ATTACHMENT 7F

Post-Exposure Survey: Online, English

Public reporting burden of this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-####).

WEB SURVEY APPEARANCE

Optimization for best viewing and ease of use on multiple devices (desktop, laptop, tablet, smartphone)

Header Text: ADD HERE

Footer Text: If you have any questions about the study, please email our study coordinator at danielle.nielsen@icf.com

Logo

Termination page: Thank you for your time and interest. You do not qualify for this survey at this time.

Prompt for required questions. Note, All questions should be programmed as soft prompt unless specified as "required":

Please complete all the questions on this page before moving on.

PROMPT FOR ALL OTHER QUESTIONS IF RESPONDENT TRIES TO SKIP

You have not answered all the questions on this page. Please consider responding to all questions. If you are choosing not to answer a question(s), click next.

Survey Completion text: Thank you for completing this survey. If you have additional questions about the study, please email our study coordinator at danielle.nielsen@icf.com

Sample variables:

[Clinic]

Dr. [Name]

[EDUMAT]

[date] - date of scheduled visit with Doctor, in final variables

Imported Sample Variables

CLINIC

IMPORTED SAMPLE VARIABLE: Clinic Name

[TEXT BOX]

NAME

IMPORTED SAMPLE VARIABLE: Name

[TEXT BOX]

EDUMAT

IMPORTED SAMPLE VARIABLE: EDUMAT

1122

DATE

IMPORTED SAMPLE VARIABLE: Date

Informed Consent

[ASK ALL]

LANG.

In what language would you like to complete this survey? ¿En qué idioma le gustaría completar esta encuesta?

01 English		
02 Español		
		ılish 🗸
In what language	would you like to complete this survey?	
¿En qué idioma le	gustaría completar esta encuesta?	
EnglishEspañol		
	Back	
If	ou have any questions about the study, please email our survey coordinator at danielle.nielsen@icf.com.	

[ASK ALL] [required] C1CONSENT.

You are being asked to participate in this study because you receive care at [CLINIC] and are eligible for prostate cancer screening. The purpose of this survey is to gather information about your prostate cancer screening history and decision making. If you complete this survey, you will receive a \$25 gift code.

Who is sending this survey? ICF is a consulting firm that is working with the Division of Cancer Prevention and Control (DCPC) at the Centers for Disease Control and Prevention (CDC) to evaluate different prostate cancer screening decision aids and their ability to help men aged 55-69 years make a decision whether to get a prostate-specific antigen (PSA) test. A PSA test is a blood test that measures the level of PSA in the blood. PSA is a substance made by the prostate.

<u>How long will it take?</u> This survey will take no longer than 20 minutes. Your participation in this study is 100% voluntary which means you can choose whether or not you want to take part in this study.

What are the risks and benefits of doing the survey? As a participant in our study, there is a minimal risk related to your privacy and/or confidentiality, but steps have been taken to remove your personal information so that you cannot be identified. Only members of the research team will have access to study information. Remember, you are free to choose not to participate in this study. You are also free to leave the study at any time. Leaving the study will not interfere with your care, payment for your health care, or your eligibility for health care benefits.

Is there a cost associated with the study? There are no costs to you for participating in this study.

<u>What will happen next?</u> The study team may contact you by text, email, or phone to share information or invite you to respond to other surveys or interviews. All requests for information

are voluntary. The purpose and topic of each request for information will be shared with you so you can choose whether you want to participate. Your choice to participate or not participate in future requests will not interfere with your care at the clinic.

<u>How will my information be shared outside of the study?</u> Your personal responses will not be shared outside of the study. Summaries of survey results that are <u>not</u> linked to your name will be shared with CDC and/or may be published in a professional journal.

Who do I call about problems or questions? If you have questions about or concerns about your participation in this project, please contact the ICF project manager – Danielle Nielsen at Danielle.Nielsen@icf.com. For questions regarding your rights as a study participant, you can contact ICF's Institutional Review Board (IRB) representative Christine Walrath at (646) 695-8154 or Christine.Walrath@icf.com. Further, you may contact the CDC point of contact, [NAME] for more information about this study and how CDC may use the results.

If you agree to participate in this study, please click "Begin Survey."

If you do not agree to participate, please click, "I decline."

01 Begin survey

02 I decline

[TERMINATE IF CONSENT=02]

English 🗸

You are being asked to participate in this study because you receive care at Example clinic and are eligible for prostate cancer screening. The purpose of this survey is to gather information about your prostate cancer screening history and decision making. If you complete this survey, you will receive a \$25 gift card.

Who is sending this survey? ICF is a consulting firm that is working with the Division of Cancer Prevention and Control (DCPC) at the Centers for Disease Control and Prevention (CDC) to evaluate different prostate cancer screening decision aids and their ability to help men aged 55-69 years make a decision whether to get a prostate-specific antigen (PSA) test. A PSA test is a blood test that measures the level of PSA in the blood. PSA is a substance made by the prostate.

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<u>Is there a cost associated with the study?</u> There are no costs to you for participating in this study.

<u>What will happen next?</u> The study team may contact you by text, email, or phone to share information or invite you to respond to other surveys or interviews. All requests for information are voluntary. The purpose and topic of each request for information will be shared with you so you can choose whether you want to participate. Your choice to participate or not participate in future requests will not interfere with your care at the clinic.

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If you agree to participate in this study, please click "Begin Survey."

If you do not agree to participate, please click, "I decline."

○ Begin survey○ I decline

Back

Next

Section 1: Prostate Cancer Knowledge

[ASK ALL] Q19W2

answer a question, please select the "No			vieage. it you	are unsure now to
answer a question, piease select the TW	ot suite Tesp	onse.		
The prostate gland is a reproductive org	an located b	elow the bladder.		
01 True				
02 False				
03 Not sure				
				English 🗸
Progress			2%	
In this section, we would like t	o get a seni	se of your prostat	e cancer kn	owledge If
you are unsure how to answer	•			•
you are ansure now to answer	a question	, preuse serece en	riorsare	response.
The prostate gland is a reprodu	uctive orga	n located below t	he bladder.	
○ True				
○ False				
○ Not sure				
	Back	Next		

[ASK ALL]					
Q19aW2					
The prostate gland ma	akes some of th	e fluid that's pa	art of semen.		
01 True					
02 False					
03 Not sure					
					English 🗸
	_				
	Progress			5%	
The presents of	المسط سممادمه م	ama af tha flu	.i.d +la a+/a way+ a	faaman	
rne prostate g	iand makes so	ome or the fit	ıid that's part o	r semen.	
○ True					
○ False					
○ Not sure					
		Back	Next		
	If you have any qu	estions about the stu	dy, please email our surv	vey coordinator at	
	, ,		sen@icf.com.		

Risk Factors

[ASK ALL]

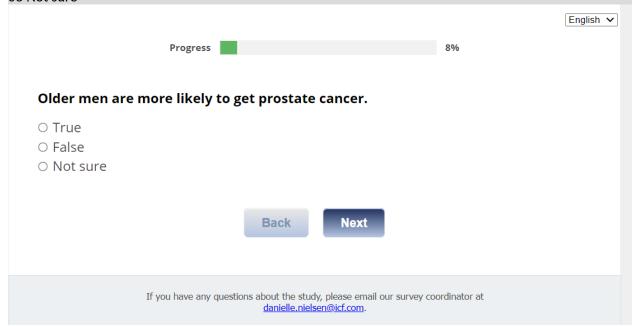
Q20W2

Older men are more likely to get prostate cancer.

01 True

02 False

03 Not sure



[ASK ALL]					
Q21W2					
More Black or African	American men a	are diagnosed v	with prostate can	cer than White m	ien.
01 True					
02 False					
03 Not sure					
					English 🗸
	Progress			11%	
	African Americ	can men are	diagnosed with	prostate canc	er than
White men.					
○ True					
○ False					
O Not sure					
		Back	Next		
	If you have any que		ly, please email our surv sen@icf.com	ey coordinator at	

[ASK ALL]					
Q22W2					
Men who have father those who do not.	rs or brothers with	prostate car	icer are more like	ly to get prostate	cancer than
01 True 02 False 03 Not sure					
					English 🗸
	Progress			14%	
	e fathers or brot er than those wh	-	rostate cancer	are more likely	to get
○ True ○ False					
○ Not sure					
		Back	Next		
	If you have any questi	ons about the stud	ty, please email our surv sen@icf.com.	ey coordinator at	

[ASK ALL] Q23W2. Who do you think is more likely to get prostate cancer? 01 White men 02 Black or African American men 03 Hispanic or Latino men 04 Asian men 05 Race or ethnicity is not a factor 97 Not sure English 🗸 Progress Who do you think is more likely to get prostate cancer? O White men O Black or African American men O Hispanic or Latino men O Asian men O Race or ethnicity is not a factor

If you have any questions about the study, please email our survey coordinator at danielle.nielsen@icf.com.

Back

Next

Not sure

[ASK ALL] Q24W2. Who do you think is more likely to get prostate cancer? 01 A man whose father has had prostate cancer 02 A man whose father has not had prostate cancer 03 It doesn't make any difference 97 Not sure

Who do you think is more likely to get prostate cancer?

- O A man whose father has had prostate cancer
- O A man whose father has not had prostate cancer
- O It doesn't make any difference
- O Not sure

Back Next

English 🗸

20%

If you have any questions about the study, please email our survey coordinator at danielle.nielsen@icf.com.

Screening

[ASK ALL] Q25W2. A prostate-specific antigen (PSA) blood test can be done to check for prostate cancer. 01 True 02 False 97 Not sure Progress 23% A prostate-specific antigen (PSA) blood test can be done to check for prostate cancer. ○ True ○ False ○ Not sure

[ASK ALL]					
Q26W2.					
A digital rectal exam o	or DRE can be do	one to check fo	r prostate cancer	•	
01 True					
02 False					
97 Not sure					
					English 🗸
	_				
	Progress			26%	
A digital rectal	exam or DRE	can be done	to check for pro	ostate cancer.	
○ True					
○ False					
○ Not sure					
		Back	Next		
	If you have any que	estions about the stu	dy, please email our surv	ev coordinator at	
	, , , , , , , , , , , , , , , , , , , ,		sen@icf.com.	,	

[ASK ALL]	
Q27W2.	
The only way a man can know for sure if he has prostate cancer is to have a prostate biopsy	
01 True	
02 False	
97 Not sure	
	English 🗸
Dua sur su	
Progress 29%	
The only way a man can know for sure if he has prostate cancer is to have a	
prostate biopsy.	
○ True	
O False	
O Not sure	
O NOC Saire	
Back	
If you have any questions about the study, please email our survey coordinator at	

[ASK ALL]					
Q28W2.					
A prostate biopsy is w	hen a blood test is	used to che	ck for proteins i	n the blood.	
01 True					
02 False					
97 Not sure					
					English 🗸
	Progress			32%	
A prostate bioլ	psy is when a blo	od test is u	ised to check t	for proteins in t	he blood.
○ True					
O False					
O Not sure					
O NOC SUIC					
		Back	Next		
	If you have any question	ns about the stud <u>danielle.niels</u>		vey coordinator at	

[ASK ALL]					
Q29W2.					
Neither the PSA nor DRE a	are 100% accur	rate.			
01 True					
02 False					
97 Not sure					
					English 🗸
	Progress			35%	
Neither the PSA n	or DRE are 10	00% accurat	te.		
○ True					
○ False					
Not sure					
0 1100 3011 0					
		Back	Next		
If y	ou have any questic	ons about the stud danielle.niels		survey coordinator at	

Warning Signs [ASK ALL] Q30. A man can have prostate cancer and have no symptoms. 01 True 02 False 97 Not sure English 🗸 Progress 38% A man can have prostate cancer and have no symptoms. O True ○ False Not sure Next **Back**

Section 2: Decisional Conflict

[ASK ALL]

Q36W2.

As it relates to prostate cancer screening, please indicate your agreement with each statement, using either strongly agree, agree, neither, disagree, or strongly disagree.

	01 Strongly Agree	02 Agree	03 Neither	04 Disagree	05 e Strong Disagr
6aW2. I know which prostate cancer					
eening options are available to me.					
6bW2. I know the benefits of each ion.					
6cW2. I know the risks and side ects of each option.					
6dW2. I am clear about which nefits matter most to me.					
		1	ı	I	Engli
Progress			41%		
As it relates to prostate cancer so each statement, using either stro	•		•	•	
•	ongly agree		•	•	trongly
each statement, using either stro	ongly agree	, agree, ne	ither, disa	gree, or s	trongly
each statement, using either strodisagree. I know which prostate cancer screening	ongly agree Strongly Agree	, agree, ne _{Agree}	ither, disa	gree, or so	Strongly Disagree
each statement, using either strodisagree. I know which prostate cancer screening options are available to me.	Strongly Agree	, agree, ne	ither, disa	gree, or st	Strongly Disagree
each statement, using either strodisagree. I know which prostate cancer screening options are available to me. I know the benefits of each option. I know the risks and side effects of each	Strongly Agree	Agree	Neither	Disagree	Strongly Disagree
each statement, using either street disagree. I know which prostate cancer screening options are available to me. I know the benefits of each option. I know the risks and side effects of each option. I am clear about which benefits matter most	Strongly Agree	Agree	Neither	Disagree	Strongly Disagree

[ASK ALL]

Q36W2e_h.

Relating to prostate cancer screening,

	01	02 Agree	03	04	05
	Strongly		Neither	Disagree	Strongly
	Agree				Disagree
Q36eW2. I am clear about which risks					
and side effects matter most.					
Q31fW2. I am clear about which is more					
important to me (the benefits or the					
risks and side effects).					
Q36gW2. I have enough support from					
others to make a choice about prostate					
cancer screening.					
Q36hW2. I am choosing without					
pressure from others.					

English 🗸

Progress

44%

Relating to prostate cancer screening,

	Strongly Agree	Agree	Neither	Disagree	Strongly Disagree
I am clear about which risks and side effects matter most.	0	0	0	0	0
I am clear about which is more important to me (the benefits or the risks and side effects).	0	0	0	0	0
I have enough support from others to make a choice about prostate cancer screening.	0	0	0	0	0
I am choosing without pressure from others.	0	0	0	0	0

Back

Next

[ASK ALL] Q36W2i_l.

Relating to prostate cancer screening,

	01	02 Agree	03	04	05
	Strongly		Neither	Disagree	Strongly
	Agree				Disagree
Q36iW2. I have enough advice to make a					
choice.					
Q36jW2. I am clear about the best					
choice for me.					
Q36kW2. I feel sure about what to					
choose.					
Q36LW2. This decision is easy for me to					
make.					

				470		English
Progress				47%		
Relating to prostate cancer sc	Strongly	Agree	Neither	Disagree	Strongly	
Lhava anaugh advisa ta maka a shaisa	Agree	O	0	O	Disagree	
I have enough advice to make a choice. Lam clear about the best choice for me.	0	0	0	0	0	
I feel sure about what to choose.	0	0	0	0	0	
This decision is easy for me to make.	0	0	0	0	0	
	Back	Next				
If you have any questi		ıdy, please ema lsen@icf.com.	il our survey c	oordinator at		

[ASK ALL]

Q36W2m_p.

Relating to prostate cancer screening,

	01	02 Agree	03	04	05
	Strongly		Neither	Disagree	Strongly
	Agree				Disagree
Q36mW2. I feel I have made an					
informed choice.					
Q36nW2. My decision shows what is					
important to me.					
Q36oW2. I expect to stick with my					
decision.					
Q36pW2. I am satisfied with my					
decision.					

Progress 50%

Relating to prostate cancer screening,

	Strongly Agree	Agree	Neither	Disagree	Strongly Disagree
I feel I have made an informed choice.	0	\circ	0	\circ	0
My decision shows what is important to me.	\circ	\circ	0	\circ	\circ
I expect to stick with my decision.	0	\circ	0	\circ	0
l am satisfied with my decision.	0	0	0	0	0

Back Next

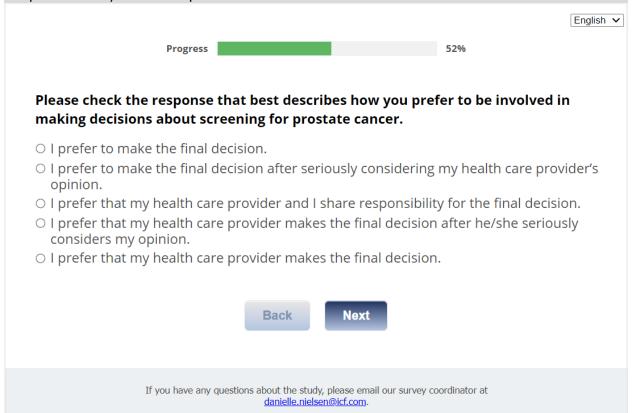
Section 3: Autonomous Decision Making

[ASK ALL]

Q37.

Please check the response that best describes how you prefer to be involved in making decisions about screening for prostate cancer.

- 01 I prefer to make the final decision.
- 02 I prefer to make the final decision after seriously considering my health care provider's opinion.
- 03 I prefer that my health care provider and I share responsibility for the final decision.
- 04 I prefer that my health care provider makes the final decision after he/she seriously considers my opinion.
- 05 I prefer that my health care provider makes the final decision.



Section 4: Decision Self-Efficacy

[ASK ALL]

DSE.

For this next section, rate your confidence level for each of the statements provided as it relates to prostate cancer screening options on a scale of 0 (not at all confident) to 4 (very confident).

I feel confident that I can:

	0 Not confident at all	1	2	3	4 Very confident
DSE1. Get the facts about the					
screening options available to					
me.					
DSE2. Get the facts about the					
benefits of each option.					
DSE3. Get the facts about the					
risks and side effects of each					
option.					
DSE4. Understand the					
information enough to be able					
to make a choice.					
DSE5. Ask questions without					
feeling dumb.					
DSE6. Express my concerns					
about each option.					
DSE7. Ask for advice.					
DSE8. Figure out the option that					
best suits me.					
DSE9. Handle unwanted					
pressure from others in making					
my choice.					
DSE10. Let the clinic team know					
what's best for me.					
DSE11. Delay my decision if I					
feel I need more time.					

_			
-1	าต	lish	~

Progress 55%

For this next section, rate your confidence level for each of the statements provided as is relates to prostate cancer screening options on a scale of 0 (not at all confident) to 4 (very confident).

I feel confident that I can:

	Not confident at all				Very confident
	0	1	2	3	4
Get the facts about the screening options available to me.	0	0	0	0	0
Get the facts about the benefits of each option.	0	\circ	\circ	\circ	0
Get the facts about the risks and side effects of each option.	0	0	0	0	0
Understand the information enough to be able to make a choice.	0	\circ	\circ	0	0
Ask questions without feeling dumb.	0	\circ	\circ	\circ	0
Express my concerns about each option.	\circ	\circ	\circ	\circ	0
Ask for advice.	0	\circ	\circ	0	0
Figure out the option that best suits me.	0	0	\circ	0	0
Handle unwanted pressure from others in making my choice.	0	0	0	0	0
Let the clinic team know what's best for me.	\circ	\circ	\circ	\circ	0
Delay my decision if I feel I need more time.	0	\circ	\circ	0	0

Back

Next

Section 5: Preparation for Decision Making

[ASK ALL]

PDM.

For this next section, please indicate your opinion about the effect of the prostate cancer screening materials you received by checking the appropriate box in each row to show the extent to which you agree with each statement. Please answer each question using either, "Not at all", "A little", "Somewhat", "Quite a bit", or "A great deal." If you think the question is not applicable, select "N/A." Also, if you do not have a health care provider, please select that option.

Did this education material...

at all	little	Somew hat	Quite a bit	great deal	not have a health care provide r
	at all				

follow-up visit with your				
health care provider?				

English V

Progress 58%

For this next section, please indicate your opinion about the effect of the prostate cancer screening materials you received by checking the appropriate box in each row to show the extent to which you agree with each statement. Please answer each question using either, "Not at all", "A little", "Somewhat", "Quite a bit", or "A great deal." If you think the question is not applicable, select "N/A." Also, if you do not have a health care provider, please select that option.

Did this education material...

	Not at all	A little	Somewhat	Quite a bit	A great deal	N/A	l do not have a health care provider
Help you recognize that a decision needs to be made?	0	0	0	0	0	0	0
Prepare you to make a better decision?	0	0	0	0	0	0	0
Help you think about the pros and cons of each option?	0	0	0	0	0	0	0
Help you think about which pros and cons are most important?	0	0	0	0	0	0	0
Help you know that the decision depends on what matters most to you?	0	0	0	0	0	0	0
Help you organize your own thoughts about the decision?	0	0	0	0	0	0	0
Help you think about how involved you want to be in this decision?	0	0	0	0	0	0	0
Help you identify questions you want to ask your health care provider?	0	0	0	0	0	0	0
Prepare you to talk to your health care provider about what matters most to you?	0	0	0	0	0	0	0
Prepare you for a follow-up visit with your health care provider?	0	0	0	0	0	0	0
		Back	Next				

Section 6: Exposure to Assigned Material [ASK ALL] EXP2INT. Had you seen or read the information on prostate cancer screening assigned to you before participating in this study? 01 Yes 02 No Progress 61% Had you seen or read the information on prostate cancer screening assigned to you before participating in this study? Yes No No

[ASK ALL] EXP2INTb. How much of the information on prostate cancer screening assigned to you did you review? O1 All of it O2 Some of it O3 None (please explain): [TEXT BOX] (skip to Section 8, Contamination) English ▼ Progress 64% How much of the information on prostate cancer screening assigned to you did you review? ○ All of it ○ Some of it ○ None (please explain)

If you have any questions about the study, please email our survey coordinator at danielle.nielsen@icf.com.

Section 7: Help Needed to Review Assigned Materials

Section 7: Help Needed	i to Review ASS	igned Materials	
[ASK IF EXP2INTb=01,02]			
HELPREV1.			
Did you ask someone to help you you?	in reviewing the infor	mation on prostate cancer	screening assigned to
01 Yes			
02 No			
			English 🗸
Progress		67%	
Did you ask someone to h screening assigned to you	• •	g the information on p	rostate cancer
○ Yes			
○ No			
	Back	Next	

[ASK IF HELPREV1=01]					
HELPREV2.					
How much help did yo	ou need?				
01 A lot of help					
02 Some help					
03 A little help					
04 No help					
					English 🗸
	Progress			70%	
		_			
How much help	o did you need	l?			
O A lot of help					
Some help					
○ A little help					
O No help					
		Back	Next		
	If you have any que		udy, please email ou e <u>lsen@icf.com</u> .	r survey coordinator at	

[ASK IF HELPREV1=01]				
HELPREV3.				
What kind of help did you need? Check	all that appl	у.		
01 Help to use the computer				
02 Help to read the information				
03 Help to understand the information				
04 Other, specify [TEXT BOX]				
				English 🗸
Progress			73%	
What kind of help did you nee	d? Check al	l that apply.		
☐ Help to use the computer				
☐ Help to read the information				
☐ Help to understand the inform	nation			
☐ Other, specify	riderori			
- Other, specify				
	Back	Next		
	Buon	Noxt		
If you have any questi	ons about the stu	dv. please email our s	survey coordinator at	
in you have any queen		lsen@icf.com.		

Section 8: Contamination

[ASK ALL]

CONTAM1

While participating in this study, have you reviewed any informational materials about prostate cancer screening other than those provided by the study team?

01 Yes

02

2 No					
					English 🗸
	Progress			76%	
While participat	•		•		
○ Yes					
○ No					
		Back	Next		
	If you have any ques		dy, please email our surv sen@icf.com.	ey coordinator at	

[ASK If CONTAM1=01]			
CONTAM2			
What informational materials about [TEXT BOX]	prostate cancer screeni	ng did you review?	
Progress		79%	English 🗸
What informational materia	als about prostate ca	ncer screening did yo	u review?
	Back	xt	
If you have any qu	uestions about the study, please ε <u>danielle.nielsen@icf.co</u>		

Section 9: Gift Code

[ASK ALL] [REQUIRED]

J1int. In appreciation for the time you have spent answering our questions, we would like to give you a \$25 Amazon gift code. Would you like the gift code?

01 02	Yes No				
					English 🗸
		Progress		82%	

In appreciation for the time you have spent answering our questions, we would like to give you a \$25 Amazon gift code. Would you like the gift code?

O Yes

 \circ No



[ASK if J1int=01]

J1.

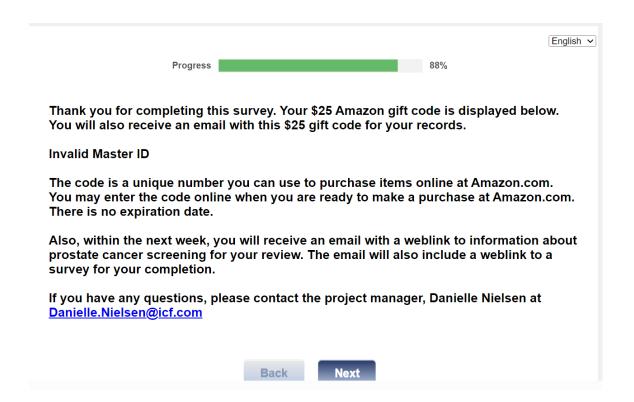
Thank you for completing this survey. Your \$25 Amazon gift code is displayed below. You will also receive an email with this gift code for your records.

<insert GCODE>

The code is a unique number you can use to purchase items online at Amazon.com. You may enter the code online when you are ready to make a purchase at Amazon.com. There is no expiration date.

Also, within the next week, you will receive an email with a weblink to information about prostate cancer screening for your review. The email will also include a weblink to a survey for your completion.

If you have any questions, please contact the project manager, Danielle Nielsen at Danielle.Nielsen@icf.com.



Send <gcode email> to <Email1>

To receive your code via email, please enter your email address here:

[TextBox]	
En	ıglish 🗸
Progress 91%	
To receive your code via email, please enter your email address here:	
Back Next	
If you have any questions about the study, please email our survey coordinator at danielle.nielsen@icf.com .	
Hello!	
Thank you for completing the first survey of the CDC Prostate Cancer Evaluation Study! Here is your Amazon gift code for \$25:	
<gcode></gcode>	

HOW TO USE YOUR AMAZON GIFT CODE

The code is a unique number you can use to purchase items online at amazon.com. You may enter the code online when you are ready to make a purchase at amazon.com. There is no expiration date.

Save this code in a safe space until you are ready to use it. Some ideas to keep it safe are:

- 1. Write it down on a sheet of paper and keep it in a safe and hidden location.
- 2. Take a photo of the code with your phone.
- 3. Save the code in your Amazon.com account. If you have an amazon.com account, you can save your code in your account until you are ready to spend it.

Type in this link: https://www.amazon.com/gc/redeem/

Or, follow these instructions:

- 1. Go to amazon.com
- 2. In the blue banner, click on "Gift Cards & Registry"
- 3. On the gift cards page, choose "redeem a gift card"
- 4. Type or copy/paste the gift code into the "Enter claim code" field

Thank you once again for your time and feedback!

regards,

Debbie Krugipudi

CDC Prostate Evaluation Study Support Staff

For Nathan arm participants who reviewed Nathan prior to this survey (i.e., Nathan arm participants who respond "All of it" or "Some of it" to the question "How much of the information on prostate cancer screening assigned to you did you review?"):

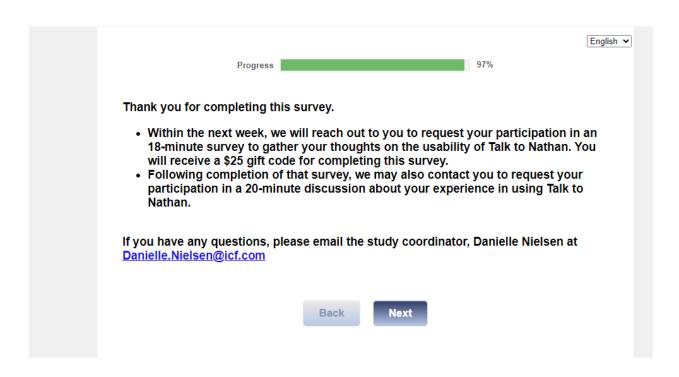
[ASK IF EDUMAT=1]

J1NATHAN

Thank you for completing this survey.

- Within the next week, we will reach out to you to request your participation in an 18-minute survey to gather your thoughts on the usability of Talk to Nathan. You will receive a \$25 gift code for completing this survey.
- Following completion of that survey, we may also contact you to request your participation in a 20-minute discussion about your experience in using Talk to Nathan.

If you have any questions, please contact the project manager, Danielle Nielsen at Danielle.Nielsen@icf.com



For other arms and for participants in the Nathan arm who did not review Nathan prior to this survey (i.e., Nathan arm participants who respond "None" to the question "How much of the information on prostate cancer screening assigned to you did you review?"):

[ASK IF EDUMAT=2]

J1W2

Thank you for completing this survey.

Within the next week, you will receive an email with a weblink to the final survey for this study. This survey should be completed after your visit with your health care provider on [date].

If you have any questions, please contact the project manager, Danielle Nielsen at Danielle.Nielsen@icf.com

Progress 100%

Thank you for completing this survey.

Within the next week, you will receive an email with a weblink to the final survey for this study. This survey should be completed after your visit with your health care provider on 22nd August 2024.

If you have any questions, please contact the project manager, Danielle Nielsen at Danielle.Nielsen@icf.com



If you have any questions about the study, please email our survey coordinator at danielle.nielsen@icf.com.

[ASK ALL]

CLOSE.

Thank you for completing this survey.

If you have additional questions, please contact our study coordinator at Danielle.Nielsen@icf.com.

Thank you for completing this survey. If you have additional questions about the study, please email our study coordinator at danielle.nielsen@icf.com