

CATI Introduction

ENTER STUDY ID#:

<The following will be loaded from the tracking system:

- ◆ MOTHER’S NAME
- ◆ MOTHER’S ADDRESS (street & mailing)
- ◆ MOTHER’S PHONE NUMBER (X3)
- ◆ DATE OF BIRTH (AGE)

- ◆ FATHER’S NAME
- ◆ FATHER’S ADDRESS (street & mailing)
- ◆ FATHER’S PHONE NUMBER (X3)

- ◆ CONTACT’S NAME
- ◆ CONTACT’S ADDRESS (street & mailing)
- ◆ CONTACT’S PHONE NUMBER (X3)

- ◆ 1ST CHILD’S FIRST NAME
- ◆ 1ST CHILD’S DATE OF BIRTH (AGE)

- ◆ 2ND CHILD’S FIRST NAME
- ◆ 2ND CHILD’S DATE OF BIRTH (AGE)>

[ENTER ‘1’ TO CONTINUE]

CONTACTINFO. [ENTER TELEPHONE CONTACT OUTCOME.]

	LIVE PERSON ANSWERS
	PHONE [INT3] 1
	PHONE NOT ANSWERED
	BY LIVE PERSON..... [NA1] 2
	SET CALL BACK [CB1]..... 3
	CALL IN [PARTINFO]... 4
	SUPERVISOR REVIEW 5
	FALSE ENTRY 6

<IF CONTACTINFO = PHONE NOT ANSWERED BY LIVE PERSON>

NA1. [WHAT WAS THE OUTCOME OF THIS CALL?]	NO ANSWER 1
	BUSY 2
	FAX/MODEM 3
	TEMPORARILY NON-WORKING # 4
	FAST BUSY 5
	TEMPORARILY DISCONNECTED 6
	BAD CONNECTION 7
	ANSWERING MACHINE, NO MSG LEFT 8
	ANSWERING MACHINE, MSG LEFT..... [NA2] 9
	VOICE MAIL/BUSINESS AM, NO MSG LEFT 10
	VOICE MAIL/BUSINESS AM, MSG LEFT..... [NA2] 11
	PERMANENTLY NON-WORKING # 12
	NON-PUBLISHED NUMBER 13
	PERMANENTLY DISCONNECTED 14

INT1. Hello, may I speak with [*RESPONDENT FIRST/ LAST NAME*]?
[INTERVIEWER, READ IF NEEDED: I'm calling from CODA about a letter we sent to you concerning one of our health studies.]

YES 1
R NOT AVAILABLE..... [CB1]2
WRONG NUMBER [WN1]3
REFUSAL BY R..... [RF1]4
REFUSAL BY OTHER... [RB1]5

INT1a. WHO IS ON THE PHONE, RESPONDENT OR OTHER?

RESPONDENT..... 1
OTHER [CB1]2

INT2. This is [*INTERVIEWER NAME*] calling about a follow-up study to the North Carolina Infant Feeding Study that you participated in many years ago. We sent a letter describing the study. Did you receive the letter?

YES [INT3]..... 1
NO..... 2

<IF INT2 = 2>
Let me read the letter to you now.

<AFTER LETTER TEXT IS READ TO R, CATI SKIPS SCRIPT AND GOES TO INT3.>

<RESPONDENT RECEIVED LETTER>

As we said in the letter, we would like to ask you to participate in a follow-up study focusing on your own health and experiences with menopause. The study will involve a telephone interview that takes about 30 minutes or less, and for some women, we will also request a blood sample. If you choose to participate in the telephone interview, you will receive a pre-paid 60 minute phone card in appreciation of your time.

INT3. Do you have any questions?

YES 1
NO..... 2

[IF YES, REFER TO Q AND A SHEET AND CONTINUE WITH SCRIPT.]

In order to do the best job we can in answering our research questions, we will need to use some information and data we obtained in the original study about the birth of your child [*CHILD'S NAME*], born in [*YEAR*]. If you prefer that we not use information you have previously provided then we will be unable to enroll you into this follow up study at this time.

INT4. Do we have your permission to use your data from the original study?

YES [INT5] 1
NO..... [TERMINELIGIBLE] 2

INT5. We'd like to complete the interview now. Is this a convenient time?

YES, COMPLETE INTERVIEW 1
NO, CALL BACK ... [CB1] 2

Thank you for agreeing to take part in this follow-up study. I want to remind you before we begin that your participation is completely voluntary and all the information collected will be kept private and confidential, to the extent permitted by law. Your name does not go on this questionnaire, only an ID number. If for any reason you would rather not answer a question, we can go to the next. Also, you may choose not to participate in this study at any time.

First, I'd like to check the information we already have.

INT6a. Could you please spell your first, middle and last name for me?

I'd also like to verify your address, beginning with your first name, it is...

[IS THIS CORRECT?]

YES 1
 NO..... [UP1] 2

<CATI WILL CALCULATE CURRENT AGE.>

INT7. You were born on [DATE OF BIRTH] and your age is now [CURRENT AGE]. Is that correct?

YES 1
 NO..... [INSTRUCTION] 2

[IF NO: CHECK DOB IN PARTICIPANT INFO SCREEN. IF INFO MATCHES, ENTER NO.]

I'm sorry. I may have the wrong information. I will check our records and give you a call back. Thank you for your time.

In this interview, we'll be discussing a number of topics including your medical, pregnancy, menstrual and menopausal history and information on smoking, exercise and other habits that could affect your health or menopause. We understand that some things we ask may be difficult to remember. The dates we ask for in many of the questions are important to help us assess changes in your health over the past 20 years. So please take the time you need to check your records or give us your best estimate of any dates or ages that we will ask about. Thank you for your patience with this.

INT8. Do you have any questions before we begin?

YES 1
 NO..... 2

[IF YES, REFER TO Q AND A SHEET AND CONTINUE WITH SCRIPT]

CALLBACK SCREEN

CB1. When would be a better time for us to call? BEST TIME 1
APPOINTMENT[CB5] 2

[INTERVIEWER: PLEASE INDICATE BEST TIME OR APPOINTMENT.]

<IF CB1 = BEST TIME>

CB2. Would it be better to call back during the week DURING THE WEEK..... 1
or on the weekend? ON THE WEEKEND 2

CB3. What time of day? MORNINGS 1
AFTERNOONS 2
EVENINGS..... 3

[VERIFY CALLBACK TIME:]

Great. An interviewer will try to reach [you/her] [weekday/weekend] [mornings/afternoons/evenings].
Thank you very much for your time.

CB4. [INTERVIEWER: WHO SET THIS BEST TIME?] RESPONDENT
(HARD CALLBACK) 1
OTHER HOUSEHOLD
AND/OR FAMILY MEMBER
(SOFT CALLBACK)..... 2
RANDOM CB SET BY
INTERVIEWER OR
RESPONDENT..... 3

[ENTER ANY ADDITIONAL COMMENTS. IF NO COMMENTS, ENTER : ‘NO COMMENTS’]

CB5. What date would like for us to call back? Date: ___ / ___ / ___
[ENTER DATE AS MM/DD/YYYY]

CB6. What time? Time: ___ : ___
[ENTER TIME AS HH:MM A/P]

[VERIFY APPOINTMENT:]

Great. An interviewer will call [you/her] back on [APPT. DATE, AND TIME]. Thank you very much for your time.

CB7. [INTERVIEWER: WHO SET THIS APPOINTMENT?] RESPONDENT
(HARD CALLBACK) 1
OTHER HOUSEHOLD
AND/OR FAMILY MEMBER
(SOFT CALLBACK)..... 2
RANDOM CB SET BY
INTERVIEWER OR
RESPONDENT..... 3

[ENTER ANY ADDITIONAL COMMENTS. IF NO COMMENTS, ENTER: ‘NO COMMENTS’]

PHONE # VERIFICATION SCREEN

WN1. Is this [(xxx) yyy – zzzz]? YES 1
 NO.....[WN4] 2

WN2. Our records show that [NAME] lives at this number. Is this correct? YES[INT1] 1
 NO..... 2

WN3. Do you know how to contact [NAME]? YES[INSTRUCTION] 1
 NO.....[WN6] 2
 REFUSED TO GIVE CONTACT
 INFO[WN6] 7

<IF WN3 = 1>
 [GO TO PARTICIPANT INFORMATION MODULE AND CORRECT HOME TELEPHONE NUMBER, INDICATE WHO PROVIDED INFORMATION IN COMMENTS.]

WNTX. Thank you for your help.

WN4. I apologize for the inconvenience. I do need to redial this number, in order to determine the source of the problem. If your phone should ring, please answer it. Thank you. [HANG UP AND REDIAL NUMBER] SAME[WN6] 1
 DIFFERENT[WN5] 2

WN5. Have I reached [(xxx) yyy – zzzz]? YES[INT1] 1
 NO.....[WN6] 2

<IF STILL WRONG NUMBER, GO TO WN6>

WN6. I'm sorry to have disturbed you. Thanks (again) for your help. Goodbye.

UPDATE SCREEN

- | | |
|--|---|
| <p>UP1. [PLEASE INDICATE WHAT YOU WANT TO UPDATE.]
[MARK ALL THAT APPLY.]</p> | <p>UPDATE MOTHER
NAME..... [UN1]1
UPDATE MOTHER
ADDRESS [VAINTRO]2
UPDATE MOTHER
HOME PHONE....[VPINTRO].....3
UPDATE MOTHER
WORK PHONE ...[VPINTRO].....4
UPDATE MOTHER
OTHER PHONE..[VPINTRO].....5</p> |
| <p>UN1. [PLEASE INDICATE WHICH PART OF
THE NAME NEEDS CORRECTIONS.]
[MARK ALL THAT APPLY.]</p> | <p>YES, ALL CORRECT1
INCORRECT FIRST
NAME..... [UN2]2
INCORRECT MIDDLE
NAME..... [UN2]3
INCORRECT LAST
NAME..... [UN2]4
INCORRECT MAIDEN
NAME..... [UN2]5</p> |
| <p>UN2. [ENTER CORRECT FIRST/MIDDLE/
LAST/MAIDEN NAME]</p> | |
| <p>VAINTRO. I have recorded that [your/her] address is:
<ADDRESS FROM TRACKING>
Is this correct?
[MARK ALL THAT APPLY]</p> | <p>YES, CORRECT.....1
INCORRECT STREET [VA1]2
INCORRECT CITY..... [VA1]3
INCORRECT STATE..... [VA1]4
INCORRECT ZIP CODE ... [VA1]5</p> |
| <p>VA1. [ENTER CORRECT FIRST ADDRESS
LINE/CITY/STATE/ZIPCODE]</p> | |
| <p>VPINTRO. I have recorded that [your/her] [home/work/
other] telephone number is:
<PHONE NUMBERS FROM TRACKING>
Is this correct?
[MARK ALL THAT APPLY]</p> | <p>YES, CORRECT.....1
AREA CODE NEEDS
CORRECTION[VP1].....2
SEVEN DIGIT NUMBER
NEEDS CORRECTION ...[VP1].....3
AREA CODE AND SEVEN
DIGIT NUMBER NEED
CORRECTION[VP1].....4</p> |
| <p>VP1. [ENTER CORRECT AREA CODE /
SEVEN DIGIT NUMBER]</p> | |

REFUSAL SCREEN

RF1. May we call you back after a month or so to see if you'd like to participate then? YES [CB1] 1
NO..... [COMMENTS]2

[ENTER ANY ADDITIONAL COMMENTS AND GO TO TERMREFUSAL SCREEN]

REFUSAL BY OTHER SCREEN

RB1. I'm sorry, I am required to accept a refusal to participate from her alone. May I please speak with Ms. [LAST NAME] directly? YES, R COMES TO PHONE [INT1] 1
YES, R NOT AVAILABLE..... [CB1]2
NO, OTHER H/U....[COMMENTS]3

[ENTER ANY ADDITIONAL COMMENTS. IF NO COMMENTS, ENTER: NO COMMENTS.]

TERMREFUSAL SCREEN

Thank you very much for your time.

TERMINELIGIBLE SCREEN

We will not be able to enroll you into this follow-up study at this time. You may be contacted in the future for additional follow-up studies. Thank you for your time.

FORMER REFUSAL/UNDECIDED

INT2V2. We called you on [DATE] to do an interview. Have you had some time to think about it? Would you be interested in participating at this time? YES[INT2] 1
 NO..... 2

ANSWERING MACHINE

NA2. Hello, this is [INTERVIEWER NAME] and I am calling from CODA about a letter we sent to Ms. [RESPONDENT FIRST/LAST NAME] about one of our health studies. Another staff member or I will call you back in the next few days. If you would like to call and talk to the Call Center Supervisor for this study, you can call Ms. Lynda Tatum at 1-800-948-7552, extension 342. Thank you.

BREAK-OFF

BO1. [ENTER REASON FOR BREAK-OFF.] REFUSE TO CONTINUE ...[TERMREFUSAL]... 1
 CALL BACK TO COMPLETE INTERVIEW[CB1] 2
 DECEASED 3

PREVIOUS BREAK-OFF

INT2V3. This is [INTERVIEWER NAME] with CODA. We would like to continue the interview we started on [DATE]. Is this a good time? YES[INSTRUCTION] 1
 NO..... [CB1]..... 2

[IF YES, GO TO FIRST QUESTION, INT1, AND HIT THE “END KEY” TO GO TO THE LAST QUESTION ANSWERED.]

Form 01, Version 01

**ORGANOCHLORINE EXPOSURE AND
AGE AT NATURAL MENOPAUSE
CATI QUESTIONNAIRE**

Public reporting burden for this collection of information is estimated to average 30 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: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0517). Do not return the completed form to this address.