Attachment 6l

Dietary Incentive and Scheduling Instrument

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DR1INCT	
ASK	ALL RESPONDENTS

<TEXT FILL 2>

Thank you again for taking the time to participate in this important study about our nation's health. As a thank you for answering these questions, we will add $30 to <TEXT FILL 1> gift card.

(IF NEEDED, SAY Do you accept this offer?)

DID THE RESPONDENT ACCEPT THE INCENTIVE?

1 YES
2 NO

SPANISH	<TEXT FILL 2> Gracias nuevamente por tomarse su tiempo a participar en este importante estudio sobre la salud de las personas en Estados Unidos. Como agradecimiento por responder estas preguntas, agregaremos $30 dólares a <TEXT FILL 1>. (IF NEEDED, SAY ¿Acepta esta oferta?) DID THE RESPONDENT ACCEPT THE INCENTIVE? 1 YES 2 NO
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1 FILL “your” IF DR1PROXY=4 ELSE, FILL “[SP’s NAME]’s” TEXT FILL 2: IF DR1PROXY=(2,3) : FILL: “Thank you again for answering our questions today. Please put your parent or guardian back on the phone.”
FILLS (SPA)	TEXT FILL 1 FILL “su tarjeta de regalo” IF DR1PROXY=4 ELSE, FILL “la tarjeta de regalo de [SP’s NAME]” TEXT FILL 2: IF DR1PROXY=(2,3): FILL: “Gracias nuevamente por responder nuestras preguntas de hoy. Vuelve a poner a uno de tus padres o tutor al teléfono.”
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DR1INCT in {1}: DR1ADDDF ELSE: DR1INCRF

DR1INCRF	
ASK	IF DR1INCT NE 1
Thank you again for your time. I will not place any funds on the card for today's interview. As a reminder, please keep the card for the duration of the study so we can add funds for completing additional study activities. PRESS 1 TO CONTINUE.	
SPANISH	Nuevamente, gracias por su tiempo. No agregaré ningún dinero en la tarjeta para la entrevista de hoy. Le recordamos que debe conservar la tarjeta durante todo el estudio para que podamos agregar fondos por completar actividades adicionales del estudio. PRESS 1 TO CONTINUE.
QUESTION TYPE	Text
FILLS	
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	DS2SCHED

DR1ADDDF	
ASK	IF DR1INCT in {1}
Funds for completing today's interview will be added to the gift card and available for use within 2 business days. Do you still have the card? 1. YES 2. NO 3. NEVER RECEIVED CARD (I.E., PREVIOUSLY REFUSED CARD/INCENTIVES)	

SPANISH	Los fondos por completar la entrevista de hoy se agregarán a la tarjeta de regalo y estarán disponibles para su uso dentro de 2 días hábiles. ¿Todavía tiene la tarjeta? 1 YES 2 NO 3 NEVER RECEIVED CARD (I.E., PREVIOUSLY REFUSED CARD/INCENTIVES)
QUESTION TYPE	Radio button
FILLS	
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DR1ADDDF in {2} or {3}: DR1NEWC IF DR1ADDDF in {1}: DS2SCHED

DR1NEWC	
ASK	IF DR1ADDDF in {2} or {3}
OK, we can assign a new card to <TEXT FILL 1>. The new card will be mailed to [FILL ADDRESS]. Is this the correct address? 1. YES 2. NO	

SPANISH	Está bien. Podemos ofrecerle una nueva tarjeta a <TEXT FILL 1>. La nueva tarjeta se enviará por correo postal a [FILL ADDRESS]. ¿Es esta la dirección correcta? 1. YES 2. NO
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1 FILL “you” IF DR1PROXY=4 ELSE, FILL “[SP NAME]” DISPLAY FULL ADDRESS ({Address1} {Address2} {City} {State} {ZIP})
FILLS (SPA)	TEXT FILL 1 FILL “usted” IF DR1PROXY=4 ELSE, FILL “[SP NAME]” DISPLAY FULL ADDRESS ({Address1} {Address2} {City} {State} {ZIP})
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DR1NEWC in {1}: DR1WRAP ELSE: DR1ADDEDIT

DR1ADDEDIT	
ASK	IF DR1NEWC in {2}
PLEASE UPDATE THE MAILING ADDRESS [SP ADDRESS: ({Address1} {Address2} {City} {State} {ZIP})]	

SPANISH	*N/A*
QUESTION TYPE	Display Address
FILLS	DISPLAY FULL ADDRESS ({Address1} {Address2} {City} {State} {ZIP})
NOTES	DISPLAY THE ADDRESS COLUMNS LISTED ABOVE AND ALLOW THE INTERVIEWER TO MAKE CORRECTIONS AS NEEDED. ONCE THE INTERVIEWER IS DONE, THEY WILL PRESS 1 TO CONTINUE. THE FIELD FOR STATE MAY NOT BE UPDATED. FOR CITY: ONLY ALLOW CHARACTERS, NO NUMERALS ALLOWED. FOR ZIP CODE: REQUIRE 5 NUMERALS. IF DR1NEWC = 2 AND NONE OF THE ADDRESS FIELDS ARE MODIFIED, AUTO-BACKCODE THE RESPONSE TO DR1NEWC = 1
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	DR1WRAP

DR1WRAP	
ASK	IF DR1NEWC in {1} OR DR1ADDEDIT NE BLANK
Once we request the new card, it will take 5-7 business days for it to arrive. It will have these new funds added. (IF NEEDED, SAY: Any remaining funds on the old card will be transferred to the new card as well.) You must activate the card before it can be used. PRESS 1 TO CONTINUE	

SPANISH	Una vez que pidamos la nueva tarjeta, tomará entre 5 y 7 días hábiles en llegar. En esta tarjeta se agregarán estos nuevos fondos. (IF NEEDED, SAY: Los fondos restantes en la tarjeta anterior también se transferirán a la nueva tarjeta). Debe activar la tarjeta antes de poder usarla. PRESS 1 TO CONTINUE
QUESTION TYPE	Text
FILLS	
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	DS2SCHED

DS2SCHED	
ASK	ALL RESPONDENTS WHOSE LANGUAGE IS ENGLISH OR SPANISH, HAVE A COMPLETE STATUS FOR THE DAY 1 DIETARY INTERVIEW

Let's go ahead and schedule the second phone interview. It may take 20 to 45 minutes, and <TEXT FILL 1> will receive an additional $30 on <TEXT FILL 5>
gift card as a token of appreciation after the interview is complete. Participation is voluntary, and the information <TEXT FILL 6> will be confidential. Can we go ahead and schedule <TEXT FILL 2> second dietary interview?

<TEXT FILL 3>

<TEXT FILL 4>

1. WANTS TO SCHEDULE
2. REFUSAL

SPANISH	Hagamos la cita para la segunda entrevista telefónica. Esta entrevista puede tomar entre 20 y 45 minutos y <TEXT FILL 1> recibirá $30 dólares adicionales en su tarjeta de regalo como muestra de agradecimiento después de completar la entrevista. La participación es voluntaria y la información que <TEXT FILL 6> será confidencial. ¿Podemos hacer la cita para la segunda entrevista sobre alimentación de <TEXT FILL 2>? <TEXT FILL 3> <TEXT FILL 4> 1. WANTS TO SCHEDULE 2. REFUSAL
QUESTION TYPE	Radio buttons
FILLS (ENG)	TEXT FILL 1: FILL “you” IF DR1PROXY=4 ELSE FILL “{SP NAME}” TEXT FILL 2: FILL “your” IF DR1PROXY=4 ELSE FILL “{SP NAME}’s” TEXT FILL 3: FILL IF SP IS <6 YEARS OLD, FILL: ‘(READ AS NEEDED: We ask that you or a person who is knowledgeable about [SP NAME’s] diet complete the telephone interview.)’ IF SP IS 6–11 YEARS OLD, FILL: ‘(READ AS NEEDED: We ask that you or a person who is knowledgeable about [SP NAME’s] diet be available to complete the telephone interview with [SP NAME].)’ IF SP IS 12–17 YEARS OLD, FILL: ‘(READ AS NEEDED: We ask that [SP NAME] completes the dietary interview on their own and that you or another parent or guardian be available to give consent at the beginning of the call.)’ TEXT FILL 4: IF SP IS <18 YEARS AND FCBS STATUS IS NOT DONE, FILL: ‘There are a few questions about food choices and food shopping, so we need to speak to someone who prepares meals or does food shopping in your household at least some of the time. If that is not you, we would like to try and schedule the interview when that person is also available.’ TEXT FILL 5: FILL “your” IF DR1PROXY=4 FILL “their” IF DR1PROXY=(1,2,3) TEXT FILL 6: FILL “you provide” IF DR1PROXY=(1,4) FILL “[SP NAME] provides” IF DR1PROXY=(2,3)
FILLS (SPA)	TEXT FILL 1: FILL “usted” IF DR1PROXY=4 ELSE FILL “{SP NAME}” TEXT FILL 2: FILL “usted” IF DR1PROXY=4 ELSE FILL “{SP NAME}”

	TEXT FILL 3: FILL IF SP IS <6 YEARS OLD, FILL: '(READ AS NEEDED: Le pedimos que usted o una persona que sepa sobre la alimentación de [SP NAME] complete la entrevista telefónica).' IF SP IS 6–11 YEARS OLD, FILL: '(READ AS NEEDED: Le pedimos que usted o una persona que sepa sobre la alimentación de [SP NAME] complete la entrevista telefónica con [SP NAME].)' IF SP IS 12–17 YEARS OLD, FILL: '(READ AS NEEDED: Le pedimos que [SP NAME] responda la entrevista telefónica por su cuenta y que usted o uno de los padres o tutor estén disponibles para dar su consentimiento al comienzo de la llamada).' TEXT FILL 4: IF SP IS <18 YEARS AND FCBS STATUS IS NOT DONE, FILL: 'Hay algunas preguntas sobre decisiones y compras de comida, por lo que necesitamos hablar con alguien que prepare las comidas o haga las compras en su hogar al menos parte del tiempo. Si no es usted, nos gustaría tratar programar la entrevista cuando esa persona también esté disponible.' TEXT FILL 5: FILL "BLANK" IF DR1PROXY=4 FILL "BLANK" IF DR1PROXY=(1,2,3) TEXT FILL 6: FILL "que usted proporcione" IF DR1PROXY=(1,4) FILL "que [SP NAME] proporcione" IF DR1PROXY=(2,3)
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DS2SCHED in (1) AND SP HAS PHONE NUMBER IN SYSTEM: DS2CONTACT IF DS2SCHED in (1) AND SP DOES NOT HAVE PHONE NUMBER IN SYSTEM: DS2DPHONEA IF DS2SCHED in (2): DS2DREF

DS2PROXY/DS2PRFNM	
ASK	IF DR1PROXY=(1,2,3)
Will you be the person that we call for [SP NAME]']s second dietary interview? 1. YES 2. NO	

SELECT SP PROXY'S NAME TO CALL FOR SECOND DIETARY INTERVIEW. (What is this person's first name) [DS2PRFNM] <FILL HOUSEHOLD ROSTER>	
SPANISH	¿Es usted la persona a la que llamaremos para la segunda entrevista sobre alimentación de [SP NAME]? 1. YES 2. NO SELECT SP PROXY'S NAME TO CALL FOR SECOND DIETARY INTERVIEW. (¿Cuál es el nombre de esta persona?) [DS2PRFNM] <FILL HOUSEHOLD ROSTER>
QUESTION TYPE	DS2PROXY: RADIO BUTTON DS2PRFNM: DROP DOWN
FILLS	
NOTES	DISPLAY HH ROSTER [DS2PRFNM]. IF SPQSELECTR = SOMEONE OUTSIDE THE HH, INCLUDE SPQPRFNM IN THE ROSTER. IF MDADPROXY = 2, INCLUDE MDADPRFNM IN THE ROSTER. INCLUDE DAY 1 RESPONDENT SELECTED IN DR1SELECTR.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DS2PROXY = 2: DS2PRRELATE ELSE: DS2CONTACT

DS2PRRELATE	
ASK	IF DS2PROXY in {2}

What is this person's relationship to <TEXT FILL 1>?

1. MOTHER (BIOLOGICAL/ADOPTIVE/STEP/FOSTER)
2. FATHER (BIOLOGICAL/ADOPTIVE/STEP/FOSTER)
3. GRANDPARENT (GRANDMOTHER/GRANDFATHER)
4. AUNT/UNCLE
2. DAUGHTER OR SON (BIOLOGICAL/ADOPTIVE/IN-LAW/STEP/FOSTER)
5. BROTHER/SISTER
6. SPOUSE (WIFE/HUSBAND) OR PARTNER
7. OTHER RELATIVE
8. NON-RELATIVE
77. REFUSED
99. DON'T KNOW

SPANISH	¿Cuál es la relación de esta persona con <TEXT FILL 1>? 1. MADRE (BIOLÓGICA/ADOPTIVA/MADRASTRA/DE CRIANZA "FOSTER") 2. PADRE (BIOLÓGICO/ADOPTIVO/PADRASTRO/DE CRIANZA "FOSTER") 3. ABUELA(O) 4. TÍA(O) 2. HIJA(O) (BIOLÓGICO(A)/ADOPTIVO(A)/NUERA O YERNO/HIJASTRA(O)/DE CRIANZA "FOSTER") 5. HERMANO(A) 6. CÓNYUGE (ESPOSO(A)) O PAREJA 7. OTRO PARIENTE 8. NO ES PARIENTE 77. REFUSED 99. DON'T KNOW
QUESTION TYPE	Radio button
FILLS	TEXT FILL 1: FILL "[SP NAME]"
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	DS2CONTACT

DS2CONTACT	
ASK	IF DS2SCHED in (1) AND SP/PROXY HAS PHONE NUMBER IN SYSTEM

Is <TEXT FILL 1> the best number to call <TEXT FILL 2> ?

1. YES
2. NO

SPANISH	¿Es <TEXT FILL 1> el mejor número para llamarlo(a) a <TEXT FILL 2> ? 1. YES 2. NO
QUESTION TYPE	
FILLS (ENG)	TEXT FILL 1: FILL SP/PROXY PHONE NUMBER ON FILE TEXT FILL 2: FILL “you” IF DR1PROXY=4 OR DS2PROXY = 1 ELSE FILL “{DS2PRFNM}”
FILLS (SPA)	TEXT FILL 1: FILL SP/PROXY PHONE NUMBER ON FILE TEXT FILL 2: FILL “usted” IF DR1PROXY=4 OR DS2PROXY = 1 ELSE FILL “{DS2PRFNM}”
NOTES	DISPLAY PHONE NUMBER AS XXX-XXX-XXXX.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DS2CONTACT in (1): DS2DSCHED ELSE: DS2DPHONEA

DS2DPHONEA	
ASK	IF DS2CONTACT in (2) OR SP/PROXY DOES NOT HAVE PHONE NUMBER IN SYSTEM
What is the best phone number to call <TEXT FILL 1> for this interview? ENTER PHONE NUMBER. ENTER '000' IN AREA CODE IF NO PHONE AND SP/PROXY WILL CALL IN. |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER	

SPANISH	¿Cuál es el mejor número de teléfono para <TEXT FILL 1> para esta entrevista? ENTER PHONE NUMBER. ENTER '000' IN AREA CODE IF NO PHONE AND SP/PROXY WILL CALL IN. |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER
QUESTION TYPE	Numeric
FILLS (ENG)	TEXT FILL 1: FILL “you” IF DR1PROXY=4 OR DS2PROXY = 1 ELSE FILL “{DS2PRFNM}”
FILLS (SPA)	TEXT FILL 1: FILL “llamarlo(a) a usted” IF DR1PROXY=4 OR DS2PROXY = 1 ELSE FILL “ llamar a {DS2PRFNM}”
NOTES	ONLY ALLOW 10-DIGIT PHONE NUMBER. DISPLAY PHONE NUMBER AS XXX-XXX-XXXX.
HELP SCREEN	
HARD CHECK	ONLY ALLOW RESPONSE OF DON’T KNOW, REFUSED, "000" or 10 DIGIT PHONE NUMBER. IF PHONE NUMBER PROVIDED, DISPLAY HARD RANGE CHECK MESSAGE IF PHONE NUMBER NOT "000" OR IS 10 DIGITS OF ALL THE SAME NUMBER (I.E., 1111111111): ‘PLEASE ENTER A VALID PHONE NUMBER’.
SOFT CHECK	
VERSION NOTES	
NEXT	DS2DSCHED

DS2DSCHED	
ASK	IF DS2SCHED in (1)
Please keep in mind that for safety reasons we cannot complete the interview while <TEXT FILL 1> are driving. This interview should take about 20 to 45 minutes. Let’s find a day and time when <TEXT FILL 2> interview. LAUNCH SCHEDULER APPLICATION. ACCESS THE CALENDAR AND OFFER DATES/TIMES UNTIL YOU FIND ONE THAT WORKS FOR THE SP/PROXY. 1. APPOINTMENT SCHEDULED 2. DID NOT SCHEDULE APPOINTMENT	

SPANISH	Tenga en cuenta que, por razones de seguridad, no podemos completar la entrevista mientras <TEXT FILL 1> esté conduciendo. Esta entrevista debe tomar entre 20 y 45 minutos. Busquemos un día y una hora en que <TEXT FILL 2>. LAUNCH SCHEDULER APPLICATION. ACCESS THE CALENDAR AND OFFER DATES/TIMES UNTIL YOU FIND ONE THAT WORKS FOR THE SP/PROXY. 1. APPOINTMENT SCHEDULED 2. DID NOT SCHEDULE APPOINTMENT
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL "<TEXT FILL 3> or [SP NAME]" IF SP IS 16-17 YEARS ELSE, FILL "<TEXT FILL 3>" TEXT FILL 2: FILL "<TEXT FILL 3> and [SP NAME] can complete their" IF DR1PROXY=(2,3) "<TEXT FILL 3> can complete [SP NAME]'s" IF DR1PROXY=1 FILL "you can complete your" IF DR1PROXY=4 TEXT FILL 3: FILL "you" IF DR1PROXY=4 OR DS2PROXY = 1 ELSE FILL "{DS2PRFNM}"
FILLS (SPA)	TEXT FILL 1: FILL "<TEXT FILL 3> o [SP NAME]" IF SP IS 16-17 YEARS ELSE, FILL "<TEXT FILL 3>" TEXT FILL 2: FILL "<TEXT FILL 3> y [SP NAME] puedan completar su entrevista IF DR1PROXY=(2,3) "<TEXT FILL 3> pueda completar la entrevista de [SP NAME]" IF DR1PROXY=1 FILL "pueda completar su entrevista" IF DR1PROXY=4 TEXT FILL 3: FILL "usted" IF DR1PROXY=4 OR DS2PROXY = 1 ELSE FILL "{DS2PRFNM}"
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DS2DSCHED in (1): DS2CONTINFO IF DS2DSCHED in (2): DS2DREF

DS2DREF	
ASK	IF DS2DSCHED in (2)

IF SP/PROXY APPEARS UNCERTAIN, BE PREPARED TO HIGHLIGHT THE IMPORTANCE OF THE INTERVIEW. YOU CAN SAY SOMETHING LIKE:

We cannot ask everyone in the country to be in our study. You are special because <TEXT FILL 0> been chosen to participate. No one else can take <TEXT FILL 2> place. We hope that you will help by <TEXT FILL 3>phone interview <TEXT FILL 4>. It will only take about 20 to 45 minutes, and <TEXT FILL 1> will receive $30 on <TEXT FILL 2> gift card after participation. It is a very important part of the NHANES survey. We appreciate your help.

ATTEMPT TO CONVERT THE REFUSAL.
WHAT WAS THE OUTCOME OF THE REFUSAL CONVERSION?

1. WANTS TO SCHEDULE
2. UNABLE TO SCHEDULE AT THIS TIME/WILL SCHEDULE LATER
3. REFUSAL

SPANISH	IF SP/PROXY APPEARS UNCERTAIN, BE PREPARED TO HIGHLIGHT THE IMPORTANCE OF THE INTERVIEW. YOU CAN SAY SOMETHING LIKE: No podemos pedirles a todas la personas del país que formen parte de nuestro estudio. Usted es especial porque <TEXT FILL 0> ha sido elegido(a) para participar. Nadie más puede ocupar su lugar. Esperamos que nos ayude <TEXT FILL 3> en esta entrevista telefónica <TEXT FILL 4>. Solo tomará entre 20 y 45 minutos, y <TEXT FILL 1> recibirá $30 dólares en su tarjeta de regalo después de su participación. Es una parte muy importante de la encuesta NHANES. Le agradecemos su ayuda. ATTEMPT TO CONVERT THE REFUSAL. WHAT WAS THE OUTCOME OF THE REFUSAL CONVERSION? 1. WANTS TO SCHEDULE 2. UNABLE TO SCHEDULE AT THIS TIME/WILL SCHEDULE LATER 3. REFUSAL
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 0: FILL “you have” IF DR1PROXY=4 ELSE FILL “[SP NAME] has” TEXT FILL 1: FILL “you” IF DR1PROXY=4 ELSE FILL “{SP NAME}” TEXT FILL 2: FILL “your” IF DR1PROXY=4 ELSE FILL “their” TEXT FILL 3: FILL “allowing [SP NAME] to do this” IF DR1PROXY=3 ELSE FILL “doing this” TEXT FILL 4: FILL “with [SP NAME]” IF DR1PROXY=2 ELSE FILL “for [SP NAME]” IF DR1PROXY=1 ELSE, FILL IS BLANK
FILLS (SPA)	TEXT FILL 0: FILL “BLANK” IF DR1PROXY=4 ELSE FILL “{SP NAME}” TEXT FILL 1: FILL “usted” IF DR1PROXY=4 ELSE FILL “{SP NAME}” TEXT FILL 2: FILL “BLANK” IF DR1PROXY=4 ELSE FILL “BLANK” TEXT FILL 3: FILL “al permitir que [SP NAME] tome parte” IF DR1PROXY=3 ELSE FILL “al tomar parte” TEXT FILL 4: FILL “ con [SP NAME]” IF DR1PROXY=2 ELSE FILL “ para [SP NAME]” IF DR1PROXY=1 ELSE, FILL IS BLANK
NOTES	ALLOW THE ABILITY TO GO BACK TO DS2SCHED

HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DS2DREF in (1): ALLOW RETURN TO DS2SCHED IF DS2DREF in (2) AND MEC APPT SCHEDULED: DS2CONTINFO IF DS2DREF in (2) AND MEC APPT NOT SCHEDULED: MECSCHED ELSE: DS2DREFREAS

DS2DREFREAS / DS2DREFREASO	
ASK	IF DS2DREF = 3

DESCRIBE WHAT HAPPENED DURING REFUSAL. CHECK ALL THAT APPLY.

1. NO REASON GIVEN
2. NO INTEREST
3. TOO BUSY / NO TIME
4. INTERVIEW TOO LONG
5. DOES NOT PARTICIPATE IN TELEPHONE SURVEYS
6. INCENTIVE ISN'T ENOUGH TO PARTICIPATE / KEEP PARTICIPATING
7. DOES NOT BELIEVE IN STUDIES / WASTE OF TIME OR MONEY
8. GOVERNMENT CONCERNS / MISTRUST OF GOVERNMENT
9. CDC CONCERNS / MISTRUST OF CDC
10. PRIVACY / CONFIDENTIALITY CONCERNS
11. QUESTIONS / SUSPICIONS ABOUT LEGITIMACY
12. TOO OLD / TOO SICK / TOO FRAIL TO PARTICIPATE
13. ALREADY PARTICIPATED ENOUGH
14. OTHER SPECIFY

SPANISH	DESCRIBE WHAT HAPPENED DURING REFUSAL. CHECK ALL THAT APPLY. 1. NO SE DIO NINGUNA RAZÓN 2. NO HUBO INTERÉS 3. DEMASIADO OCUPADO(A) / SIN TIEMPO 4. ENTREVISTA DEMASIADO LARGA 5. NO PARTICIPA EN ENCUESTAS TELEFÓNICAS 6. EL INCENTIVO NO ES SUFICIENTE PARA PARTICIPAR / SEGUIR PARTICIPANDO 7. NO CREE EN LOS ESTUDIOS / PÉRDIDA DE TIEMPO O DINERO 8. PREOCUPACIONES SOBRE EL GOBIERNO / DESCONFIANZA EN EL GOBIERNO 9. PREOCUPACIONES SOBRE LOS CDC / DESCONFIANZA EN LOS CDC 10. PREOCUPACIONES SOBRE PRIVACIDAD / CONFIDENCIALIDAD 11. PREGUNTAS / SOSPECHAS SOBRE LEGITIMIDAD 12. DEMASIADO MAYOR / DEMASIADO ENFERMO(A) / DEMASIADO FRÁGIL PARA PARTICIPAR 13. YA PARTICIPÓ BASTANTE 14. OTHER SPECIFY
QUESTION TYPE	Check all that apply
FILLS	
NOTES	IF REFUSAL: OTHER SPECIFY SELECTED, DISPLAY DS2DREFREASO TEXTBOX WITH 'ENTER OTHER REASON FOR REFUSAL'. ALLOW 100 CHARACTERS.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MORE THAN ONE REASON GIVEN IN DS2DREFREAS: DS2DREFREASM ELSE: MECSCHED

DS2DREFREASM	
ASK	IF DS2DREFREAS = MORE THAN ONE REASON
SELECT THE **MAIN** REASON FOR REFUSAL	

DS2CONTINFO	
ASK	IF DS2DSCHED in (1) We would like to contact <TEXT FILL 1> to remind <TEXT FILL 2> about <TEXT FILL 3> next dietary interview appointment . May we contact <TEXT FILL 1> by phone, text message and/or email? CHECK ALL THAT APPLY
QUESTION TYPE	Radio button
FILLS	1 . YES – PHONE 2. YES - TEXT 3. YES - EMAIL 4. DO NOT CONTACT BY PHONE, TEXT OR EMAIL
NOTES	ONLY DISPLAY IF MORE THAN ONE REASON GIVEN IN DS2DREFREAS LIST POPULATES THE REASONS SELECTED FROM DS2DREFREAS IF OTHER SPECIFY SELECTED PREVIOUSLY, INCLUDE IN RESPONSE LIST, BUT DO NOT INCLUDE TEXT BOX.
SPANISH	Nos gustaría comunicarnos con <TEXT FILL 1> para recordarle sobre <TEXT FILL 3> para la entrevista sobre alimentación. ¿Está bien si nos ponemos en contacto con <TEXT FILL 1> por teléfono, mensaje de texto o correo electrónico? CHECK ALL THAT APPLY 1 . YES – PHONE 2. YES - TEXT 3. YES - EMAIL 4. DO NOT CONTACT BY PHONE, TEXT OR EMAIL
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MEC APPT SCHEDULED: DS2CONTINFO IF MEC APPT NOT SCHEDULED: MECSCHED
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL “you” IF DR1PROXY=4 OR DS2PROXY = 1 ELSE FILL “{DS2PRFNM}” TEXT FILL 2: FILL “you” IF DR1PROXY=4 OR DS2PROXY = 1 FILL “them” IF DS2PROXY = 2 TEXT FILL 3: FILL “your” IF DR1PROXY=4 ELSE FILL “{SP NAME}’s”
FILLS (SPA)	TEXT FILL 1: FILL “usted” IF DR1PROXY=4 OR DS2PROXY = 1 ELSE FILL “{DS2PRFNM}” TEXT FILL 2: FILL “BLANK” IF DR1PROXY=4 OR DS2PROXY = 1 FILL “BLANK” IF DS2PROXY = 2 TEXT FILL 3: FILL “su próxima cita” IF DR1PROXY=4 ELSE FILL “la próxima cita de {SP NAME}”
NOTES	ALLOW CHECK ALL THAT APPLY. IF DS2CONTINFO = 4, DO NOT ALLOW 1, 2 OR 3 TO BE SELECTED.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DS2CONTINFO in (2): DS2TEXT ELSE IF DS2CONTINFO in (3): DS2EMAIL ELSE IF DR2CONTINFO=4 AND DR1MSCHED=1 AND SP IS 0, 11 OR 18+

DS2TEXT	
ASK	IF DS2CONTINFO in (2)

Is <TEXT FILL 1> the best phone number to text <TEXT FILL 2> ? Please note NHANES will not be responsible for any text-related phone charges.

IF NOT BEST PHONE NUMBER TO TEXT, ENTER PHONE NUMBER TO TEXT

|___|___|___| |___|___|___| - |___|___|___|___|
AREA CODE ENTER PHONE NUMBER

SPANISH	¿Es <TEXT FILL 1> el mejor número de teléfono para mensajes de texto a <TEXT FILL 2>? Tenga en cuenta que NHANES no se hará responsable de ningún gasto telefónico relacionado con los mensajes de texto. IF NOT BEST PHONE NUMBER TO TEXT, ENTER PHONE NUMBER TO TEXT |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER
QUESTION TYPE	Numeric
FILLS (ENG)	TEXT FILL 1: FILL PHONE NUMBER ON FILE IF DS2CONTACT = 1. ELSE FILL PHONE NUMBER FROM DS2DPHONEA. TEXT FILL 2: FILL “you” IF DR1PROXY=4 OR DS2PROXY = 1 ELSE FILL “{DS2PRFNM}”
FILLS (SPA)	TEXT FILL 1: FILL PHONE NUMBER ON FILE IF DS2CONTACT = 1. ELSE FILL PHONE NUMBER FROM DS2DPHONEA. TEXT FILL 2: FILL “usted” IF DR1PROXY=4 OR DS2PROXY = 1 ELSE FILL “{DS2PRFNM}”
NOTES	ONLY ALLOW 10-DIGIT PHONE NUMBER. DISPLAY PHONE NUMBER AS XXX-XXX-XXXX
HELP SCREEN	
HARD CHECK	ONLY ALLOW RESPONSE OF DON’T KNOW, REFUSED, "000" or 10 DIGIT PHONE NUMBER. IF PHONE NUMBER PROVIDED, DISPLAY HARD RANGE CHECK MESSAGE IF PHONE NUMBER NOT "000" OR IS 10 DIGITS OF ALL THE SAME NUMBER (I.E., 1111111111): ‘PLEASE ENTER A VALID PHONE NUMBER’.
SOFT CHECK	
VERSION NOTES	
NEXT	IF DS2CONTINFO in (3): DS2EMAIL IF DS2CONTINFO NE (3) AND DR1MSCHED=1 AND SP IS 0–11 or 18+: END OF SECTION IF DS2CONTINFO NE (3) AND DR1MSCHED=1 AND SP IS 12–17: DS2MCONTINF ELSE: END OF SECTION

DS2EMAIL	
ASK	IF DS2CONTINFO in (3)

What email address would be best to use for reminders about <TEXT FILL 1> next dietary interview appointment?

IF RESPONDENT MENTIONS AN EMAIL THAT IS NOT DISPLAYED, ENTER EMAIL ADDRESS BELOW.

1. [SP EMAIL]
2. ADD NEW

ENTER EMAIL ADDRESS:
REENTER EMAIL ADDRESS:

READ EMAIL ADDRESS BACK TO SP/PROXY TO CONFIRM IT IS SPELLED ACCURATELY.

SPANISH	¿Qué dirección de correo electrónico sería la mejor para enviar recordatorios sobre <TEXT FILL 1> para la entrevista sobre alimentación? IF RESPONDENT MENTIONS AN EMAIL THAT IS NOT DISPLAYED, ENTER EMAIL ADDRESS BELOW. 1. [SP EMAIL] 2. ADD NEW ENTER EMAIL ADDRESS: REENTER EMAIL ADDRESS: READ EMAIL ADDRESS BACK TO SP/PROXY TO CONFIRM IT IS SPELLED ACCURATELY.
QUESTION TYPE	TEXT BOX WITH FILL DISPLAY, RADIO BUTTON
FILLS (ENG)	TEXT FILL 1: FILL “your” IF DR1PROXY=4 ELSE FILL “{SP NAME}’s” FILL SP EMAIL FROM MAQEMAIL
FILLS (SPA)	TEXT FILL 1: FILL “su próxima cita” IF DR1PROXY=4 ELSE FILL “la próxima cita de {SP NAME}” FILL SP EMAIL FROM MAQEMAIL
NOTES	MAKE SURE A VALID EMAIL ADDRESS STYLE IS ENTERED.
HELP SCREEN	
HARD CHECK	IF THERE ARE SPACES IN THE EMAIL ADDRESS, IF EMAIL ADDRESS IS MISSING THE @ SYMBOL, OR IF TEXT IS MISSING TO THE LEFT OR RIGHT OF THE @ SYMBOL, DISPLAY: .”ENTER A VALID EMAIL ADDRESS” IF EMAIL ADDRESSES DO NOT MATCH, DISPLAY “EMAIL ADDRESSES DO NOT MATCH. PLEASE CONFIRM AND CORRECT”
SOFT CHECK	
VERSION NOTES	
NEXT	IF DR1MSCHED in (1) AND SP IS 12–17 YRS OLD: DS2MCONTINF IF MEC APPT NOT SCHEDULED: MECSCHED ELSE: END OF SECTION

DS2MCONTINF	
ASK	IF DS2DSCHED in (1) AND SP IS 12–17 YRS OLD
If you would like, we can contact <TEXT FILL 1> to remind them about their next dietary interview appointment. May we contact <TEXT FILL 1> by text message and/or email? CHECK ALL THAT APPLY. 1. TEXT 2. EMAIL 3. CANNOT CONTACT BY TEXT OR EMAIL	
SPANISH	Si lo desea, podemos comunicarnos con <TEXT FILL 1> para recordarle sobre su próxima cita. ¿Está bien si nos comunicamos con <TEXT FILL 1> por mensaje de texto o correo electrónico? CHECK ALL THAT APPLY. 1. TEXT 2. EMAIL 3. CANNOT CONTACT BY TEXT OR EMAIL
QUESTION TYPE	Radio button
FILLS	TEXT FILL 1: {SP NAME}
NOTES	ALLOW CHECK ALL THAT APPLY.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DS2MCONTINF in (1): DS2MTEXT ELSE IF DS2MCONTINF in (2): DS2MEMAIL ELSE IF MEC APPT NOT SCHEDULED: MECSCHED ELSE: END OF SECTION

DS2MTEXT	
ASK	IF DS2MCONTINF in (1)
What is the best phone number to text <TEXT FILL 1>? ENTER PHONE NUMBER TO TEXT |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER	
SPANISH	¿Cuál es el mejor número de teléfono para enviar mensajes de texto a <TEXT FILL 1>? ENTER PHONE NUMBER TO TEXT |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER
QUESTION TYPE	Numeric
FILLS	TEXT FILL 1: {SP NAME}
NOTES	ONLY ALLOW 10-DIGIT PHONE NUMBER. DISPLAY PHONE NUMBER AS XXX-XXX-XXXX
HELP SCREEN	
HARD CHECK	ONLY ALLOW RESPONSE OF DON'T KNOW, REFUSED, "000" or 10 DIGIT PHONE NUMBER. IF PHONE NUMBER PROVIDED, DISPLAY HARD RANGE CHECK MESSAGE IF PHONE NUMBER NOT "000" OR IS 10 DIGITS OF ALL THE SAME NUMBER (I.E., 1111111111): 'PLEASE ENTER A VALID PHONE NUMBER'.
SOFT CHECK	
VERSION NOTES	
NEXT	IF DS2MCONTINF in (2): DS2MEMAIL IF MEC APPT NOT SCHEDULED: MECSCHED ELSE: END OF SECTION

DS2MEMAIL	
ASK	IF DS2MCONTINF in (2)
What email address would be best to use for reminders about <TEXT FILL 1> next dietary interview appointment? ENTER EMAIL ADDRESS. RE-ENTER EMAIL ADDRESS. READ EMAIL ADDRESS BACK TO PROXY TO CONFIRM IT IS SPELLED ACCURATELY.	
SPANISH	¿Qué dirección de correo electrónico sería la mejor para enviar recordatorios sobre la próxima cita para la entrevista sobre alimentación de <TEXT FILL 1> ? ENTER EMAIL ADDRESS. RE-ENTER EMAIL ADDRESS. READ EMAIL ADDRESS BACK TO PROXY TO CONFIRM IT IS SPELLED ACCURATELY.
QUESTION TYPE	Text box
FILLS	TEXT FILL 1: {SP NAME}
NOTES	MAKE SURE A VALID EMAIL ADDRESS STYLE IS ENTERED.
HELP SCREEN	
HARD CHECK	IF THERE ARE SPACES IN THE EMAIL ADDRESS, IF EMAIL ADDRESS IS MISSING THE @ SYMBOL, OR IF TEXT IS MISSING TO THE LEFT OR RIGHT OF THE @ SYMBOL, DISPLAY: ."ENTER A VALID EMAIL ADDRESS" IF EMAIL ADDRESSES DO NOT MATCH, DISPLAY "EMAIL ADDRESSES DO NOT MATCH. PLEASE CONFIRM AND CORRECT"
SOFT CHECK	
VERSION NOTES	
NEXT	IF MEC APPT NOT SCHEDULED: MECSCHED ELSE: END OF SECTION

MECSCHED	
ASK	ALL RESPONDENTS WHO HAVE NOT SCHEDULED A MEC EXAM APPOINTMENT

YOU SHOULD ALREADY BE SPEAKING TO THE PARENT/GUARDIAN IF SP <18. IF NOT, ASK FOR THE PARENT/GUARDIAN TO BE PUT BACK ON THE PHONE.

When <TEXT FILL 1> selected to participate in the NHANES interview, <TEXT FILL 1> also selected to participate in a free health exam. It looks like we do not have <TEXT FILL 2> scheduled for the health exam yet. May we do that now?

(The NHANES Health Exam is conducted at our local Mobile Examination Center right here in your community. The Exam Center is staffed with highly trained health care professionals, including a nurse, phlebotomist, and dental professional.

Although <TEXT FILL 2> may have some of these exams done during a routine check-up, many are not done during check-ups. These exams could provide important health information that <TEXT FILL 2> could not easily access otherwise. Depending on age, <TEXT FILL 3> appointment may include dental, hearing, and vision exams, as well as a breathing test. We also test to see if participants have been exposed to harmful chemicals.

This free exam takes about 2 hours and we will give you some of the results before you leave the Mobile Exam Center. We will send you all other results and additional information about the tests in about 3 to 4 months. We will give <TEXT FILL 2> an additional <TEXT FILL 4> for completing the exam. This will be added to the gift card you already received.)

<TEXT FILL 5>
ANSWER ANY QUESTIONS THE SP/PARENT/PROXY MAY HAVE.

1. CONTINUE WITH SCHEDULING
2. SP REFUSES EXAM

SPANISH	YOU SHOULD ALREADY BE SPEAKING TO THE PARENT/GUARDIAN IF SP <18. IF NOT, ASK FOR THE PARENT/GUARDIAN TO BE PUT BACK ON THE PHONE. Cuando <TEXT FILL 1> fue seleccionado(a) para participar en la entrevista de NHANES, ~~<TEXT FILL 1>~~ también fue seleccionado(a) para participar en un examen gratuito de salud. Parece ser que todavía no hemos programado el examen de salud para <TEXT FILL 2>. ¿Podemos hacer eso ahora? (El examen de salud de NHANES se realiza en nuestro centro móvil de examen aquí en su comunidad. El centro móvil de examen cuenta con profesionales de atención médica altamente capacitados, entre ellos un enfermero, un flebotomista y un profesional dental. Aunquees posible que <TEXT FILL 2> se haya realizado algunos de estos exámenes durante un chequeo médico de rutina, muchos no se realizan durante los chequeos. Estos exámenes podrían dar información de salud importante a los que <TEXT FILL 2> no podría tener acceso fácilmente de otro modo. Dependiendo de la edad, <TEXT FILL 3> podría incluir exámenes dentales, de audición y de la vista, así como una prueba de respiración. También hacemos pruebas para ver si los participantes han estado expuestos a sustancias químicas tóxicas. Este examen gratuito toma alrededor de 2 horas y le daremos algunos de los resultados antes de que se vaya del centro móvil de examen. Le enviaremos todos los demás resultados e información adicional sobre las pruebas en unos 3 o 4 meses. Le daremos a <TEXT FILL 2> una cantidad adicional de <TEXT FILL 4> dólares por completar el examen. Esta cantidad se añadirá a la tarjeta de regalo que ya ha recibido)**.** <TEXT FILL 5> ANSWER ANY QUESTIONS THE SP/PARENT/PROXY MAY HAVE. 1. CONTINUE WITH SCHEDULING 2. SP REFUSES EXAM
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL: ‘you were’ IF DR1PROXY=4 ELSE FILL: ‘{SP NAME} was’ TEXT FILL 2: FILL: ‘you’ IF DR1PROXY=4 ELSE FILL: ‘{SP NAME}’ TEXT FILL 3: FILL ‘your’ IF DR1PROXY=4 ELSE FILL: ‘{SP NAME}’s’ TEXT FILL 4: FILL: ‘${INCENTIVE AMOUNT BASED ON SP AGE}’ TEXT FILL 5: FILL: “(IF PROXY/PARENT/GUARDIAN OF SP IS RELUCTANT AND NOT AN SP: Though you were not selected for NHANES, you will receive $20 for bringing <TEXT FILL 6> to their appointment.)” IF DR1PROXY=(1,2,3) AND PROXYISSP = 2. TEXT FILL 6: FILL: ‘{SP NAME}’ IF DR1PROXY=(1,2,3)
FILLS (SPA)	TEXT FILL 1: FILL: ‘usted’ IF DR1PROXY=4 ELSE FILL: ‘{SP NAME}’ TEXT FILL 2: FILL: ‘usted’ IF DR1PROXY=4

	ELSE FILL: '{SP NAME}' TEXT FILL 3: FILL 'su próxima cita' IF DR1PROXY=4 ELSE FILL: 'la próxima cita de {SP NAME}' TEXT FILL 4: FILL: '${INCENTIVE AMOUNT BASED ON SP AGE}' TEXT FILL 5: FILL: "(IF PROXY/PARENT/GUARDIAN OF SP IS RELUCTANT AND NOT AN SP: Aunque usted no fue seleccionado(a) para NHANES, recibirá $20 dólares por traer a <TEXT FILL 6> a su cita.)" IF DR1PROXY=(1,2,3) AND PROXYISSP = 2. TEXT FILL 6: FILL: '{SP NAME}' IF DR1PROXY=(1,2,3)
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECSCHED in (1): MECCONFIRMSP IF MECSCHED in (2): MECMREF

MECCONFIRMSP	
ASK	All respondents

Participant #: <TEXT FILL 1> SP name: <TEXT FILL 2>
Gender: <TEXT FILL 3> Language: <TEXT FILL 4>
DOB: <TEXT FILL 5>
Age: <TEXT FILL 7>

Before we schedule <TEXT FILL 8> appointment, let's confirm <TEXT FILL 8> name.

What is <TEXT FILL 8> first, middle, and last name?

EDIT THE SP'S NAME AND CONFIRM SPELLING.

SPANISH	Participant #: <TEXT FILL 1> SP name: <TEXT FILL 2> Gender: <TEXT FILL 3> Language: <TEXT FILL 4> DOB: <TEXT FILL 5> Age: <TEXT FILL 7> Antes de programar <TEXT FILL 8>, vamos a confirmar <TEXT FILL 9>. ¿Cuál es <TEXT FILL 10>? EDIT THE SP'S NAME AND CONFIRM SPELLING.
QUESTION TYPE	DISPLAY FILLS WITH ABILITY TO EDIT SP NAME
FILLS (ENG)	TEXT FILL 1: FILL PARTICIPANT ID NUMBER TEXT FILL 2: FILL SP NAME TEXT FILL 3: FILL SP GENDER TEXT FILL 4: FILL SP LANGUAGE TEXT FILL 5: FILL SP DOB TEXT FILL 7: FILL SP AGE TEXT FILL 8: FILL "your" IF DR1PROXY=4 ELSE FILL "[SP NAME]'s" IF DR1PROXY=(1,2,3)
FILLS (SPA)	TEXT FILL 1: FILL PARTICIPANT ID NUMBER TEXT FILL 2: FILL SP NAME TEXT FILL 3: FILL SP GENDER TEXT FILL 4: FILL SP LANGUAGE TEXT FILL 5: FILL SP DOB TEXT FILL 7: FILL SP AGE TEXT FILL 8: FILL "su cita" IF DR1PROXY=4 ELSE FILL "la cita de [SP NAME]" IF DR1PROXY=(1,2,3) TEXT FILL 9: FILL "su nombre" IF DR1PROXY=4 ELSE FILL "el nombre de [SP NAME]" IF DR1PROXY=(1,2,3) TEXT FILL 10: FILL "su primer nombre, su segundo nombre y su apellido" IF DR1PROXY=4 ELSE FILL "el primer nombre, el segundo nombre y el apellido de [SP NAME]" IF DR1PROXY=(1,2,3)

NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	MECPROXY/MECPRFNM

MECPROXY/MECPRFNM	
ASK	IF DR1PROXY=(1,2,3)
Will you be the person that takes [SP NAME] to their exam appointment? 1. YES 2. NO SELECT SP PROXY'S NAME GOING TO THE MEC. (What is this person's first name) [MECPRFNM] <FILL HOUSEHOLD ROSTER>	
SPANISH	¿Es usted la persona que llevará a [SP NAME] a su cita para el examen? 1. YES 2. NO SELECT SP PROXY'S NAME GOING TO THE MEC. (¿Cuál es el nombre de esta persona) [MECPRFNM] <FILL HOUSEHOLD ROSTER>
QUESTION TYPE	MECPROXY: RADIO BUTTON MECPRFNM: DROP DOWN
FILLS	
NOTES	DISPLAY HH ROSTER [MECPRFNM]. IF SPQSELECTR = SOMEONE OUTSIDE THE HH, INCLUDE SPQPRFNM IN THE ROSTER. IF MDAMPROXY = 2, INCLUDE MDAMPRFNM IN THE ROSTER. INCLUDE DAY 1 RESPONDENT SELECTED IN DR1SELECTR.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	

VERSION NOTES	
NEXT	IF MECPROXY = 1 AND SP LANGUAGE IS SPANISH: MECINT IF MECPROXY = 2: MECPRRELATE ELSE: MECMSCHED

MECPRRELATE	
ASK	IF MECPROXY in {2}
What is this person's relationship to <TEXT FILL 1>? 1. MOTHER (BIOLOGICAL/ADOPTIVE/STEP/FOSTER) 2. FATHER (BIOLOGICAL/ADOPTIVE/STEP/FOSTER) 3. GRANDPARENT (GRANDMOTHER/GRANDFATHER) 4. AUNT/UNCLE 2. DAUGHTER OR SON (BIOLOGICAL/ADOPTIVE/IN-LAW/STEP/FOSTER) 5. BROTHER/SISTER 6. SPOUSE (WIFE/HUSBAND) OR PARTNER 7. OTHER RELATIVE 8. NON-RELATIVE 77. REFUSED 99. DON'T KNOW	
SPANISH	¿Cuál es la relación de esta persona con <TEXT FILL 1>? 1. MADRE (BIOLÓGICA/ADOPTIVA/MADRASTRA/DE CRIANZA "FOSTER") 2. PADRE (BIOLÓGICO/ADOPTIVO/PADRASTRO/DE CRIANZA "FOSTER") 3. ABUELA(O) 4. TÍA(O) 2. HIJA(O) (BIOLÓGICO(A)/ADOPTIVO/(A)/NUERA/YERNO/HIJASTRA(O)/DE CRIANZA "FOSTER") 5. HERMANO(A) 6. ESPOSA(O) O PAREJA 7. OTRO PARIENTE 8. NO ES PARIENTE 77. REFUSED 99. DON'T KNOW
QUESTION TYPE	Radio button
FILLS	TEXT FILL 1: FILL "[SP NAME]"
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF SP'S LANGUAGE IS SPANISH: MECINT

	ELSE: MECMSCHED

MECINT	
ASK	IF SP'S LANGUAGE IS SPANISH
It may be helpful for someone to interpret for <TEXT FILL 3> during <TEXT FILL 1> exam appointment. A family member or friend can attend the appointment to interpret for <TEXT FILL 2>. If not, we can arrange to have an interpreter. Which works for you? 1. FAMILY/FRIEND WILL INTERPRET 2. NHANES WILL PROVIDE INTERPRETER	

SPANISH	Podría ser útil que alguien interprete para <TEXT FILL 3> durante <TEXT FILL 1> para el examen. Un familiar o un(a) amigo(a) puede ir a la cita para interpretar para <TEXT FILL 2>. Si no es así, podemos encargarnos de conseguirle un intérprete. ¿Qué prefiere? 1. FAMILY/FRIEND WILL INTERPRET 2. NHANES WILL PROVIDE INTERPRETER
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL "your" IF DR1PROXY=4 FILL "[SP NAME]'s" IF DR1PROXY=(1,2,3) TEXT FILL 2: FILL "you" IF DR1PROXY=4 FILL "[SP NAME]" IF DR1PROXY=(1,2,3) TEXT FILL 3: FILL "you" IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL "{MECPRFNM}"
FILLS (SPA)	TEXT FILL 1: FILL "su cita" IF DR1PROXY=4 FILL "la cita de [SP NAME]" IF DR1PROXY=(1,2,3) TEXT FILL 2: FILL "usted" IF DR1PROXY=4 FILL "[SP NAME]" IF DR1PROXY=(1,2,3) TEXT FILL 3: FILL "usted" IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL "{MECPRFNM}"
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	MECMSCHED

MECMSCHED	
ASK	All respondents
Participant #: <TEXT FILL 1> Gender: <TEXT FILL 3> DOB: <TEXT FILL 5> Age: <TEXT FILL 7> SP name: <TEXT FILL 2> Language: <TEXT FILL 4> The exam takes about 2 hours. Let's find a day and time that works for <TEXT FILL 9>. LAUNCH SCHEDULER APPLICATION. ACCESS THE CALENDAR AND OFFER	

LOCATIONS/DATES/TIMES UNTIL YOU FIND ONE THAT WORKS FOR THE SP/PROXY.

[WHEN IN THE SCHEDULER, SEE IF ANY OTHER SP IN THIS HOUSEHOLD HAS AN APPOINTMENT MADE FOR THE SAME DAY AND TIME (WITHIN A 2 HOUR WINDOW). IF YES, THEN ASK IF THEY WILL BE TRAVELING TOGETHER OR SEPARATELY. THIS IS NEEDED TO KNOW IF THEY SHOULD EACH GET A TRAVEL INCENTIVE IF TRAVELING SEPARATELY, OR JUST ONE TRAVEL INCENTIVE IF TRAVELING TOGETHER.]

1. APPOINTMENT SCHEDULED
2. DID NOT SCHEDULE APPOINTMENT

SPANISH	Participant #: <TEXT FILL 1> SP name: <TEXT FILL 2> Gender: <TEXT FILL 3> Language: <TEXT FILL 4> DOB: <TEXT FILL 5> Age: <TEXT FILL 7> El examen toma como 2 horas. Busquemos un día y una hora convenientes para <TEXT FILL 9>. LAUNCH SCHEDULER APPLICATION. ACCESS THE CALENDAR AND OFFER LOCATIONS/DATES/TIMES UNTIL YOU FIND ONE THAT WORKS FOR THE SP/PROXY. [WHEN IN THE SCHEDULER, SEE IF ANY OTHER SP IN THIS HOUSEHOLD HAS AN APPOINTMENT MADE FOR THE SAME DAY AND TIME (WITHIN A 2 HOUR WINDOW). IF YES, THEN ASK IF THEY WILL BE TRAVELING TOGETHER OR SEPARATELY. THIS IS NEEDED TO KNOW IF THEY SHOULD EACH GET A TRAVEL INCENTIVE IF TRAVELING SEPARATELY, OR JUST ONE TRAVEL INCENTIVE IF TRAVELING TOGETHER.] 1. APPOINTMENT SCHEDULED 2. DID NOT SCHEDULE APPOINTMENT
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL PARTICIPANT ID NUMBER TEXT FILL 2: FILL SP NAME TEXT FILL 3: FILL SP GENDER TEXT FILL 4: FILL SP LANGUAGE TEXT FILL 5: FILL SP DOB TEXT FILL 7: FILL SP AGE TEXT FILL 9: IF DR1PROXY=4, FILL: 'you' IF MECPROXY = 1, FILL: 'you and {SP NAME}' IF MECPROXY = 2, FILL: [MECPRFNM]
FILLS (SPA)	TEXT FILL 1: FILL PARTICIPANT ID NUMBER TEXT FILL 2: FILL SP NAME TEXT FILL 3: FILL SP GENDER TEXT FILL 4: FILL SP LANGUAGE TEXT FILL 5: FILL SP DOB TEXT FILL 7: FILL SP AGE

	TEXT FILL 9: IF DR1PROXY=4, FILL: 'usted IF MECPROXY = 1, FILL: 'usted y {SP NAME}' IF MECPROXY = 2, FILL: [MECPRFNM]
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECMSCHED in (1): MECMAPPT SCREEN IF MECMSCHED in (2): MECMREF

MECMREF	
ASK	IF MECMSCHED in (2) OR MECSCHED in (2)

IF SP/PROXY SEEMS UNCERTAIN, BE PREPARED TO HIGHLIGHT THE IMPORTANCE OF THE EXAM. YOU CAN SAY SOMETHING LIKE:

- Participation in the exam will give you more information on <TEXT FILL 1> health.
- It will also help doctors, researchers and policy makers improve people's health in the United States. For example, NHANES data found that high levels of lead were associated with learning and behavioral problems in children, and that too little folate in a pregnant woman's diet could cause birth defects in their baby. NHANES data also led to the understanding that high cholesterol can lead to heart disease.
- Participating in the exam is really important and <TEXT FILL 3> will receive <TEXT FILL 2> as a thank you for completing the exams and answering questions. Is there any specific reason why you may not want <TEXT FILL 4> to participate?

ATTEMPT TO CONVERT THE REFUSAL.
WHAT WAS THE OUTCOME OF THE REFUSAL CONVERSION?

1. WANTS TO SCHEDULE
2. UNABLE TO SCHEDULE AT THIS TIME/WILL SCHEDULE LATER
3. REFUSAL

SPANISH	IF SP/PROXY SEEMS UNCERTAIN, BE PREPARED TO HIGHLIGHT THE IMPORTANCE OF THE EXAM. YOU CAN SAY SOMETHING LIKE: • La participación en el examen le dará más información sobre <TEXT FILL 1> . • También ayudará a doctores, investigadores científicos y legisladores a mejorar la salud de las personas en los Estados Unidos. Por ejemplo, los datos de NHANES revelaron que los niveles elevados de plomo estaban asociados a problemas de aprendizaje y comportamiento en los niños, o que la falta de folato en la dieta de una mujer embarazada podía provocar defectos congénitos en su bebé. También permitió entender que el colesterol elevado podía provocar enfermedades del corazón. • Participar en el examen es muy importante y <TEXT FILL 3> recibirá <TEXT FILL 2> dólares como agradecimiento por completar los exámenes y responder las preguntas. ¿Hay alguna razón específica por la que usted no quiera que <TEXT FILL 4> participe? ATTEMPT TO CONVERT THE REFUSAL. WHAT WAS THE OUTCOME OF THE REFUSAL CONVERSION? 1. WANTS TO SCHEDULE 2. UNABLE TO SCHEDULE AT THIS TIME/WILL SCHEDULE LATER 3. REFUSAL
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL “your” IF DR1PROXY=4 ELSE FILL “[SP NAME]’s” TEXT FILL 2: FILL ${INCENTIVE AMOUNT BASED ON SP AGE} TEXT FILL 3: FILL: ‘you’ IF DR1PROXY=4 ELSE FILL: ‘{SP NAME}’ TEXT FILL 4: FILL: ‘IF ‘{SP NAME} IF DR1PROXY=(1,2,3) ELSE: NO FILL
FILLS (SPA)	TEXT FILL 1: FILL “su salud” IF DR1PROXY=4 ELSE FILL “la salud de [SP NAME]” TEXT FILL 2: FILL ${INCENTIVE AMOUNT BASED ON SP AGE} TEXT FILL 3: FILL: ‘usted’ IF DR1PROXY=4 ELSE FILL: ‘{SP NAME}’ TEXT FILL 4: FILL: ‘IF ‘{SP NAME} IF DR1PROXY=(1,2,3) ELSE: NO FILL

NOTES	ALLOW THE ABILITY TO GO BACK TO MECMSCHED.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECMREF in {1}: MECSCHED IF MECMREF in {2}: END OF SECTION ELSE: MECMREFREAS

MECMREFREAS / MECMREFREASO	
ASK	IF MECMREF in (3)

DESCRIBE WHAT HAPPENED DURING REFUSAL. CHECK ALL THAT APPLY.

1. NO REASON GIVEN
2. NO INTEREST
3. TOO BUSY / NO TIME
4. EXAM TAKES TOO MUCH TIME / EXAM TOO LONG
5. EXAM PARTICIPATION IS TOO BURDENSOME
6. INCENTIVE ISN'T ENOUGH TO PARTICIPATE / KEEP PARTICIPATING
7. DOES NOT BELIEVE IN STUDIES / WASTE OF TIME OR MONEY
8. GOVERNMENT CONCERNS / MISTRUST OF GOVERNMENT
9. CDC CONCERNS / MISTRUST OF CDC
10. PRIVACY / CONFIDENTIALITY CONCERNS
11. QUESTIONS / SUSPICIONS ABOUT LEGITIMACY
12. CONCERN WITH EXAM / DOCTOR ISSUES
13. MEC IS TOO FAR AWAY
14. TRANSPORTATION PROBLEMS
15. TOO YOUNG TO PARTICIPATE
16. TOO OLD / TOO SICK / TOO FRAIL TO PARTICIPATE
17. EXPOSURE TO EMERGING DISEASES / CONCERNS WITH GETTING SICK
18. FEAR OF NEEDLES/GIVING BLOOD
19. RELIGIOUS OR CULTURAL CONCERN
20. ALREADY PARTICIPATED ENOUGH
21. OTHER SPECIFY

SPANISH	*N/A*
QUESTION TYPE	Check all that apply
FILLS	
NOTES	IF OTHER SPECIFY SELECTED, DISPLAY MECMREFRESO TEXT BOX WITH 'ENTER OTHER REASON FOR REFUSAL. ALLOW 100 CHARACTERS.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MORE THAN ONE REASON GIVEN IN MECMREFREAS: MECMREFREASM

MECMREFREASM	
ASK	IF MECMREFREAS = MORE THAN ONE REASON
SELECT THE **MAIN** REASON FOR REFUSAL	
SPANISH	*N/A*
QUESTION TYPE	Radio button
FILLS	
NOTES	ONLY DISPLAY IF MORE THAN ONE REASON GIVEN IN MECMREFREAS LIST POPULATES THE REASONS SELECTED FROM MECMREFREAS IF OTHER SPECIFY SELECTED PREVIOUSLY, INCLUDE IN RESPONSE LIST, BUT DO NOT INCLUDE TEXT BOX.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	END OF SECTION

MECMAPPT	
ASK	IF MECMSCHED in (1)

<TEXT FILL 1> appointment is scheduled for <TEXT FILL 2> at <TEXT FILL 3>.

The exam appointment is located at <TEXT FILL 4>

FASTING REQUIREMENT: <TEXT FILL 5>

<TEXT FILL 6>
We will mail <TEXT FILL 9>with directions to the exam location. We will also contact <TEXT FILL 10>to remind <TEXT FILL 11>of the appointment and these details closer to the date.

PRESS 1 TO CONTINUE.

SPANISH	<TEXT FILL 1> está programada para el <TEXT FILL 2> a la(s) <TEXT FILL 3>. La cita para el examen se realizará en <TEXT FILL 4> FASTING REQUIREMENT: <TEXT FILL 5> <TEXT FILL 6> Le enviaremos por correo postal <TEXT FILL 9> con indicaciones para llegar al lugar del examen. También nos comunicaremos con <TEXT FILL 10> para recordarle a <TEXT FILL 11> sobre la cita y estos detalles más cerca de la fecha. PRESS 1 TO CONTINUE.
QUESTION TYPE	Instructions
FILLS (ENG)	TEXT FILL 1: FILL “Your” IF DR1PROXY=4 ELSE FILL “[SP NAME]’s” TEXT FILL 2: FILL APPOINTMENT DATE FROM WEB SCHEDULER TEXT FILL 3: FILL APPOINTMENT TIME FROM WEB SCHEDULER. TEXT FILL 4: MEC EXAM LOCATION TEXT FILL 5: IF 11 AM OR EARLIER APPT AND SP IS 12 OR OLDER, FILL: ‘FASTING’ ELSE, FILL: ‘NONFASTING’ TEXT FILL 6: IF SP IS 12+ YEARS AND HAS AN APPOINTMENT AT 11:00 AM OR EARLIER. FILL “ For the blood draw, <TEXT FILL 7> will need to fast for at least 8 hours prior to the appointment. <TEXT FILL 8> 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 8> 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.” ELSE, FILL IS EMPTY. TEXT FILL 7: FILL “you” IF DR1PROXY=4 FILL “[SP NAME]” IF DR1PROXY=(1,2,3) TEXT FILL 8: FILL “You” IF DR1PROXY=4 FILL “[SP NAME]” IF DR1PROXY=(1,2,3) TEXT FILL 9: FILL “you a reminder letter” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “a reminder letter to [SP NAME]’s address on file” TEXT FILL 10: FILL “you” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “{MECPRFNM}” TEXT FILL 11: FILL “you” IF DR1PROXY=4 OR MECPROXY = 1 FILL “them” IF MECPROXY = 2
FILLS (SPA)	

	TEXT FILL 1: FILL “Su cita” IF DR1PROXY=4 ELSE FILL “La cita de [SP NAME]” TEXT FILL 2: FILL APPOINTMENT DATE FROM WEB SCHEDULER TEXT FILL 3: FILL APPOINTMENT TIME FROM WEB SCHEDULER. TEXT FILL 4: MEC EXAM LOCATION TEXT FILL 5: IF 11 AM OR EARLIER APPT AND SP IS 12 OR OLDER, FILL: ‘FASTING’ ELSE, FILL: ‘NONFASTING’ TEXT FILL 6: IF SP IS 12+ YEARS AND HAS AN APPOINTMENT AT 11:00 AM OR EARLIER. FILL “Para sacar una muestra de sangre, <TEXT FILL 7> deberá ayunar al menos 8 horas antes de la cita. <TEXT FILL 8> deberá beber agua, pero le pedimos que no consuma ningún otro alimento o bebida, incluidos dulces, chicles, refrescos, café, alcohol o té. No tome remedios para la tos o el resfriado, antiácido sin receta, laxantes, antidiarreicos ni suplementos alimenticios como vitaminas o minerales sin receta antes de sacar la muestra de sangre. <TEXT FILL 8> debe continuar tomando los medicamentos que le hayan recetado, a menos que deban tomarse con comida, en cuyo caso puede traerlos para tomarlos después de sacar la muestra de sangre.” ELSE, FILL IS EMPTY. TEXT FILL 7: FILL “usted” IF DR1PROXY=4 FILL “[SP NAME]” IF DR1PROXY=(1,2,3) TEXT FILL 8: FILL “Usted” IF DR1PROXY=4 FILL “[SP NAME]” IF DR1PROXY=(1,2,3) TEXT FILL 9: FILL “una carta recordatoria a su dirección” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “una carta recordatoria a la dirección de [SP NAME] que tenemos en nuestros registros” TEXT FILL 10: FILL “usted” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “{MECPRFNM}” TEXT FILL 11: FILL “usted” IF DR1PROXY=4 OR MECPROXY = 1 FILL “ellos” IF MECPROXY = 2
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	MECACCOM

MECACCOM / MECACCOMO	
ASK	IF MECMSCHED in (1)

Participant #: <TEXT FILL 1>
Gender: <TEXT FILL 3>
DOB: <TEXT FILL 5>
Age: <TEXT FILL 7>

SP name: <TEXT FILL 2>
Language: <TEXT FILL 4>
Fasting req: <TEXT FILL 6>

Will <TEXT FILL 0> need any assistance or is there any situation that would be helpful for our exam staff to know in advance?

CHECK ALL THAT APPLY:

1. NO BLOOD
2. CONVERT BLOOD
3. POOR VISION OR BLIND
4. HEARING IMPAIRED OR DEAF
5. COGNITIVE IMPAIRMENT
6. USES CRUTCHES, WALKER, OR CANE
7. USES WHEELCHAIR
8. NEEDS WHEELCHAIR
9. OBESE
10. OTHER PHYSICAL IMPAIRMENT
11. SUBSTANCE ABUSE
12. LIFT NEEDED
13. REQUIRES ADAPTIVE DEVICES (SPECIFY)
14. OTHER PROXY INFORMATION (SPECIFY)
15. OTHER (SPECIFY)
16. NONE

SPANISH	Participant #: <TEXT FILL 1> SP name: <TEXT FILL 2> Gender: <TEXT FILL 3> Language: <TEXT FILL 4> DOB: <TEXT FILL 5> Fasting req: <TEXT FILL 6> Age: <TEXT FILL 7> ¿Necesitará <TEXT FILL 0> algún tipo de ayuda, o existe alguna situación que sería útil que nuestro personal del examen sepa con anticipación? CHECK ALL THAT APPLY: 3. NO BLOOD 4. CONVERT BLOOD 5. POOR VISION OR BLIND 6. HEARING IMPAIRED OR DEAF 7. COGNITIVE IMPAIRMENT 8. USES CRUTCHES, WALKER, OR CANE 9. USES WHEELCHAIR 10. NEEDS WHEELCHAIR 11. OBESE 12. OTHER PHYSICAL IMPAIRMENT 13. SUBSTANCE ABUSE 14. LIFT NEEDED 15. REQUIRES ADAPTIVE DEVICES (SPECIFY) 16. OTHER PROXY INFORMATION (SPECIFY) 17. OTHER (SPECIFY) 18. NONE
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 0: FILL: 'you' IF DR1PROXY=4 ELSE FILL: '[SP NAME]' TEXT FILL 1: FILL PARTICIPANT ID NUMBER TEXT FILL 2: FILL SP NAME TEXT FILL 3: FILL SP GENDER TEXT FILL 4: FILL SP LANGUAGE TEXT FILL 5: FILL SP DOB TEXT FILL 6: IF 11 AM OR EARLIER APPT AND SP IS 12 OR OLDER, FILL: 'FASTING' ELSE, FILL: 'NONFASTING' TEXT FILL 7: FILL SP AGE
FILLS (SPA)	TEXT FILL 0: FILL: 'usted' IF DR1PROXY=4 ELSE FILL: '[SP NAME]'

	TEXT FILL 1: FILL PARTICIPANT ID NUMBER TEXT FILL 2: FILL SP NAME TEXT FILL 3: FILL SP GENDER TEXT FILL 4: FILL SP LANGUAGE TEXT FILL 5: FILL SP DOB TEXT FILL 6: IF 11 AM OR EARLIER APPT AND SP IS 12 OR OLDER, FILL: 'FASTING ELSE, FILL: 'NONFASTING' TEXT FILL 7: FILL SP AGE
NOTES	ALLOW CHECK ALL THAT APPLY, BUT 'NONE' IS SINGLE SELECT. IF 'REQUIRES ADAPTIVE DEVICES (SPECIFY)' SELECTED, DISPLAY MECACCOMO1 TEXTBOX WITH 'ENTER ADAPTIVE DEVICES.' ALLOW 100 CHARACTERS. IF 'OTHER PROXY INFORMATION (SPECIFY)' SELECTED, DISPLAY MECACCOMO2 TEXTBOX WITH 'ENTER OTHER PROXY INFORMATION.' ALLOW 100 CHARACTERS. IF 'OTHER SPECIFY' SELECTED, DISPLAY MECACCOMO3 TEXTBOX WITH 'ENTER OTHER ASSISTANCE/SITUATION.' ALLOW 100 CHARACTERS.
HELP SCREEN	
HARD CHECK	IF 'NONE' IS SELECTED WITH OTHER CATEGORIES, DISPLAY HARD CHECK MESSAGE: "IF "NONE" IS SELECTED, NO OTHER CATEGORY SHOULD BE SELECTED." IF NONE OF THE ITEMS ARE SELECTED, DISPLAY: "INTERVIEWER: ANSWER REQUIRED. IF EXISTING CODES DO NOT APPLY, SELECT 'NONE'."
SOFT CHECK	
VERSION NOTES	
NEXT	MECMTRAVEL

MECMTRAVEL	
ASK	IF MECMSCHED in (1)
BASED ON INFORMATION FROM THE WEB SCHEDULER, IF THE SP WILL BE TRAVELING SEPARATELY TO THE MEC EXAM AND SHOULD RECEIVE THE TRAVEL INCENTIVE, READ THE TEXT BELOW AND SELECT 1. IF THE SP WILL NOT BE TRAVELING SEPARATELY AND THE TRAVEL INCENTIVE WILL GO ON ANOTHER HOUSEHOLD MEMBER'S CARD, DO NOT READ THE TEXT AND SELECT 3. To help with getting to the exam, <TEXT FILL 1> will be added to <TEXT FILL 2> gift card.	

1. SP WILL RECEIVE TRAVEL INCENTIVE 2. SP WILL RECEIVE TRAVEL INCENTIVE, BUT DOES NOT HAVE A GIFT CARD (DECLINED CARD PREVIOUSLY) 3. ANOTHER HH MEMBER WILL RECEIVE TRAVEL INCENTIVE 4. REQUEST RTI ARRANGE TRANSPORTATION 4. SP DECLINES TRAVEL INCENTIVE	
SPANISH	BASED ON INFORMATION FROM THE WEB SCHEDULER, IF THE SP WILL BE TRAVELING SEPARATELY TO THE MEC EXAM AND SHOULD RECEIVE THE TRAVEL INCENTIVE, READ THE TEXT BELOW AND SELECT 1. IF THE SP WILL NOT BE TRAVELING SEPARATELY AND THE TRAVEL INCENTIVE WILL GO ON ANOTHER HOUSEHOLD MEMBER'S CARD, DO NOT READ THE TEXT AND SELECT 3. Para ayudarle a llegar al lugar del examen, se agregarán <TEXT FILL 1> dólares a <TEXT FILL 2>. 1. SP WILL RECEIVE TRAVEL INCENTIVE 2. SP WILL RECEIVE TRAVEL INCENTIVE, BUT DOES NOT HAVE A GIFT CARD (DECLINED CARD AT SP QUESTIONNAIRE) 3. ANOTHER HH MEMBER WILL RECEIVE TRAVEL INCENTIVE 4. REQUEST RTI ARRANGE TRANSPORTATION 5. SP DECLINES TRAVEL INCENTIVE
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: $[FILL INCENTIVE BASED ON DISTANCE TO MEC] TEXT FILL 2: FILL 'your' IF DR1PROXY=4 ELSE FILL "[SP NAME]'s"
FILLS (SPA)	TEXT FILL 1: $[FILL INCENTIVE BASED ON DISTANCE TO MEC] TEXT FILL 2: FILL 'su tarjeta de regalo' IF DR1PROXY=4 ELSE FILL "la tarjeta de regalo de [SP NAME]"
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECMTRAVEL = 2: DR1NEWC2 ELSE: MECMPLANS

DR1NEWC2	
ASK	IF MECMTRAVEL = 2
OK, we can assign a new card to <TEXT FILL 1>. The new card will be mailed to [FILL ADDRESS]. Is this the correct address? 1. YES 2. NO	
SPANISH	Está bien. Podemos ofrecerle una nueva tarjeta a <TEXT FILL 1>. La nueva tarjeta se enviará por correo postal a [FILL ADDRESS]. ¿Es esta es la dirección correcta? 1. YES 2. NO
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1 FILL “you” IF DR1PROXY=4 ELSE, FILL “[SP NAME]” DISPLAY FULL ADDRESS ({Address1} {Address2} {City} {State} {ZIP})
FILLS (SPA)	TEXT FILL 1 FILL “su nombre” IF DR1PROXY=4 ELSE, FILL “a nombre de [SP NAME]” DISPLAY FULL ADDRESS ({Address1} {Address2} {City} {State} {ZIP})
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DR1NEWC2 in {1}: DR1WRAP2 ELSE: DR1ADDEDIT2

DR1ADDEDIT2	
ASK	IF DR1NEWC2 in {2}
PLEASE UPDATE THE MAILING ADDRESS	

[SP ADDRESS: ({Address1} {Address2} {City} {State} {ZIP})]	
SPANISH	*N/A*
QUESTIONTYPE	Display Address
FILLS	DISPLAY FULL ADDRESS ({Address1} {Address2} {City} {State} {ZIP})
NOTES	DISPLAY THE ADDRESS COLUMNS LISTED ABOVE AND ALLOW THE INTERVIEWER TO MAKE CORRECTIONS AS NEEDED. ONCE THE INTERVIEWER IS DONE, THEY WILL PRESS 1 TO CONTINUE. THE FIELD FOR STATE MAY NOT BE UPDATED. FOR CITY: ONLY ALLOW CHARACTERS, NO NUMERALS ALLOWED. FOR ZIP CODE: REQUIRE 5 NUMERALS. IF DR1NEWC2 = 2 AND NONE OF THE ADDRESS FIELDS ARE MODIFIED, AUTO-BACKCODE THE RESPONSE TO DR1NEWC2 = 1
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	DR1WRAP2

DR1WRAP2	
ASK	IF DR1NEWC2 in {1} OR DR1ADDEDIT2 NE BLANK
Once we request the new card, it will take 5-7 business days for it to arrive. It will have these new funds added. (IF NEEDED, SAY: Any remaining funds on the old card will be transferred to the new card as well.) You must activate the card before it can be used. PRESS 1 TO CONTINUE	

SPANISH	Una vez que pidamos la nueva tarjeta, tomará entre 5 y 7 días hábiles en llegar. En esta tarjeta se agregarán estos nuevos fondos**.** (IF NEEDED, SAY: Los fondos restantes en la tarjeta anterior también se transferirán a la nueva tarjeta). Debe activar la tarjeta antes de poder usarla. PRESS 1 TO CONTINUE
QUESTION TYPE	Text
FILLS	
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	MECMPLANS

MECMPLANS	
ASK	IF MECMSCHED in (1)

Please tell me if <TEXT FILL 1> also <TEXT FILL 2> any of the following:

CHECK ALL THAT APPLY.

1. Monetary help for child or elder care.
2. If <TEXT FILL 1> <TEXT FILL 3> will miss school for the exam: a letter documenting participation in an important national health study.
3. If <TEXT FILL 1> <TEXT FILL 3> will miss work for the exam: a letter documenting participation in an important national health study.
4. NO ACCOMODATIONS NEEDED.

SPANISH	Dígame si <TEXT FILL 1> también necesita algo de lo siguiente: CHECK ALL THAT APPLY. 1. Ayuda monetaria para el cuidado de niños o ancianos. 2. Una carta que documente la participación en un importante estudio nacional de salud, si es que <TEXT FILL 1> <TEXT FILL 3> faltará a la escuela para el examen. 3. Una carta que documente la participación en un importante estudio nacional de salud, si es que <TEXT FILL 1> <TEXT FILL 3> faltará al trabajo para el examen. 4. NO ACCOMODATIONS NEEDED.
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL “you” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “{MECPRFNM}” TEXT FILL 2: FILL “need” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “needs” IF MECPROXY = 2 TEXT FILL 3: FILL ‘or [SP NAME]’ IF DR1PROXY=(1,2,3)
FILLS (SPA)	TEXT FILL 1: FILL “usted” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “{MECPRFNM}” TEXT FILL 2: FILL “BLANK” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “BLANK” IF MECPROXY = 2 TEXT FILL 3: FILL ‘o SP NAME' IF DR1PROXY=(1,2,3)
NOTES	ALLOW CHECK ALL THAT APPLY. IF MECMPLANS = 4, DO NOT ALLOW 1, 2 OR 3 TO BE SELECTED.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECMPLANS in (1): MECMCARE IF MECMPLANS in (2, 3, OR 4) AND LANGUAGE IS ENGLISH OR SPANISH: END OF SECTION ELSE: END OF SECTION

MECMCARE	
ASK	IF MECMPLANS in (1)
We can provide $10 an hour for (child/elder) care to assist <TEXT FILL 1> in being able to attend <TEXT FILL 2> exam appointment. We will provide this money after <TEXT FILL 3> exam appointment. At the end of the appointment, <TEXT FILL 1> should let the staff know how many hours were needed for care. They will add the funds to <TEXT FILL 2> gift card. PRESS 1 TO CONTINUE.	

SPANISH	Podemos ofrecer $10 dólares por hora para el cuidado de (niños/ancianos) para ayudar a que <TEXT FILL 1> pueda ir a <TEXT FILL 2>. Le daremos este dinero después que <TEXT FILL 3> su cita del examen. Al final de la cita, <TEXT FILL 1> debe informarle al personal cuántas horas se necesitaron para el cuidado de (niños/ancianos). El personal agregará los fondos a <TEXT FILL 4>. PRESS 1 TO CONTINUE.
QUESTION TYPE	Text
FILLS (ENG)	TEXT FILL 1: FILL “you” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “{MECPRFNM}” TEXT FILL 2: FILL ‘your’ IF DR1PROXY=4 ELSE FILL “[SP NAME]’s” TEXT FILL 3: FILL “you complete your” IF DR1PROXY=4 FILL “[SP NAME] completes their” IF DR1PROXY=(1,2,3)
FILLS (SPA)	TEXT FILL 1: FILL “usted” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “{MECPRFNM}” TEXT FILL 2: FILL ‘su cita del examen’ IF DR1PROXY=4 ELSE FILL “la cita del examen de [SP NAME]” TEXT FILL 3: FILL “usted complete” IF DR1PROXY=4 FILL “[SP NAME] complete” IF DR1PROXY=(1,2,3) TEXT FILL 4: FILL ‘su tarjeta de regalo’ IF DR1PROXY=4 ELSE FILL “la tarjeta de regalo de [SP NAME]”
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	MECCONTINFO

MECCONTINFO	
ASK	IF MECMSCHED in (1)

We would like to contact <TEXT FILL 2> to remind <TEXT FILL 3> about <TEXT FILL 1> upcoming exam appointment. May we contact <TEXT FILL 3> by phone, text message and/or email?

CHECK ALL THAT APPLY

1 . YES – PHONE
2. YES - TEXT
3. YES - EMAIL
4. DO NOT CONTACT BY PHONE, TEXT OR EMAIL

SPANISH	Nos gustaría comunicarnos con <TEXT FILL 2> para recordarle <TEXT FILL 1>. ¿Está bien si nos ponemos en contacto con <TEXT FILL 3> por teléfono, mensaje de texto o correo electrónico? CHECK ALL THAT APPLY 1 . YES – PHONE 2. YES - TEXT 3. YES - EMAIL 4. DO NOT CONTACT BY PHONE, TEXT OR EMAIL
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL “your” IF DR1PROXY=4 FILL “{SP NAME}’s” IF DR1PROXY=(1,2,3) TEXT FILL 2: FILL “you” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “{MECPRFNM}” TEXT FILL 3: FILL “you” IF DR1PROXY=4 OR MECPROXY = 1 ELSE, FILL ‘them’.
FILLS (SPA)	TEXT FILL 1: FILL “su próxima cita para el examen” IF DR1PROXY=4 FILL “la próxima cita para el examen de {SP NAME}” IF DR1PROXY=(1,2,3) TEXT FILL 2: FILL “usted” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “{MECPRFNM}” TEXT FILL 3: FILL “usted” IF DR1PROXY=4 OR MECPROXY = 1 ELSE, FILL ‘esta persona’.
NOTES	ALLOW CHECK ALL THAT APPLY IF MECCONTACT = 4, DO NOT ALLOW 1, 2 OR 3 TO BE SELECTED.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF (DR2PROXY = 1 AND MECPROXY = 1) OR (DS2PRFNM = MECPRFNM) OR DR1PROXY = 4: MECCONTINS ELSE IF MECCONTINFO in (1): MECPHONEAX/MDAMPHONEA ELSE IF MECCONTINFO in (2): MECTEXT ELSE IF MECCONTINFO in (3): MECEMAIL

	ELSE IF MECCONTINFO in (4): END SECTION ELSE: END SECTION

MECCONTINS	
ASK	IF DS2DSCHED = 1 AND ((DS2PROXY = 1 AND MECPROXY = 1) OR (DS2PRFNM = MECPRFNM) OR DR1PROXY = 4) AND MECCONTINF = 1, 2 OR 3
May we use the same contact information for the exam appointment reminders that we collected for the dietary interview appointment? <FILL DS2CONTACT OR DS2DPHONEA> <FILL DS2TEXT> <FILL DS2EMAIL> 1. YES 2. NO	

SPANISH	¿Podemos usar la misma información de contacto para los recordatorios de la cita del examen que obtuvimos para la cita de la entrevista sobre alimentación? <FILL DS2CONTACT OR DS2DPHONEA> <FILL DS2TEXT> <FILL DS2EMAIL> 1. YES 2. NO
QUESTION TYPE	Radio button
FILLS	DISPLAY PHONE, TEXT AND EMAIL COLLECTED FOR THE DIETARY DAY 2 APPOINTMENT
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECCONTINS = 2: MECPHNREM ELSE: END SECTION

MECPHNREM	
ASK	IF MECCONTINS = 2
What is the best phone number to call to remind <TEXT FILL 1> of this appointment? |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER	

SPANISH	¿Cuál es el mejor número de teléfono para llamar para recordarle a <TEXT FILL 1> sobre esta cita? |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER
QUESTION TYPE	Numeric
FILLS (ENG)	TEXT FILL 1: FILL “you” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “{MECPRFNM}”
FILLS (SPA)	TEXT FILL 1: FILL “usted” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “{MECPRFNM}”
NOTES	ONLY ALLOW 10 DIGIT PHONE NUMBER. DISPLAY PHONE NUMBER AS XXX-XXX-XXXX
HELP SCREEN	
HARD CHECK	ONLY ALLOW RESPONSE OF DON’T KNOW, REFUSED, "000" or 10 DIGIT PHONE NUMBER. IF PHONE NUMBER PROVIDED, DISPLAY HARD RANGE CHECK MESSAGE IF PHONE NUMBER NOT "000" OR IS 10 DIGITS OF ALL THE SAME NUMBER (I.E., 1111111111): ‘PLEASE ENTER A VALID PHONE NUMBER’.
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECCONTINFO in {2}: MECTEXT IF MECCONTINFO NE 2 AND MECCONTINFO in {3}: MECEMAIL ELSE: END SECTION

MECTEXT	
ASK	IF MECCONTINFO in (2)
Is <TEXT FILL 1> the best phone number to text <TEXT FILL 2>? Please note NHANES will not be responsible for any text-related phone charges. IF NOT BEST PHONE NUMBER TO TEXT, ENTER PHONE NUMBER TO TEXT |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER	

SPANISH	¿Es <TEXT FILL 1> el mejor número de teléfono para <TEXT FILL 2>? Tenga en cuenta que NHANES no se hará responsable de ningún gasto telefónico relacionado con los mensajes de texto. IF NOT BEST PHONE NUMBER TO TEXT, ENTER PHONE NUMBER TO TEXT |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER
QUESTION TYPE	Numeric
FILLS (ENG)	TEXT FILL 1: FILL PHONE NUMBER ON FILE IF MECCONTINFO = 1. ELSE FILL PHONE NUMBER FROM MECPHNREM . TEXT FILL 2: FILL “you” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “{MECPRFNM}”
FILLS (SPA)	TEXT FILL 1: FILL PHONE NUMBER ON FILE IF MECCONTINFO = 1. ELSE FILL PHONE NUMBER FROM MECPHNREM . TEXT FILL 2: FILL “enviarle mensajes de texto” IF DR1PROXY=4 OR MECPROXY = 1 ELSE FILL “enviarle mensajes de texto a {MECPRFNM}”
NOTES	ONLY ALLOW 10 DIGIT PHONE NUMBER. DISPLAY PHONE NUMBER AS XXX-XXX-XXXX
HELP SCREEN	
HARD CHECK	ONLY ALLOW RESPONSE OF DON’T KNOW, REFUSED, "000" or 10 DIGIT PHONE NUMBER. IF PHONE NUMBER PROVIDED, DISPLAY HARD RANGE CHECK MESSAGE IF PHONE NUMBER NOT "000" OR IS 10 DIGITS OF ALL THE SAME NUMBER (I.E., 1111111111): ‘PLEASE ENTER A VALID PHONE NUMBER’.
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECCONTINFO in (3): MECEMAIL ELSE: END SECTION

MECEMAIL	
ASK	IF MECCONTINFO in (3)
What email address would be best to use for reminders about <TEXT FILL 1> upcoming exam appointment? ENTER EMAIL ADDRESS. RE-ENTER EMAIL ADDRESS. READ EMAIL ADDRESS BACK TO SP/PROXY TO CONFIRM IT IS SPELLED ACCURATELY.	
SPANISH	¿Qué dirección de correo electrónico sería la mejor para enviar recordatorios sobre <TEXT FILL 1>? ENTER EMAIL ADDRESS. RE-ENTER EMAIL ADDRESS. READ EMAIL ADDRESS BACK TO SP/PROXY TO CONFIRM IT IS SPELLED ACCURATELY.
QUESTION TYPE	Text box
FILLS (ENG)	TEXT FILL 1: FILL “your” IF THE SP IS THE RESPONDENT FILL “{SP NAME}’s” IF THE RESPONDENT IS THE PROXY OF THE SP
FILLS (SPA)	TEXT FILL 1: FILL “su próxima cita para el examen” IF THE SP IS THE RESPONDENT FILL “la próxima cita para el examen de {SP NAME}” IF THE RESPONDENT IS THE PROXY OF THE SP
NOTES	MAKE SURE A VALID EMAIL ADDRESS STYLE IS ENTERED
HELP SCREEN	
HARD CHECK	IF THERE ARE SPACES IN THE EMAIL ADDRESS, IF EMAIL ADDRESS IS MISSING THE @ SYMBOL, OR IF TEXT IS MISSING TO THE LEFT OR RIGHT OF THE @ SYMBOL, DISPLAY: .”ENTER A VALID EMAIL ADDRESS” IF EMAIL ADDRESSES DO NOT MATCH, DISPLAY “EMAIL ADDRESSES DO NOT MATCH. PLEASE CONFIRM AND CORRECT”
SOFT CHECK	
VERSION NOTES	
NEXT	END SECTION

MECMCONTINF	
ASK	IF MECMSCHED in (1) AND SP IS 12–17 YRS OLD
If you would like, we can contact <TEXT FILL 1> to remind them about their upcoming exam appointment. May we contact <TEXT FILL 1> by text message and/or email? CHECK ALL THAT APPLY. 1. TEXT 2. EMAIL 3. CANNOT CONTACT BY TEXT OR EMAIL	
SPANISH	Si lo desea, podemos comunicarnos con <TEXT FILL 1> para recordarle sobre su próxima cita para el examen. ¿Está bien si nos ponemos en contacto con <TEXT FILL 1> por mensaje de texto o correo electrónico? CHECK ALL THAT APPLY. 1. TEXT 2. EMAIL 3. CANNOT CONTACT BY TEXT OR EMAIL
QUESTION TYPE	Radio button
FILLS	TEXT FILL 1: {SP NAME}
NOTES	ALLOW CHECK ALL THAT APPLY.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECMCONTINF in (1): MECMTEXT ELSE IF MECMCONTINF in (2): MECMEMAIL ELSE: END OF SECTION

MECMTEXT	
ASK	IF MECMCONTINF in (1)
What is the best phone number to text <TEXT FILL 1>? ENTER PHONE NUMBER TO TEXT |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER	
SPANISH	¿Cuál es el mejor número para enviarle mensajes de texto a <TEXT FILL 1>? ENTER PHONE NUMBER TO TEXT |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER
QUESTION TYPE	Numeric
FILLS	TEXT FILL 1: {SP NAME}
NOTES	ONLY ALLOW 10-DIGIT PHONE NUMBER. DISPLAY PHONE NUMBER AS XXX-XXX-XXXX
HELP SCREEN	
HARD CHECK	ONLY ALLOW RESPONSE OF DON'T KNOW, REFUSED, "000" or 10 DIGIT PHONE NUMBER. IF PHONE NUMBER PROVIDED, DISPLAY HARD RANGE CHECK MESSAGE IF PHONE NUMBER NOT "000" OR IS 10 DIGITS OF ALL THE SAME NUMBER (I.E., 1111111111): 'PLEASE ENTER A VALID PHONE NUMBER'.
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECMCONTINF in (2): MECMEMAIL ELSE: END OF SECTION

MECMEMAIL	
ASK	IF MECMCONTINF in (2)
What email address would be best to use for reminders about <TEXT FILL 1> next dietary interview appointment?	

ENTER EMAIL ADDRESS. RE-ENTER EMAIL ADDRESS. READ EMAIL ADDRESS BACK TO PROXY TO CONFIRM IT IS SPELLED ACCURATELY.	
SPANISH	¿Qué dirección de correo electrónico sería la mejor para enviar recordatorios sobre la próxima cita de <TEXT FILL 1> para la entrevista sobre alimentación? ENTER EMAIL ADDRESS. RE-ENTER EMAIL ADDRESS. READ EMAIL ADDRESS BACK TO PROXY TO CONFIRM IT IS SPELLED ACCURATELY.
QUESTION TYPE	Text box
FILLS	TEXT FILL 1: {SP NAME}'s
NOTES	MAKE SURE A VALID EMAIL ADDRESS STYLE IS ENTERED.
HELP SCREEN	
HARD CHECK	IF THERE ARE SPACES IN THE EMAIL ADDRESS, IF EMAIL ADDRESS IS MISSING THE @ SYMBOL, OR IF TEXT IS MISSING TO THE LEFT OR RIGHT OF THE @ SYMBOL, DISPLAY: ."ENTER A VALID EMAIL ADDRESS" IF EMAIL ADDRESSES DO NOT MATCH, DISPLAY "EMAIL ADDRESSES DO NOT MATCH. PLEASE CONFIRM AND CORRECT"
SOFT CHECK	
VERSION NOTES	
NEXT	END OF SECTION

DAY 2 DIETARY INCENTIVES AND SCHEDULING

DR2INCT	
ASK	ALL RESPONDENTS
<TEXT FILL 2> Thank you again for taking the time to participate in this important study about our nation's health. As a thank you for answering these questions, we will add $30 to <TEXT FILL 1> gift card. (IF NEEDED, SAY Do you accept this offer?) DID THE RESPONDENT ACCEPT THE INCENTIVE? 3 YES 4 NO	
SPANISH	<TEXT FILL 2> Gracias por volver a dedicar su tiempo a participar en este importante estudio sobre la salud de las personas en Estados Unidos. Como agradecimiento por responder estas preguntas, agregaremos $30 dólares a <TEXT FILL 1>. (IF NEEDED, SAY ¿Acepta esta oferta?) DID THE RESPONDENT ACCEPT THE INCENTIVE? 1 YES 2 NO
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1 FILL "your" IF DR2PROXY=4 ELSE, FILL "[SP's NAME]'s" TEXT FILL 2: IF DR2PROXY=(2,3) : FILL: "Thank you again for answering our questions today. Please put your parent or guardian back on the phone."
FILLS (SPA)	TEXT FILL 1 FILL "su tarjeta de regalo" IF DR2PROXY=4 ELSE, FILL "la tarjeta de regalo de [SP's NAME]" TEXT FILL 2: IF DR2PROXY=(2,3) : FILL: "Gracias nuevamente por responder nuestras preguntas de hoy. Vuelve a poner a uno de tus padres o tutor al teléfono."
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	

VERSION NOTES	
NEXT	IF DR2INCT in {1}: DS2ADDDF ELSE: DR2INCRF

DR2INCRF	
ASK	IF DR2INCT NE 1
Thank you again for your time. I will not place any funds on the card for today's interview. As a reminder, please keep the card for the duration of the study so we can add funds for completing additional study activities. PRESS 1 TO CONTINUE.	
SPANISH	Nuevamente, gracias por su tiempo. No agregaré ningún dinero en la tarjeta para la entrevista de hoy. Le recordamos que debe conservar la tarjeta durante todo el estudio para que podamos agregar fondos por completar actividades adicionales del estudio. PRESS 1 TO CONTINUE.
QUESTION TYPE	Text
FILLS	
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MEC INTERVIEW NOT SCHEDULED: MECSCHED2 ELSE: END OF SECTION

DR2ADDDF	
ASK	IF DR2INCT in {1}
Funds for completing today's interview will be added to the gift card and available for use within 2 business days. Do you still have the card? 4. YES 5. NO 6. NEVER RECEIVED CARD (I.E., PREVIOUSLY REFUSED CARD/INCENTIVES)	

SPANISH	Los fondos por completar la entrevista de hoy se agregarán a la tarjeta de regalo y estarán disponibles para su uso dentro de 2 días hábiles. ¿Todavía tiene la tarjeta? 2 YES 3 NO 4 NEVER RECEIVED CARD (I.E., PREVIOUSLY REFUSED CARD/INCENTIVES)
QUESTION TYPE	Radio button
FILLS	
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DR2ADDDF in {2} or {3}: DR2NEWC IF DR2ADDDF in {1} AND MEC INTERVIEW NOT SCHEDULED: MECSCHED2

DR2NEWC	
ASK	IF DR2ADDDF in {2} or {3}
OK, we can assign a new card to <TEXT FILL 1>. The new card will be mailed to [FILL ADDRESS]. Is this the correct address? 3. YES 4. NO	

SPANISH	Está bien. Podemos ofrecerle una nueva tarjeta a <TEXT FILL 1>. La nueva tarjeta se enviará por correo postal a [FILL ADDRESS]. ¿Es esta la dirección correcta? 1. YES 2. NO
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1 FILL “you” IF DR2PROXY=4 ELSE, FILL “[SP NAME]” DISPLAY FULL ADDRESS ({Address1} {Address2} {City} {State} {ZIP})
FILLS (SPA)	TEXT FILL 1 FILL “usted” IF DR2PROXY=4 ELSE, FILL “[SP NAME]” DISPLAY FULL ADDRESS ({Address1} {Address2} {City} {State} {ZIP})
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DR2NEWC in {1}: DR2WRAP ELSE: DR2ADDEDIT

DR2ADDEDIT	
ASK	IF DR2NEWC in {2}
PLEASE UPDATE THE MAILING ADDRESS [SP ADDRESS: ({Address1} {Address2} {City} {State} {ZIP})]	
SPANISH	*N/A*
QUESTION TYPE	Display Address
FILLS	DISPLAY FULL ADDRESS ({Address1} {Address2} {City} {State} {ZIP})
NOTES	DISPLAY THE ADDRESS COLUMNS LISTED ABOVE AND ALLOW THE INTERVIEWER TO MAKE CORRECTIONS AS NEEDED. ONCE THE INTERVIEWER IS DONE, THEY WILL PRESS THE NEXT KEY TO CONTINUE. THE FIELD FOR STATE MAY NOT BE UPDATED. FOR CITY: ONLY ALLOW CHARACTERS, NO NUMERALS ALLOWED. FOR ZIP CODE: REQUIRE 5 NUMERALS. IF DR2NEWC = 2 AND NONE OF THE ADDRESS FIELDS ARE MODIFIED, AUTO-BACKCODE THE RESPONSE TO DR2NEWC = 1
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	DR2WRAP

DR2WRAP	
ASK	IF DR2NEWC in {1} OR DR2ADDEDIT NE BLANK
Once we request the new card, it will take 5-7 business days for it to arrive. It will have these new funds added. (IF NEEDED, SAY: Any remaining funds on the old card will be transferred to the new card as well.) You must activate the card before it can be used. PRESS 1 TO CONTINUE	
SPANISH	Una vez que pidamos la nueva tarjeta, tomará entre 5 y 7 días hábiles en llegar. En esta tarjeta se agregarán estos nuevos fondos. (IF NEEDED, SAY: Los fondos restantes en la tarjeta anterior también se transferirán a la nueva tarjeta). Debe activar la tarjeta antes de poder usarla. PRESS 1 TO CONTINUE
QUESTION TYPE	Text
FILLS	
NOTES	
HELP DESK	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MEC INTERVIEW NOT SCHEDULED: MECSCHED2 ELSE: END OF SECTION

MECSCHED2	
ASK	DR2MSCHED= 2: ALL RESPONDENTS WHO HAVE NOT SCHEDULED A MEC EXAM APPOINTMENT

YOU SHOULD ALREADY BE SPEAKING TO THE PARENT/GUARDIAN IF SP <18. IF NOT, ASK FOR THE PARENT/GUARDIAN TO BE PUT BACK ON THE PHONE.

When <TEXT FILL 1> selected to participate in the NHANES interview, <TEXT FILL 1> also selected to participate in a free health exam. It looks like we do not have <TEXT FILL 2> scheduled for the health exam yet. May we do that now?

(The NHANES Health Exam is conducted at our local Mobile Examination Center right here in your community. The Exam Center is staffed with highly trained health care professionals, including a nurse, phlebotomist, and dental professional.

Although <TEXT FILL 2> may have some of these exams done during a routine check-up, many are not done during check-ups. These exams could provide important health information that <TEXT FILL 2> could not easily access otherwise. Depending on age, <TEXT FILL 3> appointment may include dental, hearing, and vision exams, as well as a breathing test. We also test to see if participants have been exposed to harmful chemicals.

This free exam takes about 2 hours and we will give you some of the results before you leave the Mobile Exam Center. We will send you all other results and additional information about the tests in about 3 to 4 months. We will give <TEXT FILL 2> an additional <TEXT FILL 4> for completing the exam. This will be added to the gift card you already received.)

<TEXT FILL 5>
ANSWER ANY QUESTIONS THE SP/PARENT/PROXY MAY HAVE.

1. CONTINUE WITH SCHEDULING
2. SP REFUSES EXAM

SPANISH	YOU SHOULD ALREADY BE SPEAKING TO THE PARENT/GUARDIAN IF SP <18. IF NOT, ASK FOR THE PARENT/GUARDIAN TO BE PUT BACK ON THE PHONE. Cuando <TEXT FILL 1> fue seleccionado(a) para participar en la entrevista de NHANES, ~~<TEXT FILL 1>~~ también fue seleccionado(a) para participar en un examen gratuito de salud. Parece ser que todavía no hemos programado el examen de salud para <TEXT FILL 2> . ¿Podemos hacer eso ahora? (El examen de salud de NHANES se realiza en nuestro centro móvil de examen aquí en su comunidad. El centro móvil de examen cuenta con profesionales de atención médica altamente capacitados, entre ellos un enfermero, un flebotomista y un profesional dental. Si bien es posible que <TEXT FILL 2> se haya realizado algunos de estos exámenes durante un chequeo de rutina, muchos no se realizan durante los chequeos. Estos exámenes podrían dar información de salud importante a los que <TEXT FILL 2> no podría fácilmente de otro modo. Dependiendo de la edad, <TEXT FILL 3> podría incluir exámenes dentales, de audición y de la vista, así como una prueba de respiración. También hacemos pruebas para ver si los participantes han estado expuestos a sustancias químicas tóxicas. Este examen gratuito dura alrededor de 2 horas y le daremos algunos de los resultados antes de que se vaya del centro móvil de examen. Le enviaremos todos los demás resultados e información adicional sobre las pruebas en unos 3 o 4 meses. Le daremos a <TEXT FILL 2> una cantidad adicional de <TEXT FILL 4> dólares por completar el examen. Esta cantidad se añadirá a la tarjeta de regalo que ya ha recibido). <TEXT FILL 5> ANSWER ANY QUESTIONS THE SP/PARENT/PROXY MAY HAVE. 1. CONTINUE WITH SCHEDULING 2. SP REFUSES EXAM
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL: ‘you were’ IF DR2PROXY=4 ELSE FILL: ‘{SP NAME} was’ TEXT FILL 2: FILL: ‘you’ IF DR2PROXY=4 ELSE FILL: ‘{SP NAME}’ TEXT FILL 3: FILL ‘your’ IF DR2PROXY=4 ELSE FILL: ‘{SP NAME}’s’ TEXT FILL 4: FILL: ‘${INCENTIVE AMOUNT BASED ON SP AGE}’ TEXT FILL 5: FILL: “(IF PROXY/PARENT/GUARDIAN OF SP IS RELUCTANT AND NOT AN SP: Though you were not selected for NHANES, you will receive $20 for bringing <TEXT FILL 6> to their appointment.)” IF DR2PROXY=(1,2,3) AND PROXYISSP = 2. TEXT FILL 6: FILL: ‘{SP NAME}’ IF DR2PROXY=(1,2,3)
FILLS (SPA)	TEXT FILL 1: FILL: ‘usted' IF DR2PROXY=4 ELSE FILL: ‘{SP NAME}' TEXT FILL 2: FILL: ‘usted’ IF DR2PROXY=4 ELSE FILL: ‘{SP NAME}’

	TEXT FILL 3: FILL 'su cita' IF DR2PROXY=4 ELSE FILL: 'la cita de {SP NAME}' TEXT FILL 4: FILL: '${INCENTIVE AMOUNT BASED ON SP AGE}' TEXT FILL 5: FILL: "(IF PROXY/PARENT/GUARDIAN OF SP IS RELUCTANT AND NOT AN SP: Aunque usted no fue seleccionado(a) para NHANES, recibirá $20 dólares por traer a <TEXT FILL 6> a su cita.)" IF DR2PROXY=(1,2,3) AND PROXYISSP = 2. TEXT FILL 6: FILL: '{SP NAME}' IF DR2PROXY=(1,2,3)
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECSCHED2 in (1): MECCONFIRMSP2 IF MECSCHED2 in (2): MECMREF2

MECCONFIRMSP2	
ASK	MECSCHED2=1

Participant #: <TEXT FILL 1> SP name: <TEXT FILL 2>
Gender: <TEXT FILL 3> Language: <TEXT FILL 4>
DOB: <TEXT FILL 5>
Age: <TEXT FILL 7>

Before we schedule <TEXT FILL 8> appointment, let's confirm <TEXT FILL 8> name.

What is <TEXT FILL 8> first, middle and last name?

EDIT THE SP'S NAME AND CONFIRM SPELLING.

SPANISH	Participant #: <TEXT FILL 1> SP name: <TEXT FILL 2> Gender: <TEXT FILL 3> Language: <TEXT FILL 4> DOB: <TEXT FILL 5> Age: <TEXT FILL 7> Antes de programar <TEXT FILL 8>, vamos a confirmar <TEXT FILL 9>. ¿Cuál es <TEXT FILL 10>? EDIT THE SP'S NAME AND CONFIRM SPELLING.
QUESTION TYPE	Display fills with ability to edit SP NAME
FILLS (ENG)	TEXT FILL 1: FILL PARTICIPANT ID NUMBER TEXT FILL 2: FILL SP NAME TEXT FILL 3: FILL SP GENDER TEXT FILL 4: FILL SP LANGUAGE TEXT FILL 5: FILL SP DOB TEXT FILL 7: FILL SP AGE TEXT FILL 8: FILL "your" IF DR2PROXY=4 ELSE FILL "[SP NAME]'s" IF DR2PROXY=(1,2,3)
FILLS (SPA)	TEXT FILL 1: FILL PARTICIPANT ID NUMBER TEXT FILL 2: FILL SP NAME TEXT FILL 3: FILL SP GENDER TEXT FILL 4: FILL SP LANGUAGE TEXT FILL 5: FILL SP DOB TEXT FILL 7: FILL SP AGE TEXT FILL 8: FILL "su cita" IF DR2PROXY=4 ELSE FILL "la cita de [SP NAME]" IF DR2PROXY=(1,2,3) TEXT FILL 9: FILL "su nombre" IF DR1PROXY=4 ELSE FILL "el nombre de [SP NAME]" IF DR1PROXY=(1,2,3) TEXT FILL 10: FILL "su primer nombre, su segundo nombre y su apellido" IF DR1PROXY=4 ELSE FILL "el primer nombre, el segundo nombre y el apellido de [SP NAME]" IF

	DR1PROXY=(1,2,3)
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	MECPROXY2/MECPRFNM2

MECPROXY2/MECPRFNM2	
ASK	IF DR2PROXY=(1,2,3)
Will you be the person that takes [SP NAME] to their exam appointment? 1. YES 2. NO SELECT SP PROXY'S NAME GOING TO THE MEC. (What is this person's first name) [MECPRFNM2] <FILL HOUSEHOLD ROSTER>	
SPANISH	¿Es usted la persona que llevará a [SP NAME] a su cita para el examen? 1. YES 2. NO SELECT SP PROXY'S NAME GOING TO THE MEC. (¿Cuál es el nombre de esta persona?) [MECPRFNM2] <FILL HOUSEHOLD ROSTER>
QUESTION TYPE	MECPROXY2: RADIO BUTTON MECPRFNM2: DROP DOWN
FILLS	
NOTES	DISPLAY HH ROSTER [MECPRFNM2]. IF SPQSELECTR = SOMEONE OUTSIDE THE HH, INCLUDE SPQPRFNM IN THE ROSTER. IF MDAMPROXY = 2, INCLUDE MDAMPRFNM IN THE ROSTER. INCLUDE DAY 1 RESPONDENT SELECTED IN DR1SELECTR.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	

VERSION NOTES	
NEXT	IF MECPROXY2 = 1 AND SP LANGUAGE IS SPANISH: MECINT2 IF MECPROXY2 = 2: MECPRRELATE2 ELSE: MECMSCHED2

MECPRRELATE2	
ASK	IF MECPROXY2 in {2}
What is this person's relationship to <TEXT FILL 1>? 1. MOTHER (BIOLOGICAL/ADOPTIVE/STEP/FOSTER) 2. FATHER (BIOLOGICAL/ADOPTIVE/STEP/FOSTER) 3. GRANDPARENT (GRANDMOTHER/GRANDFATHER) 4. AUNT/UNCLE 2. DAUGHTER OR SON (BIOLOGICAL/ADOPTIVE/IN-LAW/STEP/FOSTER) 5. BROTHER/SISTER 6. SPOUSE (WIFE/HUSBAND) OR PARTNER 7. OTHER RELATIVE 8. NON-RELATIVE 77. REFUSED 99. DON'T KNOW	
SPANISH	¿Cuál es la relación de esta persona con <TEXT FILL 1>? 1. MADRE (BIOLÓGICA/ADOPTIVA/MADRASTRA/DE CRIANZA "FOSTER") 2. PADRE (BIOLÓGICO/ADOPTIVO/PADRASTRO/DE CRIANZA "FOSTER") 3. ABUELA(O) 4. TÍA(O) 2. HIJA(O)(BIOLÓGICO(A)/ADOPTIVO(A)/NUERA/YERNO/HIJASTRA(O)/DE CRIANZA "FOSTER") 5. HERMANO/HERMANA 6. CÓNYUGE (ESPOSO(A)) O PAREJA 7. OTRO PARIENTE 8. NO ES PARIENTE 77. REFUSED 99. DON'T KNOW
QUESTION TYPE	Radio button
FILLS	TEXT FILL 1: FILL "[SP NAME]"
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	

NEXT	IF SP'S LANGUAGE IS SPANISH: MECINT2 ELSE: MECMSCHED2

MECINT2	
ASK	IF SP'S LANGUAGE IS SPANISH

It may be helpful for someone to interpret for <TEXT FILL 3> during <TEXT FILL 1> exam appointment. A family member or friend can attend the appointment to interpret for <TEXT FILL 2>. If not, we can arrange to have an interpreter. Which works for you?

1. FAMILY/FRIEND WILL INTERPRET
2. NHANES WILL PROVIDE INTERPRETER

SPANISH	Podría ser útil que alguien interprete para <TEXT FILL 3> durante <TEXT FILL 1> para el examen. Un familiar o un(a) amigo(a) puede ir a la cita para interpretar para <TEXT FILL 2>. Si no es así, podemos encargarnos de conseguirle un intérprete. ¿Qué prefiere? 1. FAMILY/FRIEND WILL INTERPRET 2. NHANES WILL PROVIDE INTERPRETER
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL "your" IF DR2PROXY=4 FILL "[SP NAME]'s" IF DR2PROXY=(1,2,3) TEXT FILL 2: FILL "you" IF DR2PROXY=4 FILL "[SP NAME]" IF DR2PROXY = (1,2,3) TEXT FILL 3: FILL "you" IF DR2PROXY=4 OR MECPROXY2 = 1 ELSE FILL "{MECPRFNM2}"
FILLS (SPA)	TEXT FILL 1: FILL "su cita" IF DR2PROXY=4 FILL "la cita de [SP NAME]" IF DR2PROXY=(1,2,3) TEXT FILL 2: FILL "usted" IF DR2PROXY=4 FILL "[SP NAME]" IF DR2PROXY = (1,2,3) TEXT FILL 3: FILL "usted" IF DR2PROXY=4 OR MECPROXY2 = 1 ELSE FILL "{MECPRFNM2}"
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	MECMSCHED2

MECMSCHED2	
ASK	All respondents
Participant #: <TEXT FILL 1> Gender: <TEXT FILL 3> DOB: <TEXT FILL 5> Age: <TEXT FILL 7>	SP name: <TEXT FILL 2> Language: <TEXT FILL 4>

The exam takes about 2 hours. Let's find a day and time that works for <TEXT FILL 9>.

LAUNCH SCHEDULER APPLICATION. ACCESS THE CALENDAR AND OFFER LOCATIONS/DATES/TIMES UNTIL YOU FIND ONE THAT WORKS FOR THE SP/PROXY.

[WHEN IN THE SCHEDULER, SEE IF ANY OTHER SP IN THIS HOUSEHOLD HAS AN APPOINTMENT MADE FOR THE SAME DAY AND TIME (WITHIN A 2 HOUR WINDOW). IF YES, THEN ASK IF THEY WILL BE TRAVELING TOGETHER OR SEPARATELY. THIS IS NEEDED TO KNOW IF THEY SHOULD EACH GET A TRAVEL INCENTIVE IF TRAVELING SEPARATELY, OR JUST ONE TRAVEL INCENTIVE IF TRAVELING TOGETHER.]

1. APPOINTMENT SCHEDULED
2. DID NOT SCHEDULE APPOINTMENT

SPANISH	Participant #: <TEXT FILL 1> SP name: <TEXT FILL 2> Gender: <TEXT FILL 3> Language: <TEXT FILL 4> DOB: <TEXT FILL 5> Age: <TEXT FILL 7> El examen toma como 2 horas. Busquemos un día y hora convenientes para <TEXT FILL 9>. LAUNCH SCHEDULER APPLICATION. ACCESS THE CALENDAR AND OFFER LOCATIONS/DATES/TIMES UNTIL YOU FIND ONE THAT WORKS FOR THE SP/PROXY. [WHEN IN THE SCHEDULER, SEE IF ANY OTHER SP IN THIS HOUSEHOLD HAS AN APPOINTMENT MADE FOR THE SAME DAY AND TIME (WITHIN A 2 HOUR WINDOW). IF YES, THEN ASK IF THEY WILL BE TRAVELING TOGETHER OR SEPARATELY. THIS IS NEEDED TO KNOW IF THEY SHOULD EACH GET A TRAVEL INCENTIVE IF TRAVELING SEPARATELY, OR JUST ONE TRAVEL INCENTIVE IF TRAVELING TOGETHER.] 1. APPOINTMENT SCHEDULED 2. DID NOT SCHEDULE APPOINTMENT
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL PARTICIPANT ID NUMBER TEXT FILL 2: FILL SP NAME TEXT FILL 3: FILL SP GENDER TEXT FILL 4: FILL SP LANGUAGE TEXT FILL 5: FILL SP DOB TEXT FILL 7: FILL SP AGE TEXT FILL 9: FILL “you” IF DR2PROXY = 4 FILL “you and {SP NAME}” IF MECPROXY2 = 1 FILL “[MECPRFNM2]” IF MECPROXY2 = 2
FILLS (SPA)	TEXT FILL 1: FILL PARTICIPANT ID NUMBER TEXT FILL 2: FILL SP NAME TEXT FILL 3: FILL SP GENDER TEXT FILL 4: FILL SP LANGUAGE TEXT FILL 5: FILL SP DOB

	TEXT FILL 7: FILL SP AGE TEXT FILL 9: FILL "usted" IF DR2PROXY = 4 FILL "usted y {SP NAME}" IF MECPROXY2 = 1 FILL "[MECPRFNM2]" IF MECPROXY2 = 2
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECMSCHED2 in (1): MECMAPPT2 IF MECMSCHED2 in (2): MECMREF2

MECMREF2	
ASK	IF MECMSCHED2 in (2) OR MECSCHED2 in (2)

IF SP/PROXY SEEMS UNCERTAIN, BE PREPARED TO HIGHLIGHT THE IMPORTANCE OF THE EXAM. YOU CAN SAY SOMETHING LIKE:

- Participation in the exam will give you more information on <TEXT FILL 1> health.
- It will also help doctors, researchers and policy makers improve people's health in the United States. For example, NHANES data found that high levels of lead were associated with learning and behavioral problems in children, and that too little folate in a pregnant woman's diet could cause birth defects in their baby. NHANES data also led to the understanding that high cholesterol can lead to heart disease.
- Participating in the exam is really important and <TEXT FILL 3> will receive <TEXT FILL 2> as a thank you for completing the exams and answering questions. Is there any specific reason why you may not want <TEXT FILL 4> to participate?

ATTEMPT TO CONVERT THE REFUSAL.
WHAT WAS THE OUTCOME OF THE REFUSAL CONVERSION?

1. WANTS TO SCHEDULE
2. UNABLE TO SCHEDULE AT THIS TIME/WILL SCHEDULE LATER
3. REFUSAL

SPANISH	IF SP/PROXY SEEMS UNCERTAIN, BE PREPARED TO HIGHLIGHT THE IMPORTANCE OF THE EXAM. YOU CAN SAY SOMETHING LIKE: • La participación en el examen le dará más información sobre <TEXT FILL 1>. • También ayudará a doctores, investigadores científicos y legisladores a mejorar la salud de las personas en los Estados Unidos. Por ejemplo, los datos de NHANES revelaron que los niveles elevados de plomo estaban asociados a problemas de aprendizaje y comportamiento en los niños, o que la falta de folato en la dieta de una mujer embarazada podía provocar defectos congénitos en su bebé. También permitió entender que el colesterol elevado podía provocar enfermedades del corazón. • Participar en el examen es muy importante y <TEXT FILL 3> recibirá <TEXT FILL 2> dólares como agradecimiento por completar los exámenes y responder las preguntas. ¿Hay alguna razón específica por la que es probable que usted no quiera que <TEXT FILL 4> participe? ATTEMPT TO CONVERT THE REFUSAL. WHAT WAS THE OUTCOME OF THE REFUSAL CONVERSION? 1. WANTS TO SCHEDULE 2. UNABLE TO SCHEDULE AT THIS TIME/WILL SCHEDULE LATER 3. REFUSAL
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL 'your' IF DR2PROXY=4 ELSE FILL: "[SP NAME]'s" TEXT FILL 2: FILL ${INCENTIVE AMOUNT BASED ON SP AGE} TEXT FILL 3: FILL: 'you' IF DR2PROXY=4 ELSE FILL: '{SP NAME}' TEXT FILL 4: FILL: 'IF '{SP NAME} IF DR2PROXY=(1,2,3) ELSE: NO FILL
FILLS (SPA)	TEXT FILL 1: FILL 'su salud' IF DR2PROXY=4 ELSE FILL: "la salud de [SP NAME]" TEXT FILL 2: FILL ${INCENTIVE AMOUNT BASED ON SP AGE} TEXT FILL 3: FILL: 'usted' IF DR2PROXY=4 ELSE FILL: '{SP NAME}' TEXT FILL 4: FILL: 'IF '{SP NAME}IF DR2PROXY=(1,2,3) ELSE: NO FILL
NOTES	Allow the ability to go back to MECMSCHED2.
HELP SCREEN	
HARD CHECK	

SOFT CHECK	
VERSION NOTES	
NEXT	IF MECMREF2 in {1}: MECMSCHED2 IF MECMREF2 in {2}: END OF SECTION ELSE: MECMREFREAS2

MECMREFREAS2 / MECMREFREAS2O	
ASK	IF MECMREF2 in (3)

DESCRIBE WHAT HAPPENED DURING REFUSAL. . CHECK ALL THAT APPLY.

22. NO REASON GIVEN
23. NO INTEREST
24. TOO BUSY / NO TIME
25. EXAM TAKES TOO MUCH TIME / EXAMTOO LONG
26. EXAM PARTICIPATION IS TOO BURDENSOME
27. INCENTIVE ISN'T ENOUGH TO PARTICIPATE / KEEP PARTICIPATING
28. DOES NOT BELIEVE IN STUDIES / WASTE OF TIME OR MONEY
29. GOVERNMENT CONCERNS / MISTRUST OF GOVERNMENT
30. CDC CONCERNS / MISTRUST OF CDC
31. PRIVACY / CONFIDENTIALITY CONCERNS
32. QUESTIONS / SUSPICIONS ABOUT LEGITIMACY
33. CONCERN WITH EXAM / DOCTOR ISSUES
34. MEC IS TOO FAR AWAY
35. TRANSPORTATION PROBLEMS
36. TOO YOUNG TO PARTICIPATE
37. TOO OLD / TOO SICK / TOO FRAIL TO PARTICIPATE
38. EXPOSURE TO EMERGING DISEASES / CONCERNS WITH GETTING SICK
39. FEAR OF NEEDLES/GIVING BLOOD
40. RELIGIOUS OR CULTURAL CONCERN
41. ALREADY PARTICIPATED ENOUGH
42. OTHER SPECIFY

SPANISH	*N/A*
QUESTION TYPE	Check all that apply
FILLS	
NOTES	IF OTHER SPECIFY SELECTED, DISPLAY MECMREFRESO TEXT BOX WITH 'ENTER OTHER REASON FOR REFUSAL. ALLOW 100 CHARACTERS.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MORE THAN ONE REASON GIVEN IN MECMREFREAS2: MECMREFREASM2

MECMREFREASM2	
ASK	IF MECMREFREAS2 = MORE THAN ONE REASON
SELECT THE **MAIN** REASON FOR REFUSAL	
SPANISH	*N/A*
QUESTION TYPE	Radio button
FILLS	
NOTES	ONLY DISPLAY IF MORE THAN ONE REASON GIVEN IN MECMREFREAS2 LIST POPULATES THE REASONS SELECTED FROM MECMREFREAS2 IF OTHER SPECIFY SELECTED PREVIOUSLY, INCLUDE IN RESPONSE LIST, BUT DO NOT INCLUDE TEXT BOX.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	END OF SECTION

MECMAPPT2	
ASK	IF MECMSCHED2 in (1)

<TEXT FILL 1>appointment is scheduled for <TEXT FILL 2> at <TEXT FILL 3>.

The exam appointment is located at <TEXT FILL 4>.

FASTING REQUIREMENT: <TEXT FILL 5>

<TEXT FILL 6>
We will mail <TEXT FILL 9>with directions to the exam location. We will also contact <TEXT FILL 10> to remind <TEXT FILL 11> of the appointment and these details closer to the date.

PRESS 1 TO CONTINUE.

SPANISH	<TEXT FILL 1> está programada para el <TEXT FILL 2> a la(s) <TEXT FILL 3>. La cita para el examen se realizará en <TEXT FILL 4>. FASTING REQUIREMENT: <TEXT FILL 5> <TEXT FILL 6> Enviaremos por correo postal <TEXT FILL 9> con indicaciones para llegar al lugar del examen. También nos comunicaremos con <TEXT FILL 10> para recordarle a <TEXT FILL 11> sobre la cita y estos detalles más cerca de la fecha. PRESS 1 TO CONTINUE.
QUESTION TYPE	Instructions
FILLS (ENG)	TEXT FILL 1: FILL "Your" IF DR2PROXY=4 ELSE FILL "[SP NAME]'s" TEXT FILL 2: FILL APPOINTMENT DATE FROM WEB SCHEDULER TEXT FILL 3: FILL APPOINTMENT TIME FROM WEB SCHEDULER. TEXT FILL 4: MEC EXAM LOCATION TEXT FILL 5: IF 11AM OR EARLIER APPT AND SP IS 12 OR OLDER, FILL 'FASTING' TEXT FILL 6: IF SP IS 12+ YEARS AND HAS AN APPOINTMENT AT 11:00AM OR EARLIER. FILL " For the blood draw, <TEXT FILL 7> will need to fast for at least 8 hours prior to the appointment. <TEXT FILL 8> 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 8> 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." ELSE, FILL IS EMPTY TEXT FILL 7: FILL "you" IF DR2PROXY=4 FILL "[SP NAME]" IF DR2PROXY=(1,2,3) TEXT FILL 8: FILL "You" IF DR2PROXY=4 FILL "[SP NAME]" IF DR2PROXY=(1,2,3) TEXT FILL 9: FILL "you a reminder letter" IF DR2PROXY=4 OR MECPROXY2=1 ELSE FILL "a reminder letter to [SP NAME]'s address on file." TEXT FILL 10: FILL "you" IF DR2PROXY=4 OR MECPROXY2=1 ELSE, FILL "{MECPRFNMN2}" TEXT FILL 11: FILL "you" IF DR2PROXY=4 OR MECPROXY2=1 FILL "them" IF MECPROXY2=2
FILLS (SPA)	TEXT FILL 1: FILL "Su cita" IF DR2PROXY=4 ELSE FILL "La cita de [SP NAME]" TEXT FILL 2: FILL APPOINTMENT DATE FROM WEB SCHEDULER TEXT FILL 3: FILL APPOINTMENT TIME FROM WEB SCHEDULER.

	TEXT FILL 4: MEC EXAM LOCATION TEXT FILL 5: IF 11AM OR EARLIER APPT AND SP IS 12 OR OLDER, FILL 'FASTING' TEXT FILL 6: IF SP IS 12+ YEARS AND HAS AN APPOINTMENT AT 11:00AM OR EARLIER. FILL "Para sacar una muestra de sangre, <TEXT FILL 7> deberá ayunar al menos 8 horas antes de la cita. <TEXT FILL 8> deberá beber agua, pero le pedimos que no consuma ningún otro alimento o bebida, incluidos dulces, chicles, refrescos, café, alcohol ni té. No tome remedios para la tos o el resfriado, antiácido sin receta, laxantes, antidiarreicos ni suplementos alimenticios como vitaminas o minerales sin receta antes de sacar la muestra de sangre. <TEXT FILL 8> debe continuar tomando los medicamentos que le hayan recetado, a menos que deban tomarse con comida, en cuyo caso puede traerlos para tomarlos después de sacar la muestra de sangre." ELSE, FILL IS EMPTY TEXT FILL 7: FILL "usted" IF DR2PROXY=4 FILL "[SP NAME]" IF DR2PROXY=(1,2,3) TEXT FILL 8: FILL "Usted" IF DR2PROXY=4 FILL "[SP NAME]" IF DR2PROXY=(1,2,3) TEXT FILL 9: FILL "una carta recordatoria a su dirección" IF DR2PROXY=4 OR MECPROXY2=1 ELSE FILL "una carta recordatoria a la dirección registrada de [SP NAME] que tenemos en nuestros registros" TEXT FILL 10: FILL "usted" IF DR2PROXY=4 OR MECPROXY2=1 ELSE, FILL "{MECPRFNMN2}" TEXT FILL 11: FILL "usted" IF DR2PROXY=4 OR MECPROXY2=1 FILL "ellos" IF MECPROXY2=2
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	MECACCOM2

MECACCOM2 / MECACCOM2O	
ASK	IF MECMSCHED2 in (1)
Participant #: <TEXT FILL 1> SP name: <TEXT FILL 2> Gender: <TEXT FILL 3> Language: <TEXT FILL 4> DOB: <TEXT FILL 5> Fasting req: <TEXT FILL 6> Age: <TEXT FILL 7> Will <TEXT FILL 0> need any assistance or is there any situation that would be helpful for our exam staff to	

know in advance?

CHECK ALL THAT APPLY:

17. NO BLOOD
18. CONVERT BLOOD
19. POOR VISION OR BLIND
20. HEARING IMPAIRED OR DEAF
21. COGNITIVE IMPAIRMENT
22. USES CRUTCHES, WALKER, OR CANE
23. USES WHEELCHAIR
24. NEEDS WHEELCHAIR
25. OBESE
26. OTHER PHYSICAL IMPAIRMENT
27. SUBSTANCE ABUSE
28. LIFT NEEDED
29. REQUIRES ADAPTIVE DEVICES (SPECIFY)
30. OTHER PROXY INFORMATION (SPECIFY)
31. OTHER (SPECIFY)
32. NONE

SPANISH	Participant #: <TEXT FILL 1> SP name: <TEXT FILL 2> Gender: <TEXT FILL 3> Language: <TEXT FILL 4> DOB: <TEXT FILL 5> Fasting req: <TEXT FILL 6> Age: <TEXT FILL 7> ¿Necesitará <TEXT FILL 0> algún tipo de ayuda, o existe alguna situación que sería útil que nuestro personal del examen sepa con anticipación? CHECK ALL THAT APPLY: 3. NO BLOOD 4. CONVERT BLOOD 5. POOR VISION OR BLIND 6. HEARING IMPAIRED OR DEAF 7. COGNITIVE IMPAIRMENT 8. USES CRUTCHES, WALKER, OR CANE 9. USES WHEELCHAIR 10. NEEDS WHEELCHAIR 11. OBESE 12. OTHER PHYSICAL IMPAIRMENT 13. SUBSTANCE ABUSE 14. LIFT NEEDED 15. REQUIRES ADAPTIVE DEVICES (SPECIFY) 16. OTHER PROXY INFORMATION (SPECIFY) 17. OTHER (SPECIFY) 18. NONE
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 0: FILL “you” IF DR2PROXY=4 ELSE FILL: “[SP NAME]” TEXT FILL 1: FILL PARTICIPANT ID NUMBER TEXT FILL 2: FILL SP NAME TEXT FILL 3: FILL SP GENDER TEXT FILL 4: FILL SP LANGUAGE TEXT FILL 5: FILL SP DOB TEXT FILL 6: IF 11 AM OR EARLIER APPT AND SP IS 12 OR OLDER, FILL: ‘FASTING’ ELSE, FILL: ‘NONFASTING’ TEXT FILL 7: FILL SP AGE
FILLS (SPA)	TEXT FILL 0: FILL “Usted” IF DR2PROXY=4 ELSE FILL: “[SP NAME]” TEXT FILL 1: FILL PARTICIPANT ID NUMBER

	TEXT FILL 2: FILL SP NAME TEXT FILL 3: FILL SP GENDER TEXT FILL 4: FILL SP LANGUAGE TEXT FILL 5: FILL SP DOB TEXT FILL 6: IF 11 AM OR EARLIER APPT AND SP IS 12 OR OLDER, FILL: 'FASTING' ELSE, FILL: 'NONFASTING' TEXT FILL 7: FILL SP AGE
NOTES	ALLOW CHECK ALL THAT APPLY, BUT 'NONE' IS SINGLE SELECT. IF 'REQUIRES ADAPTIVE DEVICES (SPECIFY)' SELECTED, DISPLAY MECACCOM2O1 TEXTBOX WITH 'ENTER ADAPTIVE DEVICES .' ALLOW 100 CHARACTERS. IF 'OTHER PROXY INFORMATION (SPECIFY)' SELECTED, DISPLAY MECACCOM2O2 TEXTBOX WITH 'ENTER OTHER PROXY INFORMATION.' ALLOW 100 CHARACTERS. IF 'OTHER SPECIFY' SELECTED, DISPLAY MECACCOM2O3 TEXTBOX WITH 'ENTER OTHER ASSISTANCE/SITUATION.' ALLOW 100 CHARACTERS.
HELP SCREEN	
HARD CHECK	IF 'NONE' IS SELECTED WITH OTHER CATEGORIES, DISPLAY HARD CHECK MESSAGE: "IF "NONE" IS SELECTED, NO OTHER CATEGORY SHOULD BE SELECTED." IF NONE OF THE ITEMS ARE SELECTED, DISPLAY "INTERVIEWER ANSWER REQUIRED. IF EXISTING CODES DO NOT APPLY, SELECT 'NONE'."
SOFT CHECK	
VERSION NOTES	
NEXT	MECMTRAVEL2

MECMTRAVEL2	
ASK	IF MECMSCHED2 in (1)

BASED ON INFORMATION FROM THE WEB SCHEDULER, IF THE SP WILL BE TRAVELING SEPARATELY TO THE MEC EXAM AND SHOULD RECEIVE THE TRAVEL INCENTIVE, READ THE TEXT BELOW AND SELECT 1. IF THE SP WILL NOT BE TRAVELING SEPARATELY AND THE TRAVEL INCENTIVE WILL GO ON ANOTHER HOUSEHOLD MEMBER'S CARD, DO NOT READ THE TEXT AND SELECT 3.

To help with getting to the exam, <TEXT FILL 1> will be added to <TEXT FILL 2> gift card.

5. SP WILL RECEIVE TRAVEL INCENTIVE
6. SP WILL RECEIVE TRAVEL INCENTIVE, BUT DOES NOT HAVE A GIFT CARD (DECLINED CARD PREVIOUSLY)
7. ANOTHER HH MEMBER WILL RECEIVE TRAVEL INCENTIVE
8. REQUEST RTI ARRANGE TRANSPORTATION
9. SP DECLINES TRAVEL INCENTIVE

SPANISH	BASED ON INFORMATION FROM THE WEB SCHEDULER, IF THE SP WILL BE TRAVELING SEPARATELY TO THE MEC EXAM AND SHOULD RECEIVE THE TRAVEL INCENTIVE, READ THE TEXT BELOW AND SELECT 1. IF THE SP WILL NOT BE TRAVELING SEPARATELY AND THE TRAVEL INCENTIVE WILL GO ON ANOTHER HOUSEHOLD MEMBER'S CARD, DO NOT READ THE TEXT AND SELECT 3. Para ayudarle a llegar al examen, se agregarán <TEXT FILL 1> dólares a <TEXT FILL 2>. 1. SP WILL RECEIVE TRAVEL INCENTIVE 2. SP WILL RECEIVE TRAVEL INCENTIVE, BUT DOES NOT HAVE A GIFT CARD (DECLINED CARD PREVIOUSLY) 3. ANOTHER HH MEMBER WILL RECEIVE TRAVEL INCENTIVE 4. REQUEST RTI ARRANGE TRANSPORTATION 5. SP DECLINES TRAVEL INCENTIVE
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: $[FILL INCENTIVE BASED ON DISTANCE TO MEC] TEXT FILL 2: FILL 'your' IF DR2PROXY=4 ELSE FILL "[SP NAME]'s"
FILLS (SPA)	TEXT FILL 1: $[FILL INCENTIVE BASED ON DISTANCE TO MEC] TEXT FILL 2: FILL 'su tarjeta de regalo IF DR2PROXY=4 ELSE FILL "la tarjeta de regalo de [SP NAME]"
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECMTRAVEL2 = 2: DR2NEWC2 ELSE: MECMPLANS2

DR2NEWC2	
ASK	IF MECMTRAVEL2 = 2
OK, we can assign a new card to <TEXT FILL 1>. The new card will be mailed to [FILL ADDRESS]. Is this the correct address? 3. YES 4. NO	

SPANISH	Está bien. Podemos ofrecerle una nueva tarjeta a <TEXT FILL 1>. La nueva tarjeta se enviará por correo postal a [FILL ADDRESS]. ¿Es esta la dirección correcta? 1. YES 2. NO
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1 FILL “you” IF DR2PROXY=4 ELSE, FILL “[SP NAME]” DISPLAY FULL ADDRESS ({Address1} {Address2} {City} {State} {ZIP})
FILLS (SPA)	TEXT FILL 1 FILL “su nombre” IF DR2PROXY=4 ELSE, FILL “nombre de [SP NAME]” DISPLAY FULL ADDRESS ({Address1} {Address2} {City} {State} {ZIP})
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF DR2NEWC2 in {1}: DR2WRAP2 ELSE: DR2ADDEDIT2

DR2ADDEDIT2	
ASK	IF DR2NEWC2 in {2}
PLEASE UPDATE THE MAILING ADDRESS [SP ADDRESS: ({Address1} {Address2} {City} {State} {ZIP})]	

SPANISH	*N/A*
QUESTION TYPE	Display Address
FILLS	DISPLAY FULL ADDRESS ({Address1} {Address2} {City} {State} {ZIP})
NOTES	DISPLAY THE ADDRESS COLUMNS LISTED ABOVE AND ALLOW THE INTERVIEWER TO MAKE CORRECTIONS AS NEEDED. ONCE THE INTERVIEWER IS DONE, THEY WILL PRESS 1 TO CONTINUE. THE FIELD FOR STATE MAY NOT BE UPDATED. FOR CITY: ONLY ALLOW CHARACTERS, NO NUMERALS ALLOWED. FOR ZIP CODE: REQUIRE 5 NUMERALS. IF DR2NEWC2 = 2 AND NONE OF THE ADDRESS FIELDS ARE MODIFIED, AUTO-BACKCODE THE RESPONSE TO DR2NEWC2 = 1
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	DR2WRAP2

DR2WRAP2	
ASK	IF DR2NEWC2 in {1} OR DR2ADDEDIT2 NE BLANK

Once we request the new card, it will take 5-7 business days for it to arrive. It will have these new funds added.

(IF NEEDED, SAY: Any remaining funds on the old card will be transferred to the new card as well.)

You must activate the card before it can be used.

PRESS 1 TO CONTINUE

SPANISH	Una vez que pidamos la nueva tarjeta, tomará entre 5 y 7 días hábiles en llegar. En ella se agregarán estos nuevos fondos. (IF NEEDED, SAY: Los fondos restantes en la tarjeta anterior también se transferirán a la nueva tarjeta). Debe activar la tarjeta antes de poder usarla**.** PRESS 1 TO CONTINUE
QUESTION TYPE	Text
FILLS	
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	MECMPLANS2

MECMPLANS2	
ASK	IF MECMSCHED2 in (1)

Please tell me if <TEXT FILL 1> also <TEXT FILL 2> any of the following:

CHECK ALL THAT APPLY.

1. Monetary help for child or elder care.
2. If <TEXT FILL 1> <TEXT FILL 3> will miss school for the exam: a letter documenting participation in an important national health study.
3. If <TEXT FILL 1> <TEXT FILL 3> will miss work for the exam: a letter documenting participation in an important national health study.
4. NO ACCOMODATIONS NEEDED.

SPANISH	Dígame si <TEXT FILL 1> también necesita algo de lo siguiente: CHECK ALL THAT APPLY. 1. Ayuda monetaria para el cuidado de niños o ancianos. 2. Una carta que documente la participación en un importante estudio nacional de salud, si es que <TEXT FILL 1> <TEXT FILL 3> faltará a la escuela para el examen. 3. Una carta que documente la participación en un importante estudio nacional de salud, si es que <TEXT FILL 1> <TEXT FILL 3> faltará al trabajo para el examen . 4. NO ACCOMODATIONS NEEDED.
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL “you” IF DR2PROXY=4 OR MECPROXY2=1 ELSE FILL “{MECPRFNM2}” TEXT FILL 2: FILL “need” IF DR2PROXY=4 OR MECPROXY2=1 ELSE, FILL “needs” IF MECPROXY2=2 TEXT FILL 3: FILL ‘or [SP NAME]’ IF DR2PROXY=(1,2,3)
FILLS (SPA)	TEXT FILL 1: FILL “usted” IF DR2PROXY=4 OR MECPROXY2=1 ELSE FILL “{MECPRFNM2}” TEXT FILL 2: FILL “BLANK” IF DR2PROXY=4 OR MECPROXY2=1 ELSE, FILL “BLANK” IF MECPROXY2=2 TEXT FILL 3: FILL ‘o SP NAME' IF DR2PROXY=(1,2,3)
NOTES	ALLOW CHECK ALL THAT APPLY. IF MECMPLANS2=4, DO NOT ALLOW 1, 2, OR 3 TO BE SELECTED.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECMPLANS2 in (1): MECMCARE2 IF MECMPLANS2 in (2, 3, OR 4) AND LANGUAGE IS ENGLISH OR SPANISH: END OF SECTION ELSE: END OF SECTION

MECMCARE2	
ASK	IF MECMPLANS2 in (1)
We can provide $10 an hour for (child/elder) care to assist <TEXT FILL 1> in being able to attend <TEXT FILL 2> exam appointment. We will provide this money after <TEXT FILL 3> exam appointment. At the end of the appointment, <TEXT FILL 1> should let the staff know how many hours were needed for care. They will add the funds to <TEXT FILL 2> gift card. PRESS 1 TO CONTINUE.	

SPANISH	Podemos ofrecer $10 dólares por hora para el cuidado de (niños/ancianos) para ayudar a que <TEXT FILL 1> pueda ir a <TEXT FILL 2>.. Le daremos este dinero una vez después que <TEXT FILL 3> su cita del examen. Al final de la cita, <TEXT FILL 1> debe informarle al personal cuántas horas se necesitaron para el cuidado de (niños/ancianos). El personal agregará los fondos a <TEXT FILL 4>. PRESS 1 TO CONTINUE.
QUESTION TYPE	Text
FILLS (ENG)	TEXT FILL 1: FILL “you” IF DR2PROXY=4 OR MECPROXY2=1 ELSE, FILL “{MECPRFNM2}” TEXT FILL 2: FILL ‘your’ IF DR2PROXY=4 ELSE FILL “[SP NAME]’s” TEXT FILL 3: FILL “you complete your” IF DR2PROXY=4 FILL “[SP NAME] completes their” IF DR2PROXY=(1, 2, 3)
FILLS (SPA)	TEXT FILL 1: FILL “usted” IF DR2PROXY=4 OR MECPROXY2=1 ELSE, FILL “{MECPRFNM2}” TEXT FILL 2: FILL ‘su cita del examen’ IF DR2PROXY=4 ELSE FILL “la cita del examen de [SP NAME]” TEXT FILL 3: FILL “usted complete” IF DR2PROXY=4 FILL “[SP NAME] complete” IF DR2PROXY=(1, 2, 3) TEXT FILL 4: FILL ‘su tarjeta de regalo’ IF DR1PROXY=4 ELSE FILL “la tarjeta de regalo de [SP NAME]”
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	MECCONTINFO2

MECCONTINFO2	
ASK	IF MECMSCHED2 in (1)

We would like to contact <TEXT FILL 2> to remind <TEXT FILL 3> about <TEXT FILL 1> upcoming exam appointment. May we contact <TEXT FILL 3> by phone, text message and/or email?

CHECK ALL THAT APPLY

1 . YES – PHONE
2. YES - TEXT
3. YES - EMAIL
4. DO NOT CONTACT BY PHONE, TEXT OR EMAIL

SPANISH	Nos gustaría comunicarnos con <TEXT FILL 2> para recordarle <TEXT FILL 1> para el examen. ¿Está bien si nos ponemos en contacto con <TEXT FILL 3> por teléfono, mensaje de texto o correo electrónico? CHECK ALL THAT APPLY 1 . YES – PHONE 2. YES - TEXT 3. YES - EMAIL 4. DO NOT CONTACT BY PHONE, TEXT OR EMAIL
QUESTION TYPE	Radio button
FILLS (ENG)	TEXT FILL 1: FILL “your” IF DR2PROXY=4 FILL “{SP NAME}’s” IF DR2PROXY=(1,2,3) TEXT FILL 2: FILL “you” IF DR2PROXY=4 OR MECPROXY2 = 1 ELSE FILL “{MECPRFNM2}” TEXT FILL 3: FILL “you” IF DR2PROXY=4 OR MECPROXY2 = 1 ELSE, FILL ‘them’.
FILLS (SPA)	TEXT FILL 1: FILL “su próxima cita para el examen” IF DR2PROXY=4 FILL “la próxima cita para el examen de {SP NAME}” IF DR2PROXY=(1,2,3) TEXT FILL 2: FILL “usted” IF DR2PROXY=4 OR MECPROXY2 = 1 ELSE FILL “{MECPRFNM2}” TEXT FILL 3: FILL “usted” IF DR2PROXY=4 OR MECPROXY2 = 1 ELSE, FILL ‘esta persona’.
NOTES	ALLOW CHECK ALL THAT APPLY IF MECCONTACT2 = 4, DO NOT ALLOW 1, 2 OR 3 TO BE SELECTED.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF (DR2PROXY = 1 AND MECPROXY2 = 1) OR (DS2PRFNM2 = MECPRFNM2) OR DR2PROXY = 4: MECCONTINS2 ELSE IF MECCONTINFO2 in (1): MECPHONEAX2/MDAMPHONEA2 ELSE IF MECCONTINFO2 in (2): MECTEXT2 ELSE IF MECCONTINFO2 in (3): MECEMAIL2

	ELSE IF MECCONTINFO2 in (4): END SECTION ELSE: END SECTION

MECCONTINS2	
ASK	IF DS2DSCHED2 = 1 AND ((DS2PROXY2 = 1 AND MECPROXY2 = 1) OR (DS2PRFNM2 = MECPRFNM2) OR DR2PROXY = 4) AND MECCONTINF2 = 1, 2 OR 3
May we use the same contact information for the exam appointment reminders that we collected for the dietary interview appointment? <FILL DS2CONTACT OR DS2DPHONEA> <FILL DS2TEXT> <FILL DS2EMAIL> 3. YES 4. NO	

SPANISH	¿Podemos usar la misma información de contacto para los recordatorios de la cita del examen que recopilamos para la cita de la entrevista sobre alimentación? <FILL DS2CONTACT OR DS2DPHONEA> <FILL DS2TEXT> <FILL DS2EMAIL> 1. YES 2. NO
QUESTION TYPE	Radio button
FILLS	DISPLAY PHONE, TEXT AND EMAIL COLLECTED FOR THE DIETARY DAY 2 APPOINTMENT
NOTES	
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECCONTINS2 = 2: MECPHNREM2 ELSE: END SECTION

MECPHNREM2	
ASK	IF MECCONTINS2 = 2
What is the best phone number to call to remind <TEXT FILL 1> of this appointment? |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER	

SPANISH	¿Cuál es el mejor número de teléfono para llamar para recordarle a <TEXT FILL 1> sobre esta cita? |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER
QUESTION TYPE	Numeric
FILLS (ENG)	TEXT FILL 1: FILL "you" IF DR2PROXY=4 OR MECPROXY2 = 1 ELSE FILL "{MECPRFNM2}"
FILLS (SPA)	TEXT FILL 1: FILL "usted" IF DR2PROXY=4 OR MECPROXY2 = 1 ELSE FILL "{MECPRFNM2}"
NOTES	ONLY ALLOW 10 DIGIT PHONE NUMBER. DISPLAY PHONE NUMBER AS XXX-XXX-XXXX
HELP SCREEN	
HARD CHECK	ONLY ALLOW RESPONSE OF DON'T KNOW, REFUSED, "000" or 10 DIGIT PHONE NUMBER. IF PHONE NUMBER PROVIDED, DISPLAY HARD RANGE CHECK MESSAGE IF PHONE NUMBER NOT "000" OR IS 10 DIGITS OF ALL THE SAME NUMBER (I.E., 1111111111): 'PLEASE ENTER A VALID PHONE NUMBER'.
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECCONTINFO2 in {2}: MECTEXT2 IF MECCONTINFO2 NE 2 AND MECCONTINFO2 in {3}: MECEMAIL2 ELSE: END SECTION
MECTEXT2	
ASK	IF MECCONTINFO2 in (2)
Is <TEXT FILL 1> the best phone number to text <TEXT FILL 2>? Please note NHANES will not be responsible for any text-related phone charges. IF NOT BEST PHONE NUMBER TO TEXT, ENTER PHONE NUMBER TO TEXT |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER	

SPANISH	¿Es <TEXT FILL 1> el mejor número de teléfono para <TEXT FILL 2>? Tenga en cuenta que NHANES no se hará responsable de ningún gasto telefónico relacionado con los mensajes de texto. IF NOT BEST PHONE NUMBER TO TEXT, ENTER PHONE NUMBER TO TEXT |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER
QUESTION TYPE	Numeric
FILLS (ENG)	TEXT FILL 1: FILL PHONE NUMBER ON FILE IF MECCONTINFO2 = 1. ELSE FILL PHONE NUMBER FROM MECPHNREM2 . TEXT FILL 2: FILL "you" IF DR2PROXY=4 OR MECPROXY2 = 1 ELSE FILL "{MECPRFNM2}"
FILLS (SPA)	TEXT FILL 1: FILL PHONE NUMBER ON FILE IF MECCONTINFO2 = 1. ELSE FILL PHONE NUMBER FROM MECPHNREM2 . TEXT FILL 2: FILL "enviarle mensajes de texto" IF DR2PROXY=4 OR MECPROXY2 = 1 ELSE FILL " enviarle mensajes de texto a {MECPRFNM2}"
NOTES	ONLY ALLOW 10 DIGIT PHONE NUMBER. DISPLAY PHONE NUMBER AS XXX-XXX-XXXX
HELP SCREEN	
HARD CHECK	ONLY ALLOW RESPONSE OF DON'T KNOW, REFUSED, "000" or 10 DIGIT PHONE NUMBER. IF PHONE NUMBER PROVIDED, DISPLAY HARD RANGE CHECK MESSAGE IF PHONE NUMBER NOT "000" OR IS 10 DIGITS OF ALL THE SAME NUMBER (I.E., 1111111111): 'PLEASE ENTER A VALID PHONE NUMBER'.
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECCONTINFO2 in (3): MECEMAIL2 ELSE: END SECTION

MECEMAIL2	
ASK	IF MECCONTINFO2 in (3)
What email address would be best to use for reminders about <TEXT FILL 1> upcoming exam appointment?	

ENTER EMAIL ADDRESS. RE-ENTER EMAIL ADDRESS. READ EMAIL ADDRESS BACK TO SP/PROXY TO CONFIRM IT IS SPELLED ACCURATELY.	
SPANISH	¿Qué dirección de correo electrónico sería la mejor para enviar recordatorios <TEXT FILL 1> para el examen? ENTER EMAIL ADDRESS. RE-ENTER EMAIL ADDRESS. READ EMAIL ADDRESS BACK TO SP/PROXY TO CONFIRM IT IS SPELLED ACCURATELY.
QUESTION TYPE	Text box
FILLS (ENG)	TEXT FILL 1: FILL “your” IF THE SP IS THE RESPONDENT FILL “{SP NAME}’s” IF THE RESPONDENT IS THE PROXY OF THE SP
FILLS (SPA)	TEXT FILL 1: FILL “su próxima cita para el examen” IF THE SP IS THE RESPONDENT FILL “la próxima cita para el examen de {SP NAME}” IF THE RESPONDENT IS THE PROXY OF THE SP
NOTES	MAKE SURE A VALID EMAIL ADDRESS STYLE IS ENTERED
HELP SCREEN	
HARD CHECK	IF THERE ARE SPACES IN THE EMAIL ADDRESS, IF EMAIL ADDRESS IS MISSING THE @ SYMBOL, OR IF TEXT IS MISSING TO THE LEFT OR RIGHT OF THE @ SYMBOL, DISPLAY: .”ENTER A VALID EMAIL ADDRESS” IF EMAIL ADDRESSES DO NOT MATCH, DISPLAY “EMAIL ADDRESSES DO NOT MATCH. PLEASE CONFIRM AND CORRECT”
SOFT CHECK	
VERSION NOTES	
NEXT	END SECTION

MECMCONTINF2	
ASK	IF MECMSCHED2 in (1) AND SP IS 12–17 YRS OLD
If you would like, we can contact <TEXT FILL 1> to remind them about their upcoming exam appointment. May we contact <TEXT FILL 1> by text message and/or email?	

CHECK ALL THAT APPLY. 1. TEXT 2. EMAIL 3. CANNOT CONTACT BY TEXT OR EMAIL	
SPANISH	Si lo desea, podemos comunicarnos con <TEXT FILL 1> para recordarle sobre su próxima cita para el examen. ¿Está bien si nos ponemos en contacto con <TEXT FILL 1> por mensaje de texto o correo electrónico? CHECK ALL THAT APPLY. 1. TEXT 2. EMAIL 3. CANNOT CONTACT BY TEXT OR EMAIL
QUESTION TYPE	Radio button
FILLS	TEXT FILL 1: {SP NAME}
NOTES	ALLOW CHECK ALL THAT APPLY.
HELP SCREEN	
HARD CHECK	
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECMCONTINF2 in (1): MECMTEXT2 ELSE IF MECMCONTINF2 in (2): MECMEMAIL2 ELSE: END OF SECTION

MECMTEXT2	
ASK	IF MECMCONTINF2 in (1)
What is the best phone number to text <TEXT FILL 1>? ENTER PHONE NUMBER TO TEXT |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER	

SPANISH	¿Cuál es el mejor número para enviarle mensajes de texto a <TEXT FILL 1>? ENTER PHONE NUMBER TO TEXT |___|___|___| |___|___|___| - |___|___|___|___| AREA CODE ENTER PHONE NUMBER
QUESTION TYPE	Numeric
FILLS	TEXT FILL 1: {SP NAME}
NOTES	ONLY ALLOW 10-DIGIT PHONE NUMBER. DISPLAY PHONE NUMBER AS XXX-XXX-XXXX
HELPSCREEN	
HARD CHECK	ONLY ALLOW RESPONSE OF DON'T KNOW, REFUSED, "000" or 10 DIGIT PHONE NUMBER. IF PHONE NUMBER PROVIDED, DISPLAY HARD RANGE CHECK MESSAGE IF PHONE NUMBER NOT "000" OR IS 10 DIGITS OF ALL THE SAME NUMBER (I.E., 1111111111): 'PLEASE ENTER A VALID PHONE NUMBER'.
SOFT CHECK	
VERSION NOTES	
NEXT	IF MECMCONTINF2 in (2): MECMEMAIL2 ELSE: END OF SECTION

MECMEMAIL2	
ASK	IF MECMCONTINF2 in (2)
What email address would be best to use for reminders about <TEXT FILL 1> next dietary interview appointment? ENTER EMAIL ADDRESS. RE-ENTER EMAIL ADDRESS. READ EMAIL ADDRESS BACK TO PROXY TO CONFIRM IT IS SPELLED ACCURATELY.	

SPANISH	¿Qué dirección de correo electrónico sería la mejor para enviar recordatorios sobre la próxima cita de <TEXT FILL 1> para la entrevista sobre alimentación? ENTER EMAIL ADDRESS. RE-ENTER EMAIL ADDRESS. READ EMAIL ADDRESS BACK TO PROXY TO CONFIRM IT IS SPELLED ACCURATELY.
QUESTION TYPE	Text box
FILLS	TEXT FILL 1: {SP NAME}'s
NOTES	MAKE SURE A VALID EMAIL ADDRESS STYLE IS ENTERED.
HELP SCREEN	
HARD CHECK	IF THERE ARE SPACES IN THE EMAIL ADDRESS, IF EMAIL ADDRESS IS MISSING THE @ SYMBOL, OR IF TEXT IS MISSING TO THE LEFT OR RIGHT OF THE @ SYMBOL, DISPLAY: ."ENTER A VALID EMAIL ADDRESS" IF EMAIL ADDRESSES DO NOT MATCH, DISPLAY "EMAIL ADDRESSES DO NOT MATCH. PLEASE CONFIRM AND CORRECT"
SOFT CHECK	
VERSION NOTES	
NEXT	END OF SECTION