY’S NAME OR NAMES]” |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF REMINDER = (1, 2), GO TO CELL\_RESP2  IF REMINDER = (3, 4): DIAL2D  IF REMINDER = 5: PROMPT\_HHM\_MESSAGE  IF REMINDER = 6: RCALLBACK  IF REMINDER = 7: RUNKNOWN  ELSE, GO TO OTHER\_CODES |

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| **OTHER\_CODES** | |
| **ASK** | IF REMINDER = 8 OR OTHER\_CODES SELECTED FROM HELP |
| SP’S NAME: <TEXT FILL 1>   1. PHONE NUMBER NOT ASSOCIATED WITH SUBJECT 2. OUT OF THE COUNTRY 3. INCARCERATED OR INSTITUTIONALIZED 4. OTHERWISE UNAVAILABLE 5. DECEASED 6. LANGUAGE BARRIER 7. REFUSED 8. HUNG UP 9. DISCONNECTED 10. OTHER, SUPERVISOR REVIEW 11. HEARING IMPAIRED | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** | TEXT FILL 1: FILL “[SP’s NAME(S)]” |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF OTHER\_CODES = (1, 2, 3, 4, 5, 9, 10, 11), GO TO END  IF OTHER\_CODES = 6, GO TO LANG  IF OTHER\_CODES = (7, 8) GO TO WHO\_REF |

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| **LANG** | |
| **ASK** | c |
| INTERVIEWER: CLASSIFY LANGUAGE BARRIER   1. SPANISH LANGAUGE BARRIER 2. OTHER LANGUAGE BARRIER | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | WHO\_LANG |

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| **WHO\_LANG** | |
| **ASK** | IF OTHER\_CODES = 6 OR DIAL2D = 1537 OR DIAL2C = 5 |
| INTERVIEWER: WAS THE LANGUAGE BARRIER FOR THE…   1. SP 2. SP’S PROXY 3. SOMEBODY ELSE 4. UNKNOWN | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | THANK\_EVT |

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| **THANK\_EVT** | |
| **ASK** | WHO\_LANG = (1, 2, 3, 4) OR RUNKNOWN=2 |
| (Thank you very much for your time.)  PLEASE PRESS “NEXT” TO CONTINUE. | |
| **SPANISH** | (Muchas gracias por su tiempo).  PLEASE PRESS “NEXT” TO CONTINUE. |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | END |

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| **WHO\_REF** | |
| **ASK** | IF OTHER\_CODES = (7, 8) OR BACK\_FROM\_BLAISE = 3 |
| (Thank you very much for your time.)  INTERVIEWER: WAS THE REFUSAL BY THE SP OR SP’S PROXY?   1. YES, SP OR SP’S PROXY REFUSED. VERIFIED NAME. 2. NO / DON’T KNOW | |
| **SPANISH** | (Muchas gracias por su tiempo).  INTERVIEWER: WAS THE REFUSAL BY THE SP OR SP’S PROXY?   1. YES, SP OR SP’S PROXY REFUSED. VERIFIED NAME. 2. NO / DON’T KNOW |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | PREREF |

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| **PREREF** | |
| **ASK** | IF OTHER\_CODES = (7, 8) OR BACK\_FROM\_BLAISE = 3 |
| INTERVIEWER: DETERMINE THE STRENGTH OF REFUSAL:   1. REFUSAL 2. HOSTILE REFUSAL | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | REF1\_MEC IF MEC  REF1\_DIET IF DIETARY |

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| **REF1\_MEC** | |
| **ASK** | PREREF = ANY AND MEC |
| INTERVIEWER: DESCRIBE WHAT HAPPENED DURING REFUSAL (CHECK ALL THAT APPLY):   1. CONCERN WITH EXAM / DOCTOR ISSUES 2. GOVERNMENT CONCERNS / MISTRUST OF GOVERNMENT 3. EXAM TAKES TOO MUCH TIME / EXAM TOO LONG 4. MEC IS TOO FAR AWAY / TRANSPORTATION PROBLEMS 5. PRIVACY / CONFIDENTIALITY CONCERNS 6. QUESTIONS / SUSPICIONS ABOUT LEGITIMACY 7. THINK SP IS TOO YOUNG/OLD TO PARTICIPATE 8. TOO BUSY / NO TIME 9. EXPOSURE TO EMERGING DISEASES / CONCERNS WITH GETTING SICK 10. OTHER SPECIFY | |
| **SPANISH** | INTERVIEWER: DESCRIBE WHAT HAPPENED DURING REFUSAL (CHECK ALL THAT APPLY):   1. PREOCUPACIÓN SOBRE EL EXAMEN / PROBLEMAS CON EL DOCTOR 2. PREOCUPACIONES SOBRE EL GOBIERNO / DESCONFIANZA EN EL GOBIERNO 3. EL EXAMEN TOMA DEMASIADO TIEMPO / EXAMEN DEMASIADO LARGO 4. MEC ESTÁ DEMASIADO LEJOS / PROBLEMAS DE TRANSPORTE 5. PREOCUPACIONES DE PRIVACIDAD / CONFIDENCIALIDAD 6. PREGUNTAS / SOSPECHAS SOBRE LEGITIMIDAD 7. LA PERSONA ENCUESTADA ES DEMASIADO JOVEN/MAYOR PARA PARTICIPAR 8. DEMASIADO OCUPADO(A) / NO TIENE TIEMPO 9. EXPONERSE A POSIBLES ENFERMEDADES/ PREOCUPACIÓN POR ENFERMARSE 10. OTHER SPECIFY |
| **QUESTION TYPE** | Multi-select |
| **FILLS** |  |
| **NOTES** | IF RESPONSE OPTION 10 (OTHER SPECIFY) IS SELECTED, DISPLAY TEXT BOX TO CAPTURE OTHER REASON. ALLOW 800 CHARACTERS. |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF REF1\_MEC = MORE THAN ONE SELECTED: REF2\_MEC  ELSE: END |

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| **REF2\_MEC** | |
| **ASK** | REF1\_MEC = MORE THAN ONE SELECTED |
| SELECT THE **MAIN** REASON FOR REFUSAL.   1. CONCERN WITH EXAM / DOCTOR ISSUES 2. GOVERNMENT CONCERNS / MISTRUST OF GOVERNMENT 3. EXAM TAKES TOO MUCH TIME / EXAM TOO LONG 4. MEC IS TOO FAR AWAY / TRANSPORTATION PROBLEMS 5. PRIVACY / CONFIDENTIALITY CONCERNS 6. QUESTIONS / SUSPICIONS ABOUT LEGITIMACY 7. THINK SP IS TOO YOUNG/OLD TO PARTICIPATE 8. TOO BUSY / NO TIME 9. EXPOSURE TO EMERGING DISEASES / CONCERNS WITH GETTING SICK 10. OTHER SPECIFY | |
| **SPANISH** | SELECT THE **MAIN** REASON FOR REFUSAL.   1. PREOCUPACIÓN SOBRE EL EXAMEN / PROBLEMAS CON EL DOCTOR 2. PREOCUPACIONES SOBRE EL GOBIERNO / DESCONFIANZA EN EL GOBIERNO 3. EL EXAMEN TOMA DEMASIADO TIEMPO / EXAMEN DEMASIADO LARGO 4. MEC ESTÁ DEMASIADO LEJOS / PROBLEMAS DE TRANSPORTE 5. PREOCUPACIONES DE PRIVACIDAD / CONFIDENCIALIDAD 6. PREGUNTAS / SOSPECHAS SOBRE LEGITIMIDAD 7. LA PERSONA ENCUESTADA ES DEMASIADO JOVEN/MAYOR PARA PARTICIPAR 8. DEMASIADO OCUPADO(A) / NO TIENE TIEMPO 9. EXPONERSE A POSIBLES ENFERMEDADES/ PREOCUPACIÓN POR ENFERMARSE 10. OTHER SPECIFY |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** | IF RESPONSE OPTION 10 (OTHER SPECIFY) IS SELECTED, DISPLAY TEXT BOX TO CAPTURE OTHER REASON. ALLOW 800 CHARACTERS.  ONLY LIST THE REASONS SELECTED IN REF1. |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | END |

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| **REF1\_DIET** | |
| **ASK** | IF PREREF = ANY AND DIETARY |
| INTERVIEWER: DESCRIBE WHAT HAPPENED DURING REFUSAL (CHECK ALL THAT APPLY):   1. SM DOES NOT DO PHONE SURVEYS 2. SM DOES NOT PARTICIPATE IN SURVEYS 3. HUNG UP DURING INTRO 4. HUNG UP DURING SURVEY 5. “TOO BUSY” / “NO TIME” 6. “NOT INTERESTED” 7. PRIVACY CONCERNS 8. CONCERNED ABOUT LENGTH OF SURVEY 9. QUESTIONED PURPOSE / LEGITIMACY OF STUDY 10. ALREADY PARTICIPATED 11. OTHER SPECIFY | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Multi-select |
| **FILLS** |  |
| **NOTES** | IF RESPONSE OPTION 11 (OTHER SPECIFY) IS SELECTED, DISPLAY TEXT BOX TO CAPTURE OTHER REASON. ALLOW 800 CHARACTERS. |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF REF1\_DIET = MORE THAN ONE SELECTED: REF2\_DIET  ELSE: END |

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| **REF2\_DIET** | |
| **ASK** | IF REF1\_DIET = MORE THAN ONE SELECTED |
| SELECT THE **MAIN** REASON FOR REFUSAL.   1. SM DOES NOT DO PHONE SURVEYS 2. SM DOES NOT PARTICIPATE IN SURVEYS 3. HUNG UP DURING INTRO 4. HUNG UP DURING SURVEY 5. “TOO BUSY” / “NO TIME” 6. “NOT INTERESTED” 7. PRIVACY CONCERNS 8. CONCERNED ABOUT LENGTH OF SURVEY 9. QUESTIONED PURPOSE / LEGITIMACY OF STUDY 10. ALREADY PARTICIPATED 11. OTHER SPECIFY | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** | IF RESPONSE OPTION 11 (OTHER SPECIFY) IS SELECTED, DISPLAY TEXT BOX TO CAPTURE OTHER REASON. ALLOW 800 CHARACTERS.  ONLY LIST THE REASONS SELECTED IN REF1\_DIET. |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | END |

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| **PROMPT\_HHM\_MESSAGE** | |
| **ASK** | IF REMINDER = 5 |
| Could you please let <TEXT FILL 1> know that I called on behalf of a health study sponsored by the Centers for Disease Control and Prevention.  We are calling to remind them of <TEXT FILL 2> <TEXT FILL 5> scheduled for <TEXT FILL 3>. Please have <TEXT FILL 4> call us at <TEXT FILL 6>. Again, that number is <TEXT FILL 6>. Any member of our team can assist them. Thank you.  [IF NEEDED: CALL CENTER HOURS  MONDAY – THURSDAY: 9AM – 11PM EST  FRIDAY: 9AM – 9PM EST  SATURDAY: 9:30AM – 6PM EST  SUNDAY: 1PM – 9:30PM EST] | |
| **SPANISH** | ¿Podría avisarle a <TEXT FILL 1> que llamé sobre un estudio de salud patrocinado por los Centros para el Control y la Prevención de Enfermedades?  Llamamos para recordarle acerca <TEXT FILL 5> <TEXT FILL 2>, programado(a) para <TEXT FILL 3>. Por favor, dígale a <TEXT FILL 4> que nos llame al <TEXT FILL 6>. Le repito, ese número es <TEXT FILL 6>. Cualquier miembro de nuestro equipo puede ayudarles. Gracias.  [IF NEEDED: CALL CENTER HOURS  MONDAY – THURSDAY: 9AM – 11PM EST  FRIDAY: 9AM – 9PM EST  SATURDAY: 9:30AM – 6PM EST  SUNDAY: 1PM – 9:30PM EST] |
| **QUESTION TYPE** | Radio button |
| **FILLS (ENG)** | TEXT FILL 1: IF ONLY ONE APPOINTMENT, FILL “[SP’s NAME]” IF (SP AGE 18+ AND NO PROXY)  IF MORE THAN ONE APPOINTMENT AND 2 SP (SP AGE 18+ AND NO PROXY), FILL “[SP1 NAME] and [SP2 NAME]”  IF MORE THAN ONE APPOINTMENT AND 3 SP (SP AGE 18+ AND NO PROXY),  FILL “[SP1 NAME], [SP2 NAME] and [SP3 NAME]”  ELSE, FILL “[PROXY’S NAME]”  TEXT FILL 2: FILL “their” IF (SP AGE 18+ AND NO PROXY)  FILL “[SP’s NAME]’s” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  FILL “everyone’s” IF MORE THAN ONE APPOINTMENT  TEXT FILL 3: FILL MEC/DIETARY APPOINTMENT DATE.  TEXT FILL 4: IF ONLY ONE APPOINTMENT, FILL “[SP’s NAME]” IF (SP AGE 18+ AND NO PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “one of them” IF ALL (SP AGE 18+ AND NO PROXY)  ELSE, FILL “[PROXY’S NAME OR NAMES]”  TEXT FILL 5: FILL “health exam” IF MEC  FILL “dietary telephone interview” IF DIETARY  TEXT FILL 6: FILL “800-344-1386” IF MEC  FILL “844-340-9367” IF DIETARY |
| **FILLS (SPA)** | TEXT FILL 1: IF ONLY ONE APPOINTMENT, FILL “[SP’s NAME]” IF (SP AGE 18+ AND NO PROXY)  IF MORE THAN ONE APPOINTMENT AND 2 SP (SP AGE 18+ AND NO PROXY), FILL “[SP1 NAME] y a [SP2 NAME]”  IF MORE THAN ONE APPOINTMENT AND 3 SP (SP AGE 18+ AND NO PROXY),  FILL “[SP1 NAME], [SP2 NAME] y a [SP3 NAME]”  ELSE, FILL “[PROXY’S NAME]”  TEXT FILL 2: FILL “BLANK” IF (SP AGE 18+ AND NO PROXY)  FILL “de [SP’s NAME]” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  FILL “de todos(as)” IF MORE THAN ONE APPOINTMENT  TEXT FILL 3: FILL MEC/DIETARY APPOINTMENT DATE.  TEXT FILL 4: IF ONLY ONE APPOINTMENT, FILL “[SP’s NAME]” IF (SP AGE 18+ AND NO PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “Uno de ellos” IF ALL (SP AGE 18+ AND NO PROXY)  ELSE, FILL “[PROXY’S NAME OR NAMES]”  TEXT FILL 5: FILL “de su examen de salud” (SP AGE 18+ AND NO PROXY) IF MEC  FILL “del examen de salud” IF SP AGE <18 OR (AGE 18+ AND YES PROXY) IF MEC  FILL “del examen de salud” IF MORE THAN ONE APPOINTMENT IF MEC  FILL “de su entrevista telefónica sobre alimentación” (SP AGE 18+ AND NO PROXY) IF DIETARY  FILL “de la entrevista telefónica sobre alimentación” IF SP AGE <18 OR (AGE 18+ AND YES PROXY) IF DIETARY  FILL “de la entrevista telefónica sobre alimentación” IF MORE THAN ONE APPOINTMENT IF DIETARY  TEXT FILL 6: FILL “800-344-1386” IF MEC  FILL “844-340-9367” IF DIETARY |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | END |

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| **CELL\_RESP2** | |
| **ASK** | IF REMINDER = (1, 2) |
| Are you driving a vehicle at the moment?  IF YES, ASK FOR A BETTER TIME TO CALL AND SET A CALLBACK IN WEB SCHEDULER.  IF YES AND RESPONDENT INDICATES S/HE IS WILLING TO TALK NOW, SAY “I’m sorry but for your safety I’m not able to talk to you while you’re driving. When would be a better time to call you?”   1. YES, SCHEDULE A CALLBACK IN WEB SCHEDULER 2. NO, CONTINUE WITH THE REMINDER | |
| **SPANISH** | ¿Está conduciendo un vehículo en este momento?  IF YES, ASK FOR A BETTER TIME TO CALL AND SET A CALLBACK IN WEB SCHEDULER.  IF YES AND RESPONDENT INDICATES S/HE IS WILLING TO TALK NOW, SAY “Lo siento, pero por su seguridad no puedo hablarle mientras conduce. ¿Cuándo sería un momento más conveniente para llamarlo(a)?”   1. YES, SCHEDULE A CALLBACK IN WEB SCHEDULER 2. NO, CONTINUE WITH THE REMINDER |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF CELL\_RESP2 = 1, GO TO RCALLBACK  ELSE, GO TO RINTRO (LAUNCH IN BLAISE) |

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| **RCALLBACK** | |
| **ASK** | IF REMINDER = 6 OR RUNKNOWN = 1 OR CELL\_RESP2 = 1 |
| When would be a good day and time to call back to speak with <TEXT FILL 1>?  INTERVIEWER: IF ANOTHER TIME IS NOT PROVIDED, THE SYSTEM WILL SCHEDULE A RANDOM CALLBACK AS APPROPRIATE.  INTERVIEWER: SELECT CONTINUE TO SCHEDULE A NEW APPOINTMENT IN WEB SCHEDULER | |
| **SPANISH** | ¿Cuándo sería un día y hora más convenientes para volver a llamar y hablar con <TEXT FILL 1>?  INTERVIEWER: IF ANOTHER TIME IS NOT PROVIDED, THE SYSTEM WILL SCHEDULE A RANDOM CALLBACK AS APPROPRIATE.  INTERVIEWER: SELECT CONTINUE TO SCHEDULE A NEW APPOINTMENT IN WEB SCHEDULER |
| **QUESTION TYPE** | Radio button |
| **FILLS (ENG)** | TEXT FILL 1: IF ONLY ONE APPOINTMENT, FILL “you” IF (SP AGE 18+ AND NO PROXY) AND RESPONDENT IS SP  IF ONLY ONE APPOINTMENT, FILL “[SP’s NAME]” IF (SP AGE 18+ AND NO PROXY) AND RESPONDENT IS NOT SP  IF MORE THAN ONE APPOINTMENT, FILL “one of them” IF ALL (SP AGE 18+ AND NO PROXY)  ELSE, FILL “[PROXY’S NAME OR NAMES]” |
| **FILLS (SPA)** | TEXT FILL 1: IF ONLY ONE APPOINTMENT, FILL “usted” IF (SP AGE 18+ AND NO PROXY) AND RESPONDENT IS SP  IF ONLY ONE APPOINTMENT, FILL “[SP’s NAME]” IF (SP AGE 18+ AND NO PROXY) AND RESPONDENT IS NOT SP  IF MORE THAN ONE APPOINTMENT, FILL “uno de ellos” IF ALL (SP AGE 18+ AND NO PROXY)  ELSE, FILL “[PROXY’S NAME OR NAMES]” |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | LAUNCH WEB SCHEDULER |

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| **RUNKNOWN** | |
| **ASK** | IF REMINDER = 7 |
| xh <TEXT FILL 3>?   1. YES 2. NO | |
| **SPANISH** | Nuestros registros indican que podemos comunicarnos con <TEXT FILL 1> a este número acerca de una próxima cita <TEXT FILL 2>. ¿Usted o alguien en este número de teléfono conoce a <TEXT FILL 3>?   1. YES 2. NO |
| **QUESTION TYPE** | Radio button |
| **FILLS (ENG)** | TEXT FILL 1: FILL “[SP’s NAME]” IF SP AGE 18+ AND NO PROXY  ELSE, FILL “[PROXY’S NAME]”  TEXT FILL 2: FILL “for [SP’s NAME]” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  ELSE, BLANK  TEXT FILL 3: FILL “[SP’s NAME]” IF SP AGE 18+ AND NO PROXY  ELSE, FILL “[PROXY’S NAME OR NAMES]” |
| **FILLS (SPA)** | TEXT FILL 1: FILL “[SP’s NAME]” IF SP AGE 18+ AND NO PROXY  ELSE, FILL “[PROXY’S NAME]”  TEXT FILL 2: FILL “para [SP’s NAME]” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  ELSE, BLANK  TEXT FILL 3: FILL “[SP’s NAME]” IF SP AGE 18+ AND NO PROXY  ELSE, FILL “[PROXY’S NAME OR NAMES]” |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF RUNKNOWN=1, GO TO RCALLBACK  ELSE, GO TO THANK\_EVT |

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| **RINTRO (FIRST BLAISE SCREEN)** | |
| **ASK** | IF REMINDER = 1 or 2 AND CELL\_RESP2 = 2 |
| [LIVE CALL WITH SP OR PROXY]  <TEXT FILL 5> I would like to remind you about <TEXT FILL 1> <TEXT FILL 6> appointment for the National Health and Nutrition Examination Survey (NHANES), conducted by the Centers for Disease Control and Prevention. We have the <TEXT FILL 2> scheduled:  INTERVIEWER: READ OFF THE NAME AND APPOINTMENT DATE AND TIME FOR THE LISTED HOUSEHOLD MEMBERS (FROM SCHEDULER). NOTE THAT PARTICIPANTS WITH A DIFFERENT APPOINTMENT DATE AND/OR CONTACT PHONE WILL GET A SEPARATE REMINDER CALL.   * [First SP –First Name, Age, Appointment Date and Time] * [Second SP – First Name, Age, Appointment Date and Time] * [Third SP – First Name, Age, Appointment Date and Time]   We look forward to <TEXT FILL 7> <TEXT FILL 3> at <TEXT FILL 4>. Thank you and have a good day.  [MEC ONLY: INTERVIEWER: IF THE SP ASKS, PROVIDE THE MEC LOCATION, MEC ADDRESS AND DRIVING INSTRUCTIONS]  [INTERVIEWER: IF CALLING ABOUT MULTIPLE APPOINTMENTS AND RESPONDENT WANTS TO CANCEL 1 OR MORE, SELECT NO LONGER WANTS TO PARTICIPATE.]   1. CONTINUE 2. NEED TO RESCHEDULE 3. NO LONGER WANTS TO PARTICIPATE | |
| **SPANISH** | [LIVE CALL WITH SP OR PROXY]  <TEXT FILL 5> Quisiera recordarle acerca <TEXT FILL 6> <TEXT FILL 1> para la Encuesta Nacional de Examen de la Salud y Nutrición (NHANES, por sus siglas en inglés), realizada por los Centros para el Control y la Prevención de Enfermedades. Tenemos programada(s) <TEXT FILL 2>:  INTERVIEWER: READ OFF THE NAME AND APPOINTMENT DATE AND TIME FOR THE LISTED HOUSEHOLD MEMBERS (FROM SCHEDULER). NOTE THAT PARTICIPANTS WITH A DIFFERENT APPOINTMENT DATE AND/OR CONTACT PHONE WILL GET A SEPARATE REMINDER CALL.   * [First SP –First Name, Age, Appointment Date and Time] * [Second SP – First Name, Age, Appointment Date and Time] * [Third SP – First Name, Age, Appointment Date and Time]   Esperamos <TEXT FILL 7> <TEXT FILL 3> en <TEXT FILL 4>. Gracias y que tenga un buen día.  [MEC ONLY: INTERVIEWER: IF THE SP ASKS, PROVIDE THE MEC LOCATION, MEC ADDRESS AND DRIVING INSTRUCTIONS]  [INTERVIEWER: IF CALLING ABOUT MULTIPLE APPOINTMENTS AND RESPONDENT WANTS TO CANCEL 1 OR MORE, SELECT NO LONGER WANTS TO PARTICIPATE.]   1. CONTINUE 2. NEED TO RESCHEDULE 3. NO LONGER WANTS TO PARTICIPATE |
| **QUESTION TYPE** | Radio button |
| **FILLS (ENG)** | TEXT FILL 1: IF ONE APPOINTMENT, FILL “your” IF SP AGE 18+ AND NO PROXY  IF ONE APPOINTMENT, FILL “[SP’s NAME]’s” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “everyone’s”    TEXT FILL 2: FILL “appointment” IF ONLY ONE HOUSEHOLD MEMBER SCHEDULED  ELSE FILL “appointments”  TEXT FILL 3: IF ONE APPOINTMENT, FILL “you” IF SP AGE 18+ AND NO PROXY  IF ONE APPOINTMENT, FILL “[SP’s NAME]” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  FILL “everyone” IF MORE THAN ONE APPOINTMENT  TEXT FILL 4: IF ONE APPOINTMENT, FILL “your appointment” IF (SP AGE 18+ AND NO PROXY)  IF ONE APPOINTMENT, FILL “their appointment” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “their appointments”  TEXT FILL 5: IF REMINDER = 2 (CALL-IN CASE), FILL “Hello. My name is {Interviewer Name}. I work for RTI International.”  ELSE, FILL IS EMPTY  TEXT FILL 6: FILL “health exam” IF MEC  FILL “dietary telephone interview” IF DIETARY  TEXT FILL 7: FILL “seeing” IF MEC  FILL “speaking with” IF DIETARY |
| **FILLS (SPA)** | TEXT FILL 1: IF ONE APPOINTMENT, FILL “BLANK” IF SP AGE 18+ AND NO PROXY  IF ONE APPOINTMENT, FILL “de [SP’s NAME]” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “de todos(as)”    TEXT FILL 2: FILL “su cita” IF ONLY ONE HOUSEHOLD MEMBER SCHEDULED  ELSE FILL “sus citas”  TEXT FILL 3: IF ONE APPOINTMENT, FILL “usted” IF SP AGE 18+ AND NO PROXY  IF ONE APPOINTMENT, FILL “[SP’s NAME]” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  FILL “todos(as)” IF MORE THAN ONE APPOINTMENT  TEXT FILL 4: IF ONE APPOINTMENT, FILL “su cita” IF (SP AGE 18+ AND NO PROXY)  IF ONE APPOINTMENT, FILL “su cita” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “sus citas”  TEXT FILL 5: IF REMINDER = 2 (CALL-IN CASE), FILL “Buenos días/Buenas tardes. Mi nombre es {Interviewer Name}. Trabajo para RTI International.”  ELSE, FILL IS EMPTY  TEXT FILL 6: FILL “de su examen de salud” (SP AGE 18+ AND NO PROXY) IF MEC  FILL “del examen de salud” IF SP AGE <18 OR (AGE 18+ AND YES PROXY) IF MEC  FILL “del examen de salud” IF MORE THAN ONE APPOINTMENT IF MEC  FILL “de su entrevista telefónica sobre alimentación” (SP AGE 18+ AND NO PROXY) IF DIETARY  FILL “de la entrevista telefónica sobre alimentación” IF SP AGE <18 OR (AGE 18+ AND YES PROXY) IF DIETARY  FILL “de la entrevista telefónica sobre alimentación” IF MORE THAN ONE APPOINTMENT IF DIETARY  TEXT FILL 7: FILL “verlo(a) a ” (SP AGE 18+ AND NO PROXY) IF MEC  FILL “ver a” IF SP AGE <18 OR (AGE 18+ AND YES PROXY) IF MEC  FILL “ver a” IF MORE THAN ONE APPOINTMENT IF MEC  FILL “hablar con” IF DIETARY |
| **NOTES** | CATI CMS WILL LAUNCH BLAISE IN ORDER TO GET TO THE SCHEDULER.  FILL INFORMATION FOR HOUSEHOLD MEMBERS WITH APPOINTMENTS ON THE SAME DAY AND THAT HAVE THE SAME CONTACT PHONE LISTED. NOTE THAT PARTICIPANTS WITH A DIFFERENT APPOINTMENT DATE AND/OR CONTACT PHONE WILL GET A SEPARATE REMINDER CALL. |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF RINTRO=1, GO TO RAPPT\_MEC IF MEC  IF RINTRO=1, GO TO RAPPT\_DIET IF DIETARY  IF RINTRO=2, GO TO RRESCHEDULE  IF RINTRO=3, GO TO RREFUSAL |

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| **RREFUSAL** | |
| **ASK** | IF RINTRO = 3 |
| Are there any questions or concerns that I can help you with?  (DIETARY ONLY: IF RESPONDENT NEEDS REMINDER ABOUT STUDY IMPORTANCE: <TEXT FILL 1> participation is very important to understanding whether what people eat and drink in America meets nutritional needs. The data also helps policymakers create dietary recommendations to promote health and prevent disease.)  (MEC ONLY: IF RESPONDENT NEEDS REMINDER ABOUT STUDY IMPORTANCE: <TEXT FILL 1> participation is very important to understanding not only <TEXT FILL 2> health but also the health and nutritional status of Americans by providing vital health statistics for the nation. It will help doctors, researchers, and policymakers improve people’s health in the United States.)  (MEC ONLY: IF RESPONDENT EXPRESSES CONCERNS ABOUT GETTING TO THE APPOINTMENT: As a reminder, you were provided with a prepaid travel allowance when you scheduled your appointment.)  (IF RESPONDENT EXPRESSES CONCERNS ABOUT CHILD/ELDER CARE: As a reminder, we can provide $10 an hour for (child/elder) care to assist you in being able to attend the health exam appointment.)  [INTERVIEWER:   * ADDRESS ANY CONCERNS OR QUESTIONS TO THE BEST OF YOUR ABILITY. * **OFFER TO RESCHEDULE** APPOINTMENT IF THEY WANT TO CANCEL. * IF CALLING ABOUT MULTIPLE APPOINTMENTS AND RESPONDENT WANTS TO CANCEL ALL APPOINTMENTS, SELECT REFUSED **ALL** APPOINTMENTS. * IF THEY ONLY WANT TO CANCEL SOME OF THE APPOINTMENTS, SELECT REFUSED **SOME** APPOINTMENTS.]  1. REFUSED ALL APPOINTMENTS 2. REFUSED SOME APPOINTMENTS 3. WILLING TO PARTICIPATE IN SCHEDULED APPT 4. WILLING TO PARTICIPATE BUT NEEDS TO RESCHEDULE | |
| **SPANISH** | ¿Tiene alguna pregunta o inquietud con la que pueda ayudarlo(a)?  (DIETARY ONLY: IF RESPONDENT NEEDS REMINDER ABOUT STUDY IMPORTANCE: <TEXT FILL 1> es muy importante para comprender si lo que las personas comen y beben en los Estados Unidos satisface las necesidades nutricionales. Los datos también ayudan a los legisladores a crear recomendaciones nutricionales para promover la salud y prevenir enfermedades).  (MEC ONLY: IF RESPONDENT NEEDS REMINDER ABOUT STUDY IMPORTANCE: <TEXT FILL 1> es muy importante para entender no solo la salud <TEXT FILL 2> , sino también el estado de salud y nutrición de los estadounidenses, ya que proporciona estadísticas vitales de salud para el país. Ayudará a doctores, investigadores científicos y legisladores a mejorar la salud de la población en los Estados Unidos).  (MEC ONLY: IF RESPONDENT EXPRESSES CONCERNS ABOUT GETTING TO THE APPOINTMENT: Como recordatorio, se le dio un subsidio de viaje prepagado cuando programó su cita).  (IF RESPONDENT EXPRESSES CONCERNS ABOUT CHILD/ELDER CARE: Como recordatorio, podemos ofrecerle $10 dólares por hora para el cuidado de niños o ancianos para ayudar a que asista a la cita del examen de salud).  [INTERVIEWER:   * ADDRESS ANY CONCERNS OR QUESTIONS TO THE BEST OF YOUR ABILITY. * **OFFER TO RESCHEDULE** APPOINTMENT IF THEY WANT TO CANCEL. * IF CALLING ABOUT MULTIPLE APPOINTMENTS AND RESPONDENT WANTS TO CANCEL ALL APPOINTMENTS, SELECT REFUSED **ALL** APPOINTMENTS. * IF THEY ONLY WANT TO CANCEL SOME OF THE APPOINTMENTS, SELECT REFUSED **SOME** APPOINTMENTS.]  1. REFUSED ALL APPOINTMENTS 2. REFUSED SOME APPOINTMENTS 3. WILLING TO PARTICIPATE IN SCHEDULED APPT 4. WILLING TO PARTICIPATE BUT NEEDS TO RESCHEDULE |
| **QUESTION TYPE** | Radio button |
| **FILLS (ENG)** | TEXT FILL 1: IF ONE APPOINTMENT, FILL “Your” IF SP AGE 18+ AND NO PROXY  IF ONE APPOINTMENT, FILL “[SP’s NAME]’s” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “Everyone’s”  TEXT FILL 2: IF ONE APPOINTMENT, FILL “your” IF SP AGE 18+ AND NO PROXY  IF ONE APPOINTMENT, FILL “their” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “their” |
| **FILLS (SPA)** | TEXT FILL 1: IF ONE APPOINTMENT, FILL “Su participación” IF SP AGE 18+ AND NO PROXY  IF ONE APPOINTMENT, FILL “La participación de [SP’s NAME]” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “La participación de todos(as)”  TEXT FILL 2: IF ONE APPOINTMENT, FILL “de usted” IF SP AGE 18+ AND NO PROXY  IF ONE APPOINTMENT, FILL “de él/ella” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “de ellos(as)” |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF RREFUSAL = 1, GO TO RREFUSED\_MEC IF MEC  IF RREFUSAL = 1, GO TO RREFUSED\_DIET IF DIETARY  IF RREFUSAL = 2, GO TO RREFUSEDSOME  IF RREFUSAL =3, GO TO RAPPT\_MEC IF MEC  IF RREFUSAL =3, GO TO RAPPT\_DIET IF DIETARY  IF RREFUSAL = 4, GO TO RRESCHEDULE |

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| **RREFUSED\_MEC** | |
| **ASK** | IF RREFUSAL = 1 |
| Can you share why you don’t want <TEXT FILL 1> to participate in the health exam?  INTERVIEWER: ADDRESS ANY CONCERNS OR QUESTIONS TO THE BEST OF YOUR ABILITY. IF THE PARTICIPANT DECIDES TO CONTINUE WITH THE APPOINTMENT, GO BACK TO THE PREVIOUS SCREEN AND CHANGE RESPONSE ACCORDINGLY. IF THE REFUSAL IS NOT CONVERTED, CHECK ALL REFUSAL REASONS THAT APPLY BASED ON PARTICIPANT’S RESPONSE.   1. CONCERN WITH EXAM / DOCTOR ISSUES 2. GOVERNMENT CONCERNS / MISTRUST OF GOVERNMENT 3. EXAM TAKES TOO MUCH TIME / EXAM TOO LONG 4. MEC IS TOO FAR AWAY / TRANSPORATION PROBLEMS 5. PRIVACY / CONFIDENTIALITY CONCERNS 6. QUESTIONS / SUSPICIONS ABOUT LEGITIMACY 7. THINK SP IS TOO YOUNG/OLD TO PARTICIPATE 8. TOO BUSY / NO TIME 9. EXPOSURE TO EMERGING DISEASES / CONCERNS WITH GETTING SICK 10. OTHER SPECIFY | |
| **SPANISH** | ¿Puede explicarnos por qué no quiere que <TEXT FILL 1> participe en el examen de salud?  INTERVIEWER: ADDRESS ANY CONCERNS OR QUESTIONS TO THE BEST OF YOUR ABILITY. IF THE PARTICIPANT DECIDES TO CONTINUE WITH THE APPOINTMENT, GO BACK TO THE PREVIOUS SCREEN AND CHANGE RESPONSE ACCORDINGLY. IF THE REFUSAL IS NOT CONVERTED, CHECK ALL REFUSAL REASONS THAT APPLY BASED ON PARTICIPANT’S RESPONSE.   1. PREOCUPACIÓN SOBRE EL EXAMEN / PROBLEMAS CON EL DOCTOR 2. PREOCUPACIONES SOBRE EL GOBIERNO / DESCONFIANZA EN EL GOBIERNO 3. EL EXAMEN TOMA DEMASIADO TIEMPO / EXAMEN DEMASIADO LARGO 4. MEC ESTÁ DEMASIADO LEJOS / PROBLEMAS DE TRANSPORTE 5. PREOCUPACIONES DE PRIVACIDAD / CONFIDENCIALIDAD 6. PREGUNTAS / SOSPECHAS SOBRE LEGITIMIDAD 7. LA PERSONA ENCUESTADA ES DEMASIADO JOVEN/MAYOR PARA PARTICIPAR 8. DEMASIADO OCUPADO(A) / NO TIENE TIEMPO 9. EXPONERSE A POSIBLES ENFERMEDADES/ PREOCUPACIÓN POR ENFERMARSE 10. OTHER SPECIFY |
| **QUESTION TYPE** | Multi-select |
| **FILLS (ENG)** | TEXT FILL 1: FILL “[SP NAME]” IF RESPONDENT IS A PROXY AND ONLY ONE APPOINTMENT  FILL “anyone” IF MULTIPLE APPOINTMENTS  ELSE, FILL IS EMPTY |
| **FILLS (SPA)** | TEXT FILL 1: FILL “[SP NAME]” IF RESPONDENT IS A PROXY AND ONLY ONE APPOINTMENT  FILL “ninguno de ellos(as)” IF MULTIPLE APPOINTMENTS  ELSE, FILL IS EMPTY |
| **NOTES** | IF RESPONSE OPTION 10 (OTHER SPECIFY) IS SELECTED, DISPLAY TEXT BOX TO CAPTURE OTHER REASON. |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | **RREFUSEDM\_MEC** |

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| **RREFUSEDM\_MEC** | |
| **ASK** | RREFUSED\_MEC = MORE THAN ONE SELECTED |
| SELECT THE **MAIN** REASON FOR REFUSAL.   1. CONCERN WITH EXAM / DOCTOR ISSUES 2. GOVERNMENT CONCERNS / MISTRUST OF GOVERNMENT 3. EXAM TAKES TOO MUCH TIME / EXAM TOO LONG 4. MEC IS TOO FAR AWAY / TRANSPORTATION PROBLEMS 5. PRIVACY / CONFIDENTIALITY CONCERNS 6. QUESTIONS / SUSPICIONS ABOUT LEGITIMACY 7. THINK SP IS TOO YOUNG/OLD TO PARTICIPATE 8. TOO BUSY / NO TIME 9. EXPOSURE TO EMERGING DISEASES / CONCERNS WITH GETTING SICK 10. OTHER SPECIFY | |
| **SPANISH** | SELECT THE **MAIN** REASON FOR REFUSAL.   1. PREOCUPACIÓN SOBRE EL EXAMEN / PROBLEMAS CON EL DOCTOR 2. PREOCUPACIONES SOBRE EL GOBIERNO / DESCONFIANZA EN EL GOBIERNO 3. EL EXAMEN TOMA DEMASIADO TIEMPO / EXAMEN DEMASIADO LARGO 4. MEC ESTÁ DEMASIADO LEJOS / PROBLEMAS DE TRANSPORTE 5. PREOCUPACIONES DE PRIVACIDAD / CONFIDENCIALIDAD 6. PREGUNTAS / SOSPECHAS SOBRE LEGITIMIDAD 7. LA PERSONA ENCUESTADA ES DEMASIADO JOVEN/MAYOR PARA PARTICIPAR 8. DEMASIADO OCUPADO(A) / NO TIENE TIEMPO 9. EXPONERSE A ENFERMEDADES EMERGENTES / PREOCUPACIÓN POR ENFERMARSE 10. OTHER SPECIFY |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** | IF RESPONSE OPTION 10 (OTHER SPECIFY) IS SELECTED, DISPLAY TEXT BOX TO CAPTURE OTHER REASON. ALLOW 800 CHARACTERS.  ONLY LIST THE REASONS SELECTED IN REF1. |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | **CANCELAPPT** |

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| **RREFUSED\_DIET** | |
| **ASK** | IF PREREF = ANY AND DIETARY |
| Can you share why you don’t want <TEXT FILL 1> to participate in the dietary interview?  INTERVIEWER: ADDRESS ANY CONCERNS OR QUESTIONS TO THE BEST OF YOUR ABILITY. IF THE PARTICIPANT DECIDES TO CONTINUE WITH THE APPOINTMENT, GO BACK TO THE PREVIOUS SCREEN AND CHANGE RESPONSE ACCORDINGLY. IF THE REFUSAL IS NOT CONVERTED, CHECK ALL REFUSAL REASONS THAT APPLY BASED ON PARTICIPANT’S RESPONSE.   1. SM DOES NOT DO PHONE SURVEYS 2. SM DOES NOT PARTICIPATE IN SURVEYS 3. HUNG UP DURING INTRO 4. HUNG UP DURING SURVEY 5. “TOO BUSY” / “NO TIME” 6. “NOT INTERESTED” 7. PRIVACY CONCERNS 8. CONCERNED ABOUT LENGTH OF SURVEY 9. QUESTIONED PURPOSE / LEGITIMACY OF STUDY 10. ALREADY PARTICIPATED 11. OTHER SPECIFY | |
| **SPANISH** | ¿Puede decirnos por qué no quiere que <TEXT FILL 1> participe en la entrevista sobre alimentación?  INTERVIEWER: ADDRESS ANY CONCERNS OR QUESTIONS TO THE BEST OF YOUR ABILITY. IF THE PARTICIPANT DECIDES TO CONTINUE WITH THE APPOINTMENT, GO BACK TO THE PREVIOUS SCREEN AND CHANGE RESPONSE ACCORDINGLY. IF THE REFUSAL IS NOT CONVERTED, CHECK ALL REFUSAL REASONS THAT APPLY BASED ON PARTICIPANT’S RESPONSE.   1. SM DOES NOT DO PHONE SURVEYS 2. SM DOES NOT PARTICIPATE IN SURVEYS 3. HUNG UP DURING INTRO 4. HUNG UP DURING SURVEY 5. “TOO BUSY” / “NO TIME” 6. “NOT INTERESTED” 7. PRIVACY CONCERNS 8. CONCERNED ABOUT LENGTH OF SURVEY 9. QUESTIONED PURPOSE / LEGITIMACY OF STUDY 10. ALREADY PARTICIPATED 11. OTHER SPECIFY |
| **QUESTION TYPE** | Multi-select |
| **FILLS (ENG)** | TEXT FILL 1: FILL “[SP NAME]” IF RESPONDENT IS A PROXY AND ONLY ONE APPOINTMENT  FILL “anyone” IF MULTIPLE APPOINTMENTS  ELSE, FILL IS EMPTY |
| **FILLS (SPA)** | TEXT FILL 1: FILL “[SP NAME]” IF RESPONDENT IS A PROXY AND ONLY ONE APPOINTMENT  FILL “ninguno de ellos(as)” IF MULTIPLE APPOINTMENTS  ELSE, FILL IS EMPTY |
| **NOTES** | IF RESPONSE OPTION 11 (OTHER SPECIFY) IS SELECTED, DISPLAY TEXT BOX TO CAPTURE OTHER REASON. ALLOW 800 CHARACTERS. |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF RREFUSED\_DIET = MORE THAN ONE SELECTED: RREFUSEDM\_DIET  ELSE: END |

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| **RREFUSEDM\_DIET** | |
| **ASK** | IF RREFUSED\_DIET = MORE THAN ONE SELECTED |
| SELECT THE **MAIN** REASON FOR REFUSAL.   1. SM DOES NOT DO PHONE SURVEYS 2. SM DOES NOT PARTICIPATE IN SURVEYS 3. HUNG UP DURING INTRO 4. HUNG UP DURING SURVEY 5. “TOO BUSY” / “NO TIME” 6. “NOT INTERESTED” 7. PRIVACY CONCERNS 8. CONCERNED ABOUT LENGTH OF SURVEY 9. QUESTIONED PURPOSE / LEGITIMACY OF STUDY 10. ALREADY PARTICIPATED 11. OTHER SPECIFY | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** | IF RESPONSE OPTION 11 (OTHER SPECIFY) IS SELECTED, DISPLAY TEXT BOX TO CAPTURE OTHER REASON. ALLOW 800 CHARACTERS.  ONLY LIST THE REASONS SELECTED IN REF1. |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | CANCELAPPT |

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| **CANCELAPPT** | |
| **ASK** | IF RREFUSED\_MEC = ANY OR RREFUSED\_DIET = ANY |
| [REFUSED ALL/CANCEL ALL APPOINTMENTS]  Please hold while I look up and remove <TEXT FILL 1> appointment from our system.  LAUNCH APPOINTMENT SCHEDULER APPLICATION AND CANCEL THE APPOINTMENT(S). AS NEEDED, CONFIRM PARTICIPANT INFORMATION TO CONFIRM THE CORRECT APPOINTMENT IS CANCELLED. RETURN TO THIS SCREEN WHEN DONE.  Thank you for your time. | |
| **SPANISH** | [REFUSED ALL/CANCEL ALL APPOINTMENTS]  Por favor, espere mientras busco y borro <TEXT FILL 1> en nuestro sistema.  LAUNCH APPOINTMENT SCHEDULER APPLICATION AND CANCEL THE APPOINTMENT(S). AS NEEDED, CONFIRM PARTICIPANT INFORMATION TO CONFIRM THE CORRECT APPOINTMENT IS CANCELLED. RETURN TO THIS SCREEN WHEN DONE.  Gracias por su tiempo. |
| **QUESTION TYPE** | Text display |
| **FILLS (ENG)** | TEXT FILL 1: IF ONE APPOINTMENT, FILL “your” IF SP AGE 18+ AND NO PROXY  IF ONE APPOINTMENT, FILL “[SP’s NAME]’s” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “everyone’s” |
| **FILLS (SPA)** | TEXT FILL 1: IF ONE APPOINTMENT, FILL “su cita” IF SP AGE 18+ AND NO PROXY  IF ONE APPOINTMENT, FILL “la cita de [SP’s NAME]” IF SP AGE <18 OR (AGE 18+ AND YES PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “de todos(as)” |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | RDONE |

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| **RREFUSEDSOME** | |
| **ASK** | IF RREFUSAL = 2 |
| We have the following appointments scheduled:   * (First SP – First Name, Age, Appointment Date and Time) * (Second SP – First Name, Age, Appointment Date and Time) * (Third SP – First Name, Age, Appointment Date and Time)   Which appointment would you like to cancel?  LAUNCH APPOINTMENT SCHEDULER APPLICATION AND CANCEL THE APPOINTMENT(S). AS NEEDED, CONFIRM PARTICIPANT INFORMATION TO CONFIRM THE CORRECT APPOINTMENT IS CANCELLED. RETURN TO THIS SCREEN WHEN DONE.  I’ve made a note and removed the appointment(s) from our system. | |
| **SPANISH** | Tenemos programadas las siguientes citas:   * (First SP – First Name, Age, Appointment Date and Time) * (Second SP – First Name, Age, Appointment Date and Time) * (Third SP – First Name, Age, Appointment Date and Time)   ¿Qué cita desea cancelar?  LAUNCH APPOINTMENT SCHEDULER APPLICATION AND CANCEL THE APPOINTMENT(S). AS NEEDED, CONFIRM PARTICIPANT INFORMATION TO CONFIRM THE CORRECT APPOINTMENT IS CANCELLED. RETURN TO THIS SCREEN WHEN DONE.  He tomado nota y he borrado la(s) cita(s) en nuestro sistema. |
| **QUESTION TYPE** | Text display |
| **FILLS** |  |
| **NOTES** | FILL INFORMATION FOR HOUSEHOLD MEMBERS WITH APPOINTMENTS ON THE SAME DAY AND THAT HAVE THE SAME CONTACT PHONE LIST. NOTE THAT PARTICIPANTS WITH A DIFFERENT APPOINTMENT DATE AND/OR CONTACT PHONE WILL GET A SEPARATE REMINDER CALL. |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | GO TO RAPPT\_MEC IF MEC  GO TO RAPPT\_DIET IF DIETARY |

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| **RRESCHEDULE** | |
| **ASK** | IF RREFUSAL = 4 OR RINTRO = 2 |
| We have the following appointments scheduled:   * (First SP – First Name, Age, Appointment Date and Time) * (Second SP – First Name, Age, Appointment Date and Time) * (Third SP – First Name, Age, Appointment Date and Time)   Which appointment would you like to reschedule?  LAUNCH APPOINTMENT SCHEDULER APPLICATION, ASK, “When would be a better date and time?”  RESCHEDULE EACH APPOINTMENT THEY WANT TO RESCHEDULE AND CONFIRM THE APPOINTMENT(S) OUT LOUD INCLUDING THE DAY, TIME, AND LOCATION.  ONCE APPOINTMENT(S) IS RESCHEDULED, RETURN TO THIS SCREEN, CLICK CONTINUE. | |
| **SPANISH** | Tenemos programadas las siguientes citas:   * (First SP – First Name, Age, Appointment Date and Time) * (Second SP – First Name, Age, Appointment Date and Time) * (Third SP – First Name, Age, Appointment Date and Time)   ¿Qué cita desea volver a hacer?  LAUNCH APPOINTMENT SCHEDULER APPLICATION, ASK, “¿Cuándo sería una mejor fecha y hora?”  RESCHEDULE EACH APPOINTMENT THEY WANT TO RESCHEDULE AND CONFIRM THE APPOINTMENT(S) OUT LOUD INCLUDING THE DAY, TIME, AND LOCATION.  ONCE APPOINTMENT(S) IS RESCHEDULED, RETURN TO THIS SCREEN, CLICK CONTINUE. |
| **QUESTION TYPE** | Text display |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | RRESCHEDULED |

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| **RRESCHEDULED** | |
| **ASK** | IF RRESCHEDULE = ANY |
| We will contact you again closer to the new date to remind you of the appointment. | |
| **SPANISH** | Nos volveremos a comunicar con usted cuando se acerque la nueva fecha para recordarle la cita. |
| **QUESTION TYPE** | Text display |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | RDONE |

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| **RAPPT\_DIET** | |
| **ASK** | IF RINTRO = 1 OR RREFUSAL = 3 OR RREFUSEDSOME = ANY AND DIETARY |
| Prior to <TEXT FILL 1> appointment, please make sure <TEXT FILL 2> the two booklets we gave <TEXT FILL 3> during the in-home interview. These booklets are labeled “Dietary Food Model” and “Handcard.” <TEXT FILL 4> will need these during <TEXT FILL 5> phone interview(s). The person administering the interview will give instructions on how to use them.  During the phone interview, questions will be asked about <TEXT FILL 1> food and beverage consumption habits and any dietary supplements or antiacids taken, as well as <TEXT FILL 5> use of nutrition labels on food packages and menus. This phone interview can take 30-45 minutes to complete. <TEXT FILL 10> .  As a reminder, participation is voluntary and the information you provide will be confidential. After completing the interview, <TEXT FILL 7> will receive $30 loaded onto <TEXT FILL 8> gift <TEXT FILL 9> | |
| **SPANISH** | Antes de <TEXT FILL 1>, asegúrese de <TEXT FILL 2> los dos cuadernillos que le dimos a <TEXT FILL 3> durante la entrevista en el hogar. Estos cuadernillos se llaman “Folleto de Modelo de Alimentos” y “Libro de tarjetas”. <TEXT FILL 4> los necesitará(n) durante <TEXT FILL 5>. La persona que conduzca la entrevista le dará instrucciones sobre cómo usarlos.  Durante la entrevista telefónica, se harán preguntas sobre <TEXT FILL 11> y sobre cualquier suplemento dietético o antiácido que se tome, así como sobre el uso de etiquetas nutricionales en los envases de alimentos y en los menús. Esta entrevista telefónica puede tomar entre 30 y 45 minutos en completarse. <TEXT FILL 10> .  Para recordarle, la participación es voluntaria y la información proporcionada será confidencial. Después de completar la entrevista, <TEXT FILL 7> recibirá(n) $30 dólares agregados a <TEXT FILL 9> de regalo <TEXT FILL 8> . |
| **QUESTION TYPE** | Click NEXT to continue |
| **FILLS (ENG)** | TEXT FILL 1: IF ONE APPOINTMENT, FILL “your” IF (SP AGE 18+ AND NO PROXY)  IF ONE APPOINTMENT, FILL “[SP’s NAME]’s” IF YES PROXY  IF MORE THAN ONE APPOINTMENT, FILL “everyone’s”  TEXT FILL 2: IF ONE APPOINTMENT, FILL “you have” IF (SP AGE 18+ AND NO PROXY) OR IF YES PROXY  IF MORE THAN ONE APPOINTMENT, FILL “everyone has”  TEXT FILL 3: FILL “you”  TEXT FILL 4: IF ONE APPOINTMENT, FILL “You” IF (SP AGE 18+ AND NO PROXY) OR IF PROXY  IF MORE THAN ONE APPOINTMENT, FILL “Everyone”  TEXT FILL 5: IF ONE APPOINTMENT, FILL “your” IF (SP AGE 18+ AND NO PROXY)  ELSE, FILL “their”  TEXT FILL 6: IF ONE APPOINTMENT, FILL “You” IF (SP AGE 18+ AND NO PROXY) OR YES PROXY  IF MORE THAN ONE APPOINTMENT, FILL “Everyone”  TEXT FILL 7: IF ONE APPOINTMENT, FILL “you” IF (SP AGE 18+ AND NO PROXY)  IF SP AGE 0-5 AND YES PROXY, FILL “you”  IF ONE APPOINTMENT, FILL “[SP’s NAME]” IF (SP AGE 6+ AND YES PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “everyone”  TEXT FILL 8: IF ONE APPOINTMENT, FILL “your” IF (SP AGE 18+ AND NO PROXY)  IF ONE APPOINTMENT, FILL “[SP’s NAME]’s” IF YES PROXY  ELSE, FILL “their”  TEXT FILL 9: FILL “card” IF ONLY ONE APPOINTMENT  ELSE “cards”  TEXT FILL 10: FILL “Note that this is the first of two phone interviews. <TEXT FILL 6> can schedule the second at the end of our first interview.” IF REMINDER FOR DAY 1 INTERVIEW  ELSE, FILL IS EMPTY |
| **FILLS (SPA)** | TEXT FILL 1: IF ONE APPOINTMENT, FILL “su cita” IF (SP AGE 18+ AND NO PROXY)  IF ONE APPOINTMENT, FILL “la cita de [SP’s NAME]” IF YES PROXY  IF MORE THAN ONE APPOINTMENT, FILL “de la cita de todos(as)”  TEXT FILL 2: IF ONE APPOINTMENT, FILL “tener” IF (SP AGE 18+ AND NO PROXY) OR IF YES PROXY  IF MORE THAN ONE APPOINTMENT, FILL “que todos(as) tengan”  TEXT FILL 3: FILL “usted”  TEXT FILL 4: IF ONE APPOINTMENT, FILL “Usted” IF (SP AGE 18+ AND NO PROXY) OR IF PROXY  IF MORE THAN ONE APPOINTMENT, FILL “Todos(as)”  TEXT FILL 5: IF ONE APPOINTMENT, FILL “su entrevista telefónica” IF (SP AGE 18+ AND NO PROXY)  ELSE, FILL “sus entrevistas telefónicas”  TEXT FILL 6: IF ONE APPOINTMENT, FILL “Usted” IF (SP AGE 18+ AND NO PROXY) OR YES PROXY  IF MORE THAN ONE APPOINTMENT, FILL “Todos(as)”  TEXT FILL 7: IF ONE APPOINTMENT, FILL “usted” IF (SP AGE 18+ AND NO PROXY)  IF SP AGE 0-5 AND YES PROXY, FILL “usted”  IF ONE APPOINTMENT, FILL “[SP’s NAME]” IF (SP AGE 6+ AND YES PROXY)  IF MORE THAN ONE APPOINTMENT, FILL “todos(as)”  TEXT FILL 8: IF ONE APPOINTMENT, FILL “de usted” IF (SP AGE 18+ AND NO PROXY)  IF ONE APPOINTMENT, FILL “de [SP’s NAME]” IF YES PROXY  ELSE, FILL “de ellos(as)”  TEXT FILL 9: FILL “la tarjeta” IF ONLY ONE APPOINTMENT  ELSE “las tarjetas”  TEXT FILL 10: FILL “Recuerde que esta es la primera de dos entrevistas telefónicas.  <TEXT FILL 6> puede(n) programar la segunda al final de nuestra primera entrevista.”  IF REMINDER FOR DAY 1 INTERVIEW  ELSE, FILL IS EMPTY  TEXT FILL 11: IF ONE APPOINTMENT, FILL “sus hábitos de consumo de alimentos y bebidas” IF (SP AGE 18+ AND NO PROXY)  IF ONE APPOINTMENT, FILL “los hábitos de consumo de alimentos y bebidas de [SP’s NAME]” IF YES PROXY  IF MORE THAN ONE APPOINTMENT, FILL “los hábitos de consumo de alimentos y bebidas de todos(as)” |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | RQUESTIONS |

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| **RAPPT\_MEC** | |
| **ASK** | IF RINTRO = 1 OR RREFUSAL = 3 OR RREFUSEDSOME = ANY AND MEC |
| Do you still have your reminder letter that we mailed to you? If so, please take a moment now to locate it so I can review the instructions with you.    INTERVIEWER: PAUSE TO ALLOW TIME FOR RESPONDENT TO FIND THEIR REMINDER LETTER. IF REMINDER LETTER IS UNAVAILABLE, CONTINUE READING INSTRUCTIONS ALOUD.  <TEXT FILL 1>appointment will take place at a mobile examination center. This examination center will be located at <TEXT FILL 2>. As a reminder, you received a prepaid travel allowance when you scheduled your appointment. If you need to hire someone to care for children, older adults, or others in order to attend your appointment, we will also give you an allowance at the end of your appointment to help cover these costs. <TEXT FILL 3> | |
| **SPANISH** | ¿Todavía tiene la carta de recordatorio que le enviamos por correo? Si es así, quisiera que la busque ahora para poder revisar las instrucciones con usted.    INTERVIEWER: PAUSE TO ALLOW TIME FOR RESPONDENT TO FIND THEIR REMINDER LETTER. IF REMINDER LETTER IS UNAVAILABLE, CONTINUE READING INSTRUCTIONS ALOUD.  <TEXT FILL 1> será en un centro móvil de examen. Este centro de examen estará en <TEXT FILL 2>. Para recordarle, usted recibió un pago por adelantado para su transporte cuando hizo su cita. Si necesita contratar a alguien que cuide a sus hijos(as), personas mayores u otras personas para venir a su cita, también le daremos un pago al final de su cita para ayudarle a cubrir estos gastos. <TEXT FILL 3> |
| **QUESTION TYPE** | Text display |
| **FILLS (ENG)** | TEXT FILL 1: IF ONE APPOINTMENT, FILL “Your” IF (SP AGE 18+ AND NO PROXY)  IF ONE APPOINTMENT, FILL “[SP’s NAME]’s” IF YES PROXY  IF MORE THAN ONE APPOINTMENT, FILL “Everyone’s”  TEXT FILL 2: FILL MEC ADDRESS BASED ON REGION  TEXT FILL 3: FILL “Though you were not selected for this study, you will receive $20 for bringing <TEXT FILL 4> to their <TEXT FILL 5>.” IF NO SPs IN THE HOUSEHOLD ARE (18+ AND NO PROXY)  ELSE, FILL IS EMPTY  TEXT FILL 4: FILL “[SP NAME]” IF ONLY ONE SP  IF 2 SP’s, FILL “[SP1 NAME] and [SP2 NAME]”  IF 3 SP’s, FILL “[SP1 NAME], [SP2 NAME] and [SP3 NAME]”  TEXT FILL 5: FILL “appointment” IF ONLY ONE SP  ELSE, FILL “appointments” |
| **FILLS (SPA)** | TEXT FILL 1: IF ONE APPOINTMENT, FILL “Su cita” IF (SP AGE 18+ AND NO PROXY)  IF ONE APPOINTMENT, FILL “La cita de [SP’s NAME]” IF YES PROXY  IF MORE THAN ONE APPOINTMENT, FILL “La cita de todos(as)”  TEXT FILL 2: FILL MEC ADDRESS BASED ON REGION  TEXT FILL 3: FILL “A pesar de que no fue seleccionado(a) para este estudio, recibirá $20 dólares por traer a <TEXT FILL 4> a su(s) <TEXT FILL 5>.” IF NO SPs IN THE HOUSEHOLD ARE (18+ AND NO PROXY)  ELSE, FILL IS EMPTY  TEXT FILL 4: FILL “[SP NAME]” IF ONLY ONE SP  IF 2 SP’s, FILL “[SP1 NAME] y [SP2 NAME]”  IF 3 SP’s, FILL “[SP1 NAME], [SP2 NAME] y [SP3 NAME]”  TEXT FILL 5: FILL “cita” IF ONLY ONE SP  ELSE, FILL “citas” |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF AT LEAST ONE SP >= 12, GO TO RAPPT\_BLOOD\_MEC  ELSE, GO TO RAAPT2\_MEC |

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| **RAPPT\_BLOOD\_MEC** | |
| **ASK** | IF RAPPT\_MEC = ANY AND AT LEAST ONE SP >=12 AND MEC |
| {I IF ALL APPOINTMENTS ARE FASTING: For the blood draw, <TEXT FILL 1> will need to fast for at least 8 hours prior to the appointment. <TEXT FILL 2> should drink water, but please do not consume any other food or beverages including candy, gum, soda, coffee, alcohol or tea. Do not take cough or cold remedies, non-prescription antacids, laxatives, anti-diarrheals, or dietary supplements such as vitamins or minerals before the blood draw. <TEXT FILL 2> should continue to take any medications as prescribed, unless they are required to be taken with food, in which case bring them to take after the blood draw.}  {IF NO APPOINTMENTS ARE FASTING For the blood draw, <TEXT FILL 3> to fast prior to <TEXT FILL 4>. <TEXT FILL 2> should continue to take any medications as prescribed; do not stop taking them for the blood draw.}  {IF SOME APPOINTMENTS ARE FASTING BUT NOT ALL: For the blood draw, some people will need to fast while others do not. This is due to the age of some people and the morning time of their appointment. <TEXT FILL 5> should fast for at least 8 hours prior to the appointment. <TEXT FILL 6> can and should drink water, but <TEXT FILL 7> should not consume any other food or beverages, including candy, gum, soda, coffee, alcohol or tea. <TEXT FILL 6> should not take cough or cold remedies, non-prescription antacids, laxatives, anti-diarrheals, or dietary supplements such as vitamins or minerals before the blood draw. <TEXT FILL 6> should continue to take any medications as prescribed unless they are required to be taken with food, in which case <TEXT FILL 7> should bring them to take after the blood draw.}  {FOR EACH FASTING APPOINTMENT: <TEXT FILL 8> should not eat or drink anything other than water after <TEXT FILL 9>.}  As a reminder, there will be juice and crackers available after the blood draw, but please feel free to bring a snack if you wish. | |
| **SPANISH** | {I IF ALL APPOINTMENTS ARE FASTING: Para sacar la muestra de sangre, <TEXT FILL 1> deberá ayunar al menos 8 horas antes de la cita. <TEXT FILL 2> deberá(n) beber agua, pero le(s) pedimos que no consuma(n) ningún otro alimento o bebida, incluidos dulces, chicles, refrescos, café, alcohol ni té. No tome(n) remedios para la tos o el resfriado, ni antiácidos, laxantes, antidiarreicos ni suplementos alimenticios como vitaminas o minerales sin receta antes de sacarle la sangre. <TEXT FILL 2> debe(n) continuar tomando los medicamentos que le(s) hayan recetado, a menos que deban tomarse con comida; y si fuera así, puede(n) traerlos para tomarlos después de sacar la sangre.}  {IF NO APPOINTMENTS ARE FASTING Para sacar la sangre, <TEXT FILL 3> ayunar antes de <TEXT FILL 4>. <TEXT FILL 2> debe(n) seguir tomando los medicamentos que le(s) hayan recetado; no deje(n) de tomarlos para sacar la sangre.}  {IF SOME APPOINTMENTS ARE FASTING BUT NOT ALL: Para sacar la sangre, algunas personas necesitarán ayunar y otras no. Esto se debe a la edad de algunas personas y a la hora de su cita. <TEXT FILL 5> debe ayunar al menos durante 8 horas antes de la cita. <TEXT FILL 6> puede(n) y debe(n) beber agua, pero <TEXT FILL 7> no debe(n) consumir ningún otro alimento o bebida, incluidos dulces, chicles, refrescos, café, alcohol ni té. <TEXT FILL 6> no debe(n) tomar remedios para la tos o el resfriado, antiácidos sin receta, laxantes, antidiarreicos ni suplementos alimenticios como vitaminas o minerales antes de sacar la sangre. <TEXT FILL 6> debe(n) seguir tomando sus medicamentos hayan sido recetados, a menos que deba(n) tomarlos con comida, en cuyo caso <TEXT FILL 7> debe(n) traerlos para tomarlos después de sacar la sangre.}  {FOR EACH FASTING APPOINTMENT: <TEXT FILL 8> no debe comer ni beber nada que no sea agua después de la(s) <TEXT FILL 9>.}  Para recordarle, habrá jugo y galletas saladas disponibles después de sacar la sangre, pero puede traer un refrigerio o “snack” si lo desea. |
| **QUESTION TYPE** | Text display |
| **FILLS (ENG)** | TEXT FILL 1: FILL “you” IF ONLY ONE APPOINTMENT AND (SP AGE 18+ AND NO PROXY)  FILL “[SP NAME]” IF ONLY ONE APPOINTMENT SCHEDULED AND YES PROXY  FILL “anyone aged 12 and older” IF MORE THAN ONE APPOINTMENT SCHEDULED  TEXT FILL 2: FILL “You” IF ONLY ONE APPOINTMENT SCHEDULED AND (SP AGE 18+ AND NO PROXY)  FILL “[SP NAME]” IF ONLY ONE APPOINTMENT SCHEDULED AND YES PROXY  ELSE, FILL “Everyone”  TEXT FILL 3: FILL “you do not need” IF ONLY ONE APPOINTMENT SCHEDULED AND (SP AGE 18+ AND NO PROXY)  FILL “[SP NAME] does not need” IF ONLY ONE APPOINTMENT SCHEDULED AND YES PROXY  ELSE, FILL “nobody needs”  TEXT FILL 4: FILL, “your appointment” IF ONLY ONE APPOINTMENT AND (SP AGE 18+ AND NO PROXY)  FILL, “their appointment” IF ONLY ONE APPOINTMENT SCHEDULED AND YES PROXY  FILL, “their appointments” IF MORE THAN ONE APPOINTMENT SCHEDULED  TEXT FILL 5: IF ONLY ONE SP AND FASTING APPOINTMENT AND NO PROXY AND SP IS RESPONDENT, FILL “You”  IF 1 SP WITH FASTING APPOINTMENT AND YES PROXY OR SP IS NOT RESPONDENT, FILL “[SP NAME]”  IF 2 SP WITH FASTING APPOINTMENT AND RESPONDENT IS NOT ONE OF THEM, FILL “[SP1 NAME] and [SP2 NAME]”  IF 2 SP WITH FASTING APPOINTMENTS AND RESPONDENT IS ONE OF THEM, FILL “You and [SP2 NAME]”  TEXT FILL 6: IF ONLY ONE SP WITH FASTING APPOINTMENT AND NO PROXY, FILL “You”  IF 1 SP WITH FASTING APPOINTMENT AND YES PROXY OR SP IS NOT RESPONDENT, FILL “They”  IF 2 SPs WITH FASTING APPOINTMENTS AND RESPONDENT IS NOT ONE OF THEM, FILL “They”  IF 2 SPs FASTING APPOINTMENTS AND RESPONDENT IS ONE OF THEM, FILL “You all”  TEXT FILL 7: IF ONLY ONE SP WITH FASTING APPOINTMENT AND NO PROXY AND SP IS RESPONDENT, FILL “you”  IF 1 SP WITH FASTING APPOINTMENT AND YES PROXY OR SP IS NOT RESPONDENT, FILL “they”  IF 2 SPs WITH FASTING APPOINTMENTS AND RESPONDENT IS NOT ONE OF THEM, FILL “they”  IF 2 SPs WITH FASTING APPOINTMENTS AND RESPONDENT IS ONE OF THEM, FILL “you all”  TEXT FILL 8: FILL “You” IF ONLY ONE APPOINTMENT AND (SP AGE 18+ AND NO PROXY)  FILL “[SP NAME]” IF MORE THAN ONE MORNING APPOINTMENT SCHEDULED OR (ONLY ONE APPOINTMENT AND YES PROXY)  TEXT FILL 9: FILL APPOINTMENT TIME MINUS 8 HOURS |
| **FILLS (SPA)** | TEXT FILL 1: FILL “usted” IF ONLY ONE APPOINTMENT AND (SP AGE 18+ AND NO PROXY)  FILL “[SP NAME]” IF ONLY ONE APPOINTMENT SCHEDULED AND YES PROXY  FILL “las personas de 12 años o más” IF MORE THAN ONE APPOINTMENT SCHEDULED  TEXT FILL 2: FILL “Usted” IF ONLY ONE APPOINTMENT SCHEDULED AND (SP AGE 18+ AND NO PROXY)  FILL “[SP NAME]” IF ONLY ONE APPOINTMENT SCHEDULED AND YES PROXY  ELSE, FILL “Todos”  TEXT FILL 3: FILL “no necesita” IF ONLY ONE APPOINTMENT SCHEDULED AND (SP AGE 18+ AND NO PROXY)  FILL “[SP NAME] no necesita” IF ONLY ONE APPOINTMENT SCHEDULED AND YES PROXY  ELSE, FILL “nadie necesita”  TEXT FILL 4: FILL, “su cita” IF ONLY ONE APPOINTMENT AND (SP AGE 18+ AND NO PROXY)  FILL, “su cita” IF ONLY ONE APPOINTMENT SCHEDULED AND YES PROXY  FILL, “sus citas” IF MORE THAN ONE APPOINTMENT SCHEDULED  TEXT FILL 5: IF ONLY ONE SP AND FASTING APPOINTMENT AND NO PROXY AND SP IS RESPONDENT, FILL “Usted”  IF 1 SP WITH FASTING APPOINTMENT AND YES PROXY OR SP IS NOT RESPONDENT, FILL “[SP NAME]”  IF 2 SP WITH FASTING APPOINTMENT AND RESPONDENT IS NOT ONE OF THEM, FILL “[SP1 NAME] y [SP2 NAME]”  IF 2 SP WITH FASTING APPOINTMENTS AND RESPONDENT IS ONE OF THEM, FILL “Usted y [SP2 NAME]”  TEXT FILL 6: IF ONLY ONE SP WITH FASTING APPOINTMENT AND NO PROXY, FILL “Usted”  IF 1 SP WITH FASTING APPOINTMENT AND YES PROXY OR SP IS NOT RESPONDENT, FILL “Ellos(as)”  IF 2 SPs WITH FASTING APPOINTMENTS AND RESPONDENT IS NOT ONE OF THEM, FILL “Ellos(as)”  IF 2 SPs FASTING APPOINTMENTS AND RESPONDENT IS ONE OF THEM, FILL “Todos(as) ustedes”  TEXT FILL 7: IF ONLY ONE SP WITH FASTING APPOINTMENT AND NO PROXY AND SP IS RESPONDENT, FILL “usted”  IF 1 SP WITH FASTING APPOINTMENT AND YES PROXY OR SP IS NOT RESPONDENT, FILL “ellos(as)”  IF 2 SPs WITH FASTING APPOINTMENTS AND RESPONDENT IS NOT ONE OF THEM, FILL “ellos(as)”  IF 2 SPs WITH FASTING APPOINTMENTS AND RESPONDENT IS ONE OF THEM, FILL “todos(as) ustedes”  TEXT FILL 8: FILL “Usted” IF ONLY ONE APPOINTMENT AND (SP AGE 18+ AND NO PROXY)  FILL “[SP NAME]” IF MORE THAN ONE MORNING APPOINTMENT SCHEDULED OR (ONLY ONE APPOINTMENT AND YES PROXY)  TEXT FILL 9: FILL APPOINTMENT TIME MINUS 8 HOURS |
| **NOTES** | DISPLAY PARAGRAPH 1 IF NUMBER OF FASTING APPOINTMENTS IS >=1  DISPLAY PARAGRAPH 2 IF NUMBER OF FASTING APPOINTMENTS IS 0  DISPLAY PARAGRAPH 3 IF SOME SPs ARE FASTING  DISPLAY PARAGRAPH 4 FOR EACH SP (AGED 12+) THAT HAS A FASTING APPOINTMENT |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | RAAPT2\_MEC |

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| **RAAPT2\_MEC** | |
| **ASK** | IF RAPPT\_BLOOD\_MEC = ANY OR RAPPT\_MEC = ANY AND MEC |
| {ONLY SP AGE 3-5: Children ages 3 to 5 years old will be asked to provide a urine sample at their appointment. We will ask that you assist them in obtaining this sample while in the bathroom at the mobile exam center. If you could ensure they drink something prior to the exam, then it might be easier to obtain a urine sample while at the mobile exam center. Any drink you would like to give them is fine as it will not interfere with any tests that are done.”}    Please leave jewelry and hair accessories at home so they do not need to be removed for the exam. Please also wear clothes that are easy to change into and out of and bring a sweater or something warm to wear because the mobile exam centers are kept cold due to the equipment.    {EACH SP: As a reminder, <TEXT FILL 1> $<MEC EXAM INCENTIVE FILL> loaded onto <TEXT FILL 2> gift card for completing the medical examination portion of the study.} | |
| **SPANISH** | {ONLY SP AGE 3-5: Se pedirá a los(as) niño(as) de 3 a 5 años que den una muestra de orina en su cita. Le pediremos que los ayude a obtener esta muestra mientras estén en el baño del centro móvil de examen. Sería más fácil obtener una muestra de orina si usted pudiera asegurarse de que beban algo antes del examen, mientras se encuentran en el centro móvil de examen. Está bien si les da cualquier tipo de bebida, ya que esto no causará problemas con las pruebas que se hagan.”}    Le pedimos que deje las joyas y los accesorios para el cabello en casa para que no sea necesario quitárselos para el examen. También le pedimos que use ropa que sea fácil de poner y quitar y traiga un suéter o algo de abrigo para ponerse porque los centros móviles de examen tienen temperatura fría debido al equipo.    {EACH SP: Para recordarle, <TEXT FILL 1> $<MEC EXAM INCENTIVE FILL> dólares que se agregarán a <TEXT FILL 2> por completar la parte del estudio correspondiente al examen médico.} |
| **QUESTION TYPE** | Text display |
| **FILLS (ENG)** | TEXT FILL 1: FILL “you will receive” IF (SP AGE 18+ AND NO PROXY) AND ONLY ONE APPOINTMENT SCHEDULED  ELSE, FILL “[SP NAME] will receive”  TEXT FILL 2: FILL “your” IF (SP AGE 18+ AND NO PROXY) AND ONLY ONE APPOINTMENT SCHEDULED  ELSE, FILL “their” |
| **FILLS (SPA)** | TEXT FILL 1: FILL “usted recibirá” IF (SP AGE 18+ AND NO PROXY) AND ONLY ONE APPOINTMENT SCHEDULED  ELSE, FILL “[SP NAME] recibirá”  TEXT FILL 2: FILL “su tarjeta de regalo” IF (SP AGE 18+ AND NO PROXY) AND ONLY ONE APPOINTMENT SCHEDULED  ELSE, FILL “la tarjeta de regalo de ellos(as)” |
| **NOTES** | DISPLAY PARAGRAPH 1 IF SP IS 3 TO 5 YEARS OLD  DISPLAY PARAGRAPH 2 IF SP IS 40+ YEARS OLD  DISPLAY PARAGRAPH 4 FOR EACH SP |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | RQUESTIONS |

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| **RQUESTIONS** | |
| **ASK** | IF RAAPT2\_MEC = ANY OR RAPPT\_DD1 = ANY |
| Do you have any questions for me?  INTERVIEWER: IF RESPONDENT HAS QUESTIONS, ANSWER TO THE BEST OF YOUR ABILITY. | |
| **SPANISH** | ¿Tiene alguna pregunta para mí?  INTERVIEWER: IF RESPONDENT HAS QUESTIONS, ANSWER TO THE BEST OF YOUR ABILITY. |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | RDONE |

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| **RDONE** | |
| **ASK** | IF CANCELAPPT = ANY OR RRESCHEDULED = 1 OR RQUESTIONS = 1 OR RUNKNOWN = 2 |
| (Thank you for your time. Have a good {day/evening}). | |
| **SPANISH** | (Gracias por su tiempo. Que tenga un(a) buen(a) {día/tarde}). |
| **QUESTION TYPE** | Text display |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | BACK\_FROM\_BLAISE |

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| **BACK\_FROM\_BLAISE** | |
| **ASK** | IF RDONE = ANY |
| INTERVIEWER: WHAT WAS THE OUTCOME OF THE REMINDER CALL?   1. REMINDER CALL COMPLETE 2. NOT COMPLETE, SET CALLBACK 3. REFUSAL | |
| **SPANISH** | *N/A* |
| **QUESTION TYPE** | Radio button |
| **FILLS** |  |
| **NOTES** |  |
| **HARD CHECK** |  |
| **SOFT CHECK** |  |
| **VERSION NOTES** |  |
| **NEXT** | IF BACK\_FROM\_BLAISE = 1: END OF REMINDER CALL  IF BACK\_FROM\_BLAISE = 2: CALLBACK SCHEDULER  IF\_BACK\_FROM\_BLAISE = 3: WHO\_REF, IF WHO\_REF = BLANK  ELSE, END. |