**2026 NSSRN Content Cognitive Interviewing Screener**

The US Census Bureau is looking for participants to help test questions for an upcoming survey of nurses in the United States. Thank you for your interest in this research opportunity. Eligible participants who complete a 60-minute research session will receive a $100 stipend. In order to establish your eligibility to participate, we need to ask you a few simple questions.

Eligibility Questions

E1. Are you employed by the federal government? If you are a contractor, mark "No".

Yes

No

E1a. (If yes) Since you are a federal employee, we are not able to pay you the $100 stipend. However, you may still be eligible for the study. Are you still interested in participating?

Yes

No ->*Ineligible*

E2. Have you participated in any other research studies with the U.S. Census Bureau in the past year?

Yes ->*Ineligible*

No

E3. This research study will take place remotely via video chat. You and the researcher will use a video chat application to talk and screen share.  Do you have a desktop, laptop, or tablet capable of using video chat applications? We do not recommend using a phone to screen share.

Yes

No ->*Ineligible*

Content-specific Screening Questions

Q1. Do you have an ACTIVE LICENSE to practice as a Registered Nurse (RN) or Advanced Practice Registered Nurse (APRN) in the U.S.??

Yes, I am licensed as an RN, but not an APRN.

Yes, I am licensed as both an RN and an APRN

No 🡪 Ineligible

Q1a. (IF “Yes” to Q1) Are you currently working as a RN or APRN?

Yes, Registered Nurse – *Skip Q2*

Yes, APRN

No – *Skip Q2*

Q2. (IF “Yes, APRN” to Q1a) During the past 12 months, did you have FULL prescriptive authority?

 Yes

 No

Q3. Do you have any active nursing certifications as a Nurse Practitioner, Clinical Nurse Specialist, Nurse-Midwife, or Certified Registered Nurse Anesthetist?

Yes, Nurse Practitioner

Yes, Clinical Nurse Specialist

Yes, Nurse-Midwife

Yes, Certified Registered Nurse Anesthetist

No

Q4. Have you completed an RN transition-to-practice program?

Yes

No

Not sure

Q5. During the past 12 months have you precepted any RN or APRN students?

Yes

No

Q6. Have you ever served on a peer review panel as a clinically practicing nurse or advanced practice registered nurse?

Yes

No

Demographics

[IF RESPONDENT IS ELIGIBLE]

Demo 1. What is your name?

First and Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Demo 2. What is your gender?

Female

Male

Transgender, non-binary, or another gender

Prefer not to answer

Demo 3. What is your current age?

Age \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Demo 4. What is your race and/or ethnicity?

*Select all that apply.*

American Indian or Alaska Native

Asian

Black or African American

Hispanic or Latino

Middle Eastern or North African

Native Hawaiian or Pacific Islander

White

Demo 5. In what city, state, and ZIP code do you currently live?

 City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Demo 6. What is your time zone?

Eastern Standard Time

Central Standard Time

Mountain Standard Time

Pacific Standard Time

Alaska Standard Time

Hawaii-Aleutian Standard Time

Demo 7. How did you hear about this research opportunity? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Demo 8. What is your telephone number? *We may use it to contact you if you are selected to participate in a research session.*

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Demo 9. What is your email address? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for your time.
You may be selected to participate in our study. If you are selected, our staff will contact you to schedule a time that works best for you.

END SCREENER

[IF RESPONDENT IS INELIGIBLE]

Unfortunately, you are not eligible to participate in this research project. Thank you for taking the time to complete this screener survey.