World Trade Center Registry Questionnaire

Introduction

[IF SPAWN AND RESPONDENT IS THE SAME AS PREVIOUS RESPONDENT, SKIP TO I8.]

INCOMING CALL

[IF INCOMING CALL ONLY. ELSE SKIP TO LANG1.]

Hello. Thank you for calling the World Trade Center Health Registry enrollment hotline. My name is [YOUR FULL NAME]. May I please have your phone number?

(This will help me find your case if you are in our database of people to contact.)

(Please hold while the system takes me to the last question you answered during your previous session.)

DO NOT ENTER DASHES. NUMBERS ONLY.

HOME PHONE: ____________

LANG1

IN WHAT LANGUAGE SHOULD THE INTERVIEW BE CONDUCTED?

NOTE: WHEN USING LANGUAGE LINE SERVICES, PLEASE SELECT OTHER (LANGUAGE LINE) OPTION AND NOT ENGLISH.

1 ENGLISH
2 SPANISH
3 MANDARIN
4 CANTONESE
5 OTHER (LANGUAGE LINE)

LANG2

[IF LANG1=5] ATTEMPT TO KEEP R ON LINE AS BEST YOU CAN. DIAL 1-877-261-6608 TO LANGUAGE LINE. PRESS 2 FOR "ALL OTHER LANGUAGES." SPEAK THE LANGUAGE THE RESPONDENT NEEDS, OR PRESS 0 AS DIRECTED TO GET HELP FROM LANGUAGE LINE. WHEN ASKED FOR THE CLIENT ID NUMBER, ENTER 717517. THEN ENTER YOUR PERSONAL ID NUMBER.

LANG3

[IF LANG1=5]

I have just connected (NAME OF TRANSLATOR) to our call. (He/She) works for a service called Language Line and will help us by translating my questions and your answers. I will provide more information about the Registry and answer
your questions before we begin. I also want to tell you that the translator is required to keep private any information about you that (he/she) hears as part of this interview. Let’s get started.

NOTE: IF THE LANGUAGE LINE SPECIALIST IDENTIFIES THE LANGUAGE AS SPANISH, MANDARIN, OR CANTONESE, POLITELY INFORM THE TRANSLATOR THAT ONE OF OUR BILINGUAL INTERVIEWERS WILL CALL THEM BACK AT A LATER TIME. DO NOT USE LANGUAGE LINE SERVICES FOR MANDARIN, CANTONESE, OR SPANISH INTERVIEWS.

ENTER LANGUAGE OF INTERVIEW.

LANGUAGE: _____________________

[CONTINUE WITH O1 IF OUTBOUND CALL. ELSE SKIP TO I3.]

O1

[ASK IF CATI FRONT END DETERMINED SUBJECT IS DECEASED. ELSE SKIP TO O2.]

I’m very sorry for your loss. I’m calling on behalf of the New York City Department of Health and Mental Hygiene. I’m calling to talk to you about a research study called the World Trade Center Health Registry. I work for RTI, a company hired to help with the study. The Registry is a list of people who were affected by the disaster on September 11th, 2001. About 200,000 people may join the list. We plan to maintain the study data for up to 20 years.

I’m calling because [SUBJECT] was identified on a list of rescue and recovery workers, schools, businesses, and residences in the World Trade Center area. [SUBJECT] may have been at the disaster, or lived, worked, or went to school in the area at the time of the disaster. (He/She) may have also helped with the clean-up. [SUBJECT] may still be eligible for the Registry. We want to be sure to collect information about people who were at or near the disaster but who are now deceased, because it’s important to gather information on everyone who was exposed in order to have an accurate and complete registry.

[SKIP TO I8.]

O2

[ASK IF SUBJECT NOT DECEASED (PROXY OR SUBJECT INTERVIEW).]

I’m calling on behalf of the New York City Department of Health and Mental Hygiene. I’m calling to talk to you about a research study called the World Trade Center Health Registry. I work for RTI, a company hired to help with the study. The Registry is a list of people who were affected by the disaster on September 11th, 2001. They will be interviewed from time to time so that we can learn if there are any health problems related to the disaster. About 200,000 people may join the list. We plan to maintain the study data for up to 20 years.
We are calling [you/SUBJECT] because [you/SUBJECT] may have been at the disaster or lived, worked, or went to school in the area at the time of the disaster. You may have also helped with the clean-up. We recently sent a letter telling you about the Registry.

[SKIP TO I8.]

I3
Are you calling to register yourself or someone else?

1 SELF
2 SOMEONE ELSE
3 BOTH

I5
[ASK IF I3=3]
Let me start with you and then we’ll go back to the other people you are calling in for.

I6
[ASK IF I2=2]
I am authorized to collect information from parents or legal guardians of registrants under 18, and from appropriate proxies if the registrant is deceased or otherwise physically or mentally incapable of completing the interview. Does the person you are calling in for meet these criteria?

NOTE: PROXY INTERVIEWS ARE ONLY FOR SUBJECTS WHO ARE DECEASED, UNDER 18, MENTALLY INCOMPETENT, OR SERIOUSLY PHYSICALLY DISABLED.

1 YES
2 NO
DK/REF

I7
[ASK IF I6=2 OR DK/REF]
I’m sorry, I won’t be able to complete the interview with you then. If that person will call us at 1-866-NYC-WTCR, we will happy to register him/her.

Thank you for your time.

[CLOSE OUT INTERVIEW.]
Proxy

I9

[IF I3=1 OR 3 SKIP TO E1a.]

IS THIS A PROXY INTERVIEW? PROBE IF NECESSARY.

1 YES
2 NO

I10

[ASK IF I9=1]

ASK ONLY IF NECESSARY: We want to be sure to include people who may be eligible but who are now deceased. Whether or not the person is still living will affect the kinds of questions we ask. Is this person deceased?

1 YES
2 NO
DK/REF

E1a

[IF PRELOAD CONTAINS NAME]

In order to determine if [you are/SUBJECT is] eligible to be part of the World Trade Center Registry, I need to ask a few questions. I have [your/SUBJECT’s] full name recorded as:

[FILL: PREFIX FIRST NAME MIDDLE INITIAL LAST NAME SUFFIX]

Is this correct?

CONFIRM SPELLING.

1 YES
2 NO
DK/REF

E1b

[IF NO PRELOADED NAME OR E1a=2 OR DK/REF]

Please tell me [your/SUBJECT’s] full name.
E1c.

[IF E1b NE DK AND NE REF, SKIP TO P1.]

I’m sorry, but without your first and last name I cannot enroll you in the World Trade Center Health Registry. Thank you for your time.

CLOSE OUT INTERVIEW. SKIP TO CS6.

P1

[IF SPAWN AND RESPONDENT IS SAME AS PREVIOUS RESPONDENT, SKIP TO P5. ELSE IF NOT PROXY SKIP TO P5.]

The first thing I need to do is make sure I am speaking with the person who is best able to provide information about [SUBJECT’s] health.

Are you the person who is best able to answer questions on behalf of [SUBJECT’s] experiences on and after September 11th, 2001?

1 YES [SKIP TO P5]
2 NO [SKIP TO P4]
DK/REF

P2

[ASK IF P1=2]

In order to determine [SUBJECT’s] eligibility status for the World Trade Center Health Registry, I must speak to the person best able to answer questions on behalf of [SUBJECT’s] experiences on and after September 11th, 2001. This person must be 18 or older. Is that person available now?

1 YES [CONTINUE TO P3.]
2 NO [SKIP TO P4.]
DK/REF [SKIP TO P4.]

P3

WAIT UNTIL BEST PROXY GETS ON LINE. Hello, this is (YOUR FULL NAME). I work on a research study called the World Trade Center Health Registry, on behalf of the New York City Department of Mental Health and Hygiene. I work for RTI, a company hired to help with the study. The Registry is a list of people who were affected by the disaster on September 11th, 2001. They will be interviewed from time to time so that we can learn if there are any health problems related to the disaster. About 200,000 people may join the list. We plan to maintain the study data for up to 20 years.

[SUBJECT] may have been at the disaster or lived, worked, or went to school in the area at the time of the disaster. [SUBJECT] may have also helped with the clean-up. (IF OUTBOUND, READ: We recently sent a letter to your home telling you about the Registry.)
To determine if [SUBJECT] is eligible for the Registry, I need to ask you just a few questions. Responding to these questions is voluntary; you may refuse to answer any of these questions, if you like. All of your answers will be kept private. If you decide not to enroll in the Registry we will not keep the information you provide about [SUBJECT]. Your name will not be connected with your answers about [SUBJECT] in any way.

[SKIP TO P5.]

P4

[IF P2=2]

To continue, I will need to speak to the adult best able to provide information about [SUBJECT’s] experiences on and after September 11th, 2001. I’d like to call back at a later time. What is the name of the person I need to speak to?

FIRST NAME    LAST NAME

[SKIP TO PHON.]

P5

What [is/was] [your/SUBJECT’s] date of birth?

MM/DD/YYYY    [SKIP TO P6]
DK/REF

[RANGE CHECK: DATE OF BIRTH CANNOT BE AFTER TODAY’S DATE.]

P5b

[SKIP IF DECEASED.]

What is [your/SUBJECT’s] current age?

AGE: ______    [RANGE: 0 – 118]
DK/REF

P5c

[ASK IF PROXY=1 AND P5=DK/REF AND P5b=DK/REF.]

Was [SUBJECT] born before September 11th, 2001?

1 YES    [CONTINUE TO P5d]
2 NO     [SKIP TO E25]
DK/REF    [SKIP TO E25]

P5d

[ASK IF P5b=DK/REF.]

[Are you/Is SUBJECT] 18 or older?
1 YES [SKIP TO E2]
2 NO [SKIP TO P8]
DK/REF [SKIP TO P8]

P6

[ASK IF DECEASED]

On what date did [SUBJECT] pass away?

MM/DD/YYYY
DK/REF

[RANGE CHECK: DATE ENTERED CANNOT BE AFTER TODAY’S DATE.]

[CONSISTENCY CHECK. IF DATE ENTERED IS BEFORE DOB IN P5, DISPLAY CONSISTENCY CHECK.

I have recorded that [SUBJECT] died [date_deceased] but was not born until [dob]. Which is correct?

1 [date_deceased]
2 [dob]

IF ANSWER=1, RETURN TO P5. IF ANSWER=2, RETURN TO P6. IF DATE IS BEFORE 9/12 SKIP TO E24. IF DATE IS 9/12 OR LATER, SKIP TO E2.]

P7

[SKIP IF DECEASED]

I have recorded that [you are/SUBJECT is] [FILL AGE] years old. Is this correct?

1 YES
2 NO

[CONSISTENCY CHECK: IF P7=2, DISPLAY CONSISTENCY CHECK.

I have recorded [your/SUBJECT’s] birth date as [dob]. Is this correct?

1 YES
2 NO

IF ANSWER=1, ACCEPT DOB AND USE CALCULATED AGE AS AGE GIVEN. IF ANSWER=2, GO BACK TO DOB. IF CANNOT RESOLVE AGE AND BIRTH DATE, USE AGE CALCULATED FROM BIRTH DATE.]

P8

[ASK IF SUBJECT ON PHONE AND AGE < 18. ELSE SKIP TO E2.]

In order to determine your eligibility status for the World Trade Center Health Registry, I must speak to a parent or guardian. May I speak to your parent or guardian now?
1 YES [CONTINUE TO P9.]
2 NO [SKIP TO P10.]
DK/REF [SKIP TO P10.]

P9

WAIT UNTIL PARENT OR GUARDIAN GETS ON LINE. Thank you for your assistance. My name is (YOUR FULL NAME) and I work on the World Trade Center Health Registry research study on behalf of the New York City Department of Health and Mental Hygiene. The Registry is a list of people who were affected by the disaster on September 11, 2001. They will be interviewed from time to time so that we can learn if there are any health problems related to the disaster. About 200,000 people may join the list. We plan to maintain the study data for up to 20 years.

[SUBJECT] may have been at the disaster or lived, worked, or went to school in the area at the time of the disaster. [SUBJECT] may have also helped with the clean-up. (IF OUTBOUND, READ: We recently sent a letter to your home telling you about the Registry.)

To determine if [SUBJECT] is eligible for the Registry, I need to ask you just a few questions. Responding to these questions is voluntary; you may refuse to answer any of these questions, if you like. All of your answers will be kept private. If you decide not to enroll [SUBJECT] in the Registry we will not keep your information. Your name will not be connectes with your answers about [SUBJECT] in any way. Let’s get started.

[SKIP TO E2]

P10

I will need to speak to a parent or guardian to continue. I’d like to call back at a later time. Please tell me your parent or guardian’s name.

FIRST NAME     LAST NAME

[SKIP TO PHON. USE “YOU” FILL.]

Eligibility

E2

[IF PROXY]

Please tell me your full name. (I need your name in case, for some reason, this interview gets interrupted and I need to call you back.)

PREFIX   FIRST NAME   MIDDLE INITIAL   LAST NAME   SUFFIX

E3

ASK ONLY IF NECESSARY. What [is/was] [your/SUBJECT’s] sex?

1  MALE
2  FEMALE

[CONSISTENCY CHECK: IF PREFIX=MS, OR MRS, AND GENDER=MALE OR IF PREFIX=MR AND GENDER=FEMALE DISPLAY CONSISTENCY CHECK.

INTERVIEWER: YOU HAVE RECORDED THAT SUBJECT IS [prefix] BUT GENDER IS [gender]. WHICH IS CORRECT?

1  PREFIX
2  GENDER

IF ANSWER=1, RETURN TO E3. IF ANSWER=2 RETURN TO E2.]

E4

[IF SPAWN AND PROXY IS SAME AS PREVIOUS RESPONDENT, SKIP TO E15.]

What was the zip code for [your/subject’s] primary residence on September 11th, 2001. (By primary residence, I mean the place where a person lived and slept most of the time. This is not necessarily the same as your voting residence or legal residence.)

ZIP CODE _____

[IF ZIP CODE =
10002
10004
10005
10006
10007
10013
10038
10045
10280
10282

SET RESIDENT = 1 AND SKIP TO E8.

IF ZIP CODE =
10008
10041
10043
10047
10048
10080
10081
10213
10242
10249
10256
10260
10265]
SET RESIDENT=1 AND SKIP TO E13.

IF ZIPCODE=DK OR REF, CONTINUE TO E5. ELSE SKIP TO E15.]

E5
Did [you/SUBJECT] live in New York City on September 11th, 2001?
1 YES [SKIP TO E13.]
2 NO
DK/REF

E6
What city and state did [you/SUBJECT] live in on September 11th, 2001?

[IF ANSWER IS REF and E5 = DK/REF, CONTINUE TO E7. ELSE SKIP TO E13.]

E7
Collecting [your/SUBJECT's] address information for September 11th, 2001 is very important to determining eligibility to the World Trade Center Health Registry. Address information may be used to understand the risks of exposure to smoke, dust, and debris on and after September 11th, 2001. Would you please reconsider providing us with that information?

1 YES [GO BACK TO E6]
2 NO [SKIP TO E15]

E8
What street did [you/SUBJECT] live on?

[DISPLAY DROP DOWN LIST WITH ELIGIBLE STREET NAMES. THE LAST RESPONSE OPTION IS “STREET NAME NOT ON LIST.”]
DK/REF

[IF E8=DK OR REF, SKIP TO E15. IF E8=STREET NAME NOT ON LIST SKIP TO E13. ELSE CONTINUE TO E9.]
E9
What was [your/SUBJECT’s] building number (or street address number)?

IF THE BUILDING NUMBER IS NOT ON THE LIST, SELECT “NUMBER NOT ON LIST” AND KEY IN THE NUMBER ON THE NEXT SCREEN.

[DROP DOWN LIST WITH ELIGIBLE STREET ADDRESSES (NUMBER, THEN STREET). THE LAST RESPONSE OPTION IS “NUMBER NOT ON LIST.”]

DK/REF

[IF E9=NUMBER NOT ON LIST, ASK E10. If E9=DK/REF SKIP TO E15.]

E10
What was [your/SUBJECT’s] building number (or street address number)?

BUILDING NUMBER: ________ [RANGE: 0 – 99999]

DK/REF

E11
What was [your/SUBJECT’s] apartment number?

IF THE APARTMENT NUMBER IS NOT ON THE LIST, SELECT “APT NUMBER NOT ON LIST” AND KEY IN THE NUMBER ON THE NEXT SCREEN.

[DROP DOWN LIST WITH ELIGIBLE APARTMENT NUMBERS. THE LAST RESPONSE OPTION IS “APARTMENT NUMBER NOT ON LIST.”]

DK/REF

[IF E11=APARTMENT NUMBER NOT ON LIST, ASK E12. If E11=DK/REF SKIP TO E14]

E12
What was [your/SUBJECT’s] apartment number?

APARTMENT NUMBER: ________ [RANGE: 0 – 99999]

[SKIP TO E14.]

E13
What was [your/SUBJECT’s] street address on September 11th, 2001?

NUMBER AND STREET, APT. NO.

E14
I have [your/SUBJECT’s] address on September 11th, 2001 listed as:

[FILL: BUILDING NUMBER, STREET NAME, APARTMENT NUMBER CITY, STATE ZIP CODE]

Is this correct?
E15

On September 11th, 2001, [were you/was SUBJECT] in Manhattan south of Chambers Street between the time of the first plane impact and noon?


1 YES [SET OCCUPANT=1]
2 NO
DON’T KNOW
REFUSED

E16

[IF 9/11 AGE < 12 SKIP TO E18.]

The next question is about the World Trade Center site. Please note that the boundaries for the World Trade Center site are:

Chambers Street to the North,
Rector Street or Rector Place to the South,
Broadway on the East,
and the Hudson River on the West.

When answering this next question, please count all rescue, recovery, cleanup, support, and other World Trade Center event related activities [you/SUBJECT] performed within the boundaries of the site for at least one shift. For example, if [you/SUBJECT] worked as a reporter, gave out food or water, or cleaned up buildings within the site, count these activities.

From September 11th, 2001 to June 30th, 2002 did [you/SUBJECT] work at least one shift at the World Trade Center site providing rescue, recovery, clean-up, construction, or support services?

NOTE: THE SALVATION ARMY TENT WAS WITHIN THE ELIGIBLE BOUNDARIES. IF A RESPONDENT REPORTS VOLUNTEERING IN THE SALVATION ARMY TENT, SELECT “YES”.

1 YES [SET RESPONDER=1]
2 NO
DON’T KNOW
REFUSED

E17

From September 12th, 2001 to June 30th, 2002 did [you/SUBJECT] work at least one shift at the World Trade Center Recovery Operation on Staten Island or on a barge?
1 YES [SET SI WORKER =1]
2 NO
DON'T KNOW
REFUSED

E18

[IF AGE > 21 ON 9/11 SKIP TO E20.]

On September 11th, 2001 [were you/was SUBJECT] enrolled in a day care, preschool, elementary, middle, or high school in Manhattan south of Canal Street?

1 YES [SET STUDENT =1.]
2 NO
DON'T KNOW
REFUSED

E19

[ASK IF E18=1]

In what school [were you/was SUBJECT] enrolled on September 11th, 2001?

[DROP DOWN LIST OF SCHOOLS]
DK/REF

E20

[SKIP IF E18=1 OR IF AGE <15 ON 9/11/01]

On September 11th, 2001, [were you/was SUBJECT] employed in a day care, preschool, elementary, middle, or high school in Manhattan south of Canal Street?

NOTE: COUNT SCHOOL VOLUNTEERS AS ELIGIBLE. DO NOT COUNT POLL WORKERS.

1 YES [SET STAFF =1]
2 NO
DON'T KNOW
REFUSED

E21

[ASK IF E20=1] In what school [were you/was SUBJECT] employed on September 11th, 2001?

[DROP DOWN LIST OF SCHOOLS]
DK/REF

E22

How did you hear about the World Trade Center Health Registry?

SELECT ALL THAT APPLY.
E23
[ASK IF ELIGIBLE AND TRIAGE MODE. ELSE IF ELIGIBLE SKIP TO E26.]

Based on your responses, [you are/SUBJECT is] eligible to enroll in the World Trade Center Health Registry. Because of the heavy call volume right now, we would like to call you back at a later time to complete the enrollment and begin the interview process.

[SKIP TO PHON]

E24
[ASK IF P6 IS BEFORE 9/12/01.]

We sincerely appreciate your willingness to talk with us about the World Trade Center Health Registry, and we are very sorry for your loss. We are not collecting information at this time on persons who died on or before September 11th, 2001 or on victims who died on 9/11 in the attacks. Thank you again for your time.

[CLOSE OUT INTERVIEW. SKIP TO CS6.]

E25
[ASK IF DOB IS AFTER 9/11/01]

We sincerely appreciate your willingness to talk with us about the World Trade Center Health Registry. We are not collecting information at this time on persons who were born after September 11th, 2001. Thank you again for your time.

[CLOSE OUT INTERVIEW. SKIP TO CS6.]

E26
[ASK IF NOT ELIGIBLE.]

We sincerely appreciate your willingness to talk with us about the World Trade Center
Health Registry. At this time, we are asking that people who were in the closest proximity to the WTC site on 9/11 enroll. Studying this group will allow us to best assess the long-term health effects of 9/11. While [you are/SUBJECT is] not one of the persons we are asking to join the Registry at this time, we believe that the information collected through the Registry will benefit all persons in the New York City area who were affected by the World Trade Center disaster, not just those whom we ask to complete the full interview. Thank you again for your time.

[CLOSE OUT INTERVIEW. SKIP TO CS6.]

E27

[ASK IF ELIGIBLE AND NOT TRIAGE MODE.]

Based on your responses, [you are/SUBJECT is] eligible to enroll in the Registry. Let’s go on with the interview.

P11

[IF SUBJECT IS DECEASED, SKIP TO P11b.]

The survey will take about 30 minutes. The questions will ask about where [you were/SUBJECT was] on September 11th, 2001, and how often [you were/SUBJECT was] in the area around the World Trade Center site in the months afterwards. The survey also may ask questions about [your/SUBJECT’s] home, place of work, or school. It also asks about [your/SUBJECT’s] health before and after September 11th, 2001.

Answering these questions is voluntary; you may refuse to answer any of these questions, if you like. There are no risks to being in the survey, but some of the questions might make you feel sad or anxious. You can stop or take a break at any time. You can also ask for a phone number to a hotline if you would like to learn about places that may be able to help you.

[Your/SUBJECT’s] name will not be connected with your answers in any way. All of your answers will be kept private. If you decide not to enroll in the Registry we will not keep [your/SUBJECT’s] information. [You/SUBJECT] will not lose any rights or benefits that you would otherwise get.

We plan to keep the study data for up to 20 years. During this time, the New York City Department of Health and Mental Hygiene may want to contact [you/SUBJECT] to participate in other studies. They may also want to send [you/SUBJECT] health information in the mail. [Your/SUBJECT’s] participation now does not mean you have to participate later, or receive the health information.

I would be glad to answer any questions you have about the study or give you the name and number of a person to call if you have questions about your rights as a person in a research study. Do you have any questions before we get started?

(If you have questions about your rights as a study participant, please call Dr. D. Saha at the New York City Department of Health and Mental Hygiene at 212-788-4483. If you have questions about the World Trade Center Health Registry, please call Dr. Robert Brackbill toll free at 1-877-NYC-DOH7 (1-877-692-3647).)
The survey will take about 5 minutes. We will ask you some background questions about [SUBJECT].

Answering these questions is voluntary; you may refuse to answer any of these questions, if you like. There are no risks to being in the survey, but remembering the events of 9/11 might make you feel sad or anxious. You can ask for a phone number to a hotline if you would like to learn about places that may be able to help you.

[Your/SUBJECT’s] name will not be connected with your answers in any way. All of your answers will be kept private. If you decide not to enroll in the Registry we will not keep [your/SUBJECT’s] information.

We plan to keep the study data for up to 20 years.

I would be glad to answer any questions you have about the study or give you the name and number of a person to call if you have questions about your rights as a person in a research study. Do you have any questions before we get started?

(If you have questions about your rights as a study participant, please call Dr. D. Saha at the New York City Department of Health and Mental Hygiene at 212-788-4483. If you have questions about the World Trade Center Health Registry, please call Dr. Robert Brackbill toll free at 1-877-NYC-DOH7 (1-877-692-3647).)

[IF DECEASED, SKIP TO P13. ASK ONLY IF PROXY.]

WHY IS A PROXY BEING INTERVIEWED?

ASK IF NECESSARY: I just need to confirm the reason [SUBJECT] is not capable of completing the interview right now.

1 SERIOUSLY PHYSICALLY DISABLED, BUT MENTALLY COMPETENT
2 MENTALLY INCOMPETENT
3 DECEASED AFTER 9/11/01
4 INSTITUTIONALIZED
5 INCARCERATED
6 UNDER 18
7 OTHER (SPECIFY: ________________________________)

[CONSISTENCY CHECK: IF I10=1 AND P12 NE 3, DISPLAY CONSISTENCY CHECK.

INTERVIEWER: EARLIER IN THE INTERVIEW, IT WAS RECORDED THAT THE
SUBJECT IS DECEASED. IS THE SUBJECT DECEASED?

1 YES, SUBJECT IS DECEASED
2 NO, SUBJECT IS NOT DECEASED.

IF ANSWER=1, RETURN TO P12. ELSE, CONTINUE AND SET DECEASED=2 (NO).

[CONSISTENCY CHECK: IF I10=2 AND P12=3, DISPLAY CONSISTENCY CHECK/]

INTERVIEWER: EARLIER IN THE INTERVIEW, IT WAS RECORDED THAT THE SUBJECT IS NOT DECEASED. IS THE SUBJECT DECEASED?

1 YES, SUBJECT IS DECEASED.
2 NO, SUBJECT IS NOT DECEASED.

IF ANSWER=2, RETURN TO P12. ELSE, CONTINUE AND SET DECEASED=1 (YES).]

P13

[ASK ONLY IF PROXY.]

What [is/was] your relationship to [SUBJECT]?

CODE ANSWER ACCORDING TO CATEGORIES BELOW. READ OPTIONS AS NECESSARY.

1 SPOUSE
2 MOTHER
3 FATHER
4 DAUGHTER/SON
5 SISTER/BROTHER
6 GRANDPARENT
7 OTHER BLOOD RELATIVE
8 MOTHER/FATHER IN-LAW
9 OTHER IN-LAW
10 FRIEND
11 OTHER (SPECIFY) _________________
DON’T KNOW
REFUSED

Deceased

DEC1

[ASK IF FEMALE AND AGE AT DEATH 15 OR OLDER.]

What was [SUBJECT’S] maiden name?

__________________________
DEC2
Was [SUBJECT] Hispanic or (Latino/Latina)?

1 YES
2 NO
DONT’ KNOW
REFUSED

DEC3
Which of the following would you say was [SUBJECT’s] race? (You may select more than one.)

1 White
2 Black or African American
3 American Indian or Alaska Native
4 Native Hawaiian or other Pacific Islander
5 Asian
6 OTHER (SPECIFY: _____________________)
DONT’ KNOW
REFUSED

DEC4
What was [SUBJECT’s] cause of death? Please be as specific as possible.

_________________________________________________________________________________________
DONT’ KNOW
REFUSED

DEC5
In which state did [SUBJECT] pass away?

[DISPLAY DROP DOWN LIST WITH STATES, LINKED TO THEIR ABBREVIATIONS. STATE LIST INCLUDES 50 U.S., DC, PUERTO RICO, AND “OUTSIDE THE US AND PUERTO RICO”]
DONT’ KNOW
REFUSED

DEC6
[IF DEC5=NEW YORK]
Did [SUBJECT] pass away in New York City?

1 YES
2 NO
DONT’ KNOW
REFUSED
DEC7

This next question is about [SUBJECT's] social security number. We want you to know that giving us [SUBJECT's] social security number is voluntary. We will keep [SUBJECT's] number private. [SUBJECT's] number will not be made public. We will use [SUBJECT's] social security number to match to other health registries. We will also use it to try to let you know about future follow-up studies. As with any question in this survey, you may refuse to answer it if you like.

What was [SUBJECT's] Social Security Number?

NOTE: CHINESE RESPONDENTS MAY REFER TO “WORKER CARD NUMBER” INSTEAD OF SSN.

(The social security number is important for health studies such as this one. It helps obtain records from other government agencies to track the long-term health effects of 9/11. We know this is personal, but our project has a Federal Certificate of Confidentiality. This means researchers cannot be forced to give personal data by subpoena or court order. [SUBJECT’s] social security number will remain private and protected.)

_ _ _ - _ _ - _ _ _
DON'T KNOW
REFUSED

[SOFT EDIT CHECK: IF DEC7=DK OR REF, DISPLAY: Will you tell me the last 4 digits only of [SUBJECT's] social security number? While not as useful as the whole number, the last 4 digits will help us to match to other health registries.]

Student [ASK IF E18=1. ELSE SKIP TO STAFF SECTION.]

S1

On September 11th, 2001, [were you/was SUBJECT] in school?

1 YES
2 NO [SKIP TO S3]
DON'T KNOW [SKIP TO S3]
REFUSED [SKIP TO S3]

S2

Did [you/SUBJECT] return to [FILL SC HOOL NAME FROM E19] before December 31st 2001? (By return, we mean returning to classes.)

1 YES [SKIP TO NEXT SECTION]
2 NO [SKIP TO NEXT SECTION]
3 NEVER RETURNED [SKIP TO NEXT SECTION]
DON'T KNOW [SKIP TO NEXT SECTION]
S3
On what date did [you/SUBJECT] return?

MM/DD/YYYY

[SOFT EDIT CHECK: IF S3=DK, DISPLAY: Please give me your best estimate. If you can't remember the exact date, you can provide your answer in days, weeks, or months after 9/11.]

DON'T KNOW
REFUSED

ALTERNATE RESPONSE OPTION:

ABOUT ____ DAYS/WEEKS/MONths AFTER 9/11

School Staff [ASK IF E20=1. ELSE SKIP TO OCCUPANT/TRANSIT SECTION.]

ST1
On September 11th, 2001 [were you/was SUBJECT] at school?

1  YES
2  NO [SKIP TO ST3]
DON'T KNOW [SKIP TO ST3]
REFUSED [SKIP TO ST3]

ST2
Did [you/SUBJECT] return to work at [FILL SCHOOL NAME FROM E21] before December 31st, 2001?

1  YES [SKIP TO O/T SECTION]
2  NO [SKIP TO O/T SECTION]
NEVER RETURNED [SKIP TO O/T SECTION]
DON'T KNOW [SKIP TO O/T SECTION]
REFUSED [SKIP TO O/T SECTION]

ST3
On what date did [you/SUBJECT] return?

MM/DD/YYYY
DON'T KNOW
REFUSED

ALTERNATE RESPONSE OPTION:
ABOUT ____ DAYS/WEEKS/MONTHS AFTER 9/11

[SOFT EDIT CHECK: IF ST3=DK, DISPLAY: Please give me your best estimate. If you can’t remember the exact date, you can provide your answer in days, weeks, or months after 9/11.]

Occupy Transit Section [ASK IF E15=1 AND STAFF NE 1 AND STAFF NE 1]

O/T1
On September 11th, 2001 [were you/was SUBJECT] in a building south of Chambers Street between the time of the first plane impact and noon?


1 YES
2 NO [SKIP TO O/T4b]
DON’T KNOW [SKIP TO O/T4b]
REFUSED [SKIP TO O/T4b]

O/T2
What building [were you/was SUBJECT] in?

NOTE: IF RESPONDENT WAS INSIDE MORE THAN ONE BUILDING, COUNT ONLY THE FIRST BUILDING THEY WERE IN DURING THE DISASTER.

1 1 Liberty Plaza
2 1 World Financial Center
3 101 Barclay St
4 110 Church St
5 110 Greenwich St
6 110 Liberty St
7 113-117 Cedar St
8 114 Greenwich St
9 114 Liberty St
10 115 Broadway
11 119 Cedar St
12 120 Cedar St
13 120 Church St
14 120 Liberty St
15 123 Washington Street
16 125 Cedar St
17 130 Cedar St
18 130 Liberty St
19 140 Cedar St
20 140 West St
21 155 Cedar St
22 2 World Financial Center
23 200 Liberty St
24 200 Vesey St
25 22 Cortlandt St
26 225 Liberty St
27 3 World Financial Center
28 30 West Broadway
29 375 South End Ave
30 55 Church St
31 75 Park Place
32 85 West St
33 90 Cedar St
34 90 Church St
35 90 West St
36 97 Trinity Pl
37 Bank of New York
38 Bankers Trust
39 Battery Park City
40 Borough of Manhattan Community College
41 Broadway, between Cedar & Thames Sts
42 Century 21
43 Corner of Cedar & Greenwich Sts
44 Deutsche Bank
45 Dolphin Fitness Club
46 Federal Office Building
47 Fiterman Hall
48 Gateway Plaza
49 Green Exchange Building
50 Marriott Hotel
51 Millenium Hilton Hotel
52 North Bridge
53 NYFD Ladder 10
54 Post Office
55 R.R. Donnelly and Sons Company
56 South Bridge
57 St. Nicholas Greek Catholic Church
58 U.S. Department of Internal Revenue
59 U.S. Immigration Service
60 U.S. Realty
61 Verizon
62 West St between Carlisle & Albany Sts
63 Winter Garden
64 World Trade Center 1
65 World Trade Center 2
66 World Trade Center 3
67 World Trade Center 4
68 World Trade Center 5
69 World Trade Center 6
70 World Trade Center 7
71 World Trade Center Concourse/Shopping Mall
72 Other (SPECIFY)

(SPECIFY NAME AND ADDRESS OF BUILDING OR STORE IF KNOWN)
BUILDING NAME: _________________________________

BUILDING ADDRESS: _________________________________

DON’T KNOW
REFUSED

O/T3a
Which floor [were you/was SUBJECT] on? (If [you were/SUBJECT was] on more than one floor, indicate the highest floor [you were/he was/she was] on between the time of the first plane impact and noon.)


FLOOR NO. __________ [SKIP TO O/T4]
DON’T KNOW
REFUSED

[RANGE CHECK ON FLOOR NUMBER IS DETERMINED BY THE NUMBER OF FLOORS WE HAVE DOCUMENTED FROM NYC FOR EACH BUILDING. IF NUMBER OF FLOORS IS BLANK, RANGE=0-110.]

O/T3b
ASK ONLY IF NECESSARY: Were you in the basement, the lobby, the concourse (shopping mall) on the mezzanine level, at the path or subway station, on a bridge between buildings, or somewhere else?

(If you were on more than one floor, indicate the highest floor you were on between the time of the first plane impact and noon.)

1 BASEMENT
2 LOBBY
3 CONCOURSE/SHOPPING MALL
3 MEZZANINE
4 PATH OR SUBWAY STATION
5 BRIDGE
6 SOMEWHERE ELSE
DON’T KNOW
REFUSED

O/T4a
[ASK IF O/T1=1 AND NOT IN WTC. ELSE SKIP TO O/T4b.]

Was that [your/SUBJECT’s] closest location to the World Trade Center between the time of the first plane impact and noon?


1 YES [SKIP TO O/T5.]
On September 11th, 2001, what was [your/SUBJECT’s] closest location to the World Trade Center between the time of the first plane impact and noon?


ENTER BUILDING NAME, ADDRESS, OR INTERSECTION. IF R CANNOT PROVIDE ANY OF THESE, TRY TO GET CLOSEST LANDMARK OR SUBWAY STATION.

BUILDING NAME: __________________________
ADDRESS: ____________________________
INTERSECTION OF: _______________________
LANDMARK: ___________________________
SUBWAY STATION: ______________________

DON’T KNOW
REFUSED

[SOFT EDIT CHECK: IF O/T4b=DK, DISPLAY: If you can't provide me with the exact address or intersection, I’d be happy to record the closest building, landmark, or subway station. Any nearby landmark would be helpful.]

Did [you/SUBJECT] evacuate from a building or area anywhere south of Chambers Street?

1 YES
2 NO  [SKIP TO O/T7]
DON’T KNOW  [SKIP TO O/T7]
REFUSED  [SKIP TO O/T7]

Was this from [FILL BUILDING FROM OT2 (LIST OR SPECIFY)]:
1 YES
2 NO
DON’T KNOW
REFUSED

O/T7

Did [you/SUBJECT] begin evacuating . . .


1 Between the first plane impact and the second plane impact
2 DURING THE SECOND PLANE IMPACT
3 Between the second plane impact and the collapse of the first tower
4 DURING THE COLLAPSE OF THE FIRST TOWER
5 Between the collapse of the first tower and the collapse of the second tower
6 DURING THE COLLAPSE OF THE SECOND TOWER,
7 Or after the collapse of the second tower?
DON’T KNOW
REFUSED

O/T8 [IF AGE ON 9/11 < 12 SKIP TO EX1]

On September 11th, 2001, was [your/SUBJECT’s] usual place of work south of Chambers Street?

1 YES
2 NO [SKIP TO EXPOSURE SECTION]
DON’T KNOW [SKIP TO EXPOSURE SECTION]
REFUSED [SKIP TO EXPOSURE SECTION]

O/T9

Between September 12th, 2001 and December 31st, 2001 [did [you/SUBJECT] return to work south of Chambers Street?

1 YES
2 NO [SKIP TO EXPOSURE SECTION]
DON’T KNOW [SKIP TO EXPOSURE SECTION]
REFUSED [SKIP TO EXPOSURE SECTION]

O/T10

When did [you/SUBJECT] return to work south of Chambers Street?

KEY DATES FROM 2001:
YOM KIPPUR – SEPTEMBER 27
ROSH HASHANAH – SEPTEMBER 18-19
COLUMBUS DAY – OCTOBER 8
VETERANS DAY – NOVEMBER 11
THANKSGIVING DAY – NOVEMBER 22
HANUKKAH – DECEMBER 10-17
Exposure Section

Ex1
On September 11th, [were you/was SUBJECT] outdoors within a dust or debris cloud resulting from the collapse of the World Trade Center towers?

1 YES  [SKIP TO Ex4]
2 NO   [SKIP TO Ex4]
DON'T KNOW [SKIP TO Ex4]
REFUSED   [SKIP TO Ex4]

Ex2
Where [were you/was SUBJECT] when the dust or debris cloud (resulting from the collapse of the World Trade Center towers) first reached [you/him/her]?

ENTER ADDRESS OR INTERSECTION.

PROBE: IF R DOES NOT KNOW LOCATION, GET CLOSEST LANDMARK, SUBWAY STATION OR STREET NAME.

ADDRESS: _____________________________

INTERSECTION OF: _________________________

LANDMARK:  ____________________________

SUBWAY STATION: _______________________

DON'T KNOW
REFUSED

[SOFT EDIT CHECK: IF EX2=DK, DISPLAY: If you can't provide me with the exact address or intersection, I'd be happy to record the closest building, landmark or subway station. Any nearby landmark would be helpful.]

Ex3a
About how much total time did [you/SUBJECT] spend outdoors in the dust or debris
cloud resulting from the collapse of the World Trade Center towers?

NOTE: IF ANSWER IS LESS THAN ONE MINUTE, CODE ONE MINUTE AND CONTINUE.

NOTE: IF REGISTRANT REPORTS TIME OVER 24 HOURS, TELL THEM THAT WE'RE ONLY INTERESTED IN THE TIME SPENT IN THE DUST AND DEBRIS CLOUD ON 9/11.

NUMBER OF HOURS _____
NUMBER OF MINUTES _____
DON'T KNOW
REFUSED

[RANGE IS BETWEEN 0 AND 1:55 HOURS. IF ANSWER IS > 1:55 CONFIRM ANSWER. ALLOW ANY ANSWER R PROVIDES BUT CONFIRM IT ONE TIME. ]

Ex3b

[ASK IF EX3a=DK]

About how much time would you estimate it was? Would you say . . .

1 Less than half an hour,
2 At least a half an hour, but less than one hour,
3 At least one hour but less than one and a half hours, or
4 At least one and a half hours up to 2 hours.
DON'T KNOW
REFUSED

Ex4

On September 11th, 2001, did [you/SUBJECT] personally witness any of the following?

NOTE: BY “PERSONALLY WITNESS”, WE MEAN SEEING THE SPECIFIED EVENT IN PERSON. R SHOULD NOT INCLUDE EVENTS HE/SHE SAW ON TELEVISION.

NOTE: FOR “ANYONE WHO WAS INJURED OR KILLED, R SHOULD NOT COUNT PEOPLE FALLING OR JUMPING FROM THE WORLD TRADE CENTER TOWERS.

YES NO DK REF

a. an airplane hitting the World Trade Center
b. buildings collapsing
c. people running away from a cloud of smoke
d. anyone who was injured or killed
e. people falling or jumping from the World Trade Center Towers

Worker Section [ASK IF E16=1 OR E17=1.]
The next questions are about working at the World Trade Center site. What was [your/SUBJECT’s] first day working at the World Trade Center site?

NOTE: RESPONDENT SHOULD NOT COUNT DATES BEFORE THE WORLD TRADE CENTER DISASTER.

MM/DD/YYYY
DON’T KNOW
REFUSED

[EDIT CHECK: ALLOW ONLY DATES ON OR AFTER 9/11/01.]

W2

What was [your/SUBJECT’s] last day working at the World Trade Center site?

MM/DD/YYYY
DON’T KNOW
REFUSED

[RANGE CHECK: ALLOW ONLY DAYS ON OR AFTER 9/11.]

[SOFT EDIT CHECK: IF ANSWER=DK, DISPLAY: Please give me your best estimate.]

[CONSISTENCY CHECK: IF W2 < W1 DISPLAY CONSISTENCY CHECK.

I have recorded that [your/SUBJECT’s] last day at the site was [W2] but that [your/SUBJECT’s] first date was [W1]. Which is correct?

1=W2
2=W1

IF ANSWER=1 BO BACK TO W1. IF ANSWER=2 GO BACK TO W2.]

W3

[ASK IF STARTED BEFORE 9/18]

How many days did [you/SUBJECT] work at the (World Trade Center) site from September 13th to September 17th, 2001?

1 0 DAYS
2 1 DAY
3 2 DAYS
4 3 DAYS
5 4 DAYS
6 5 DAYS
7 EVERY DAY
DON’T KNOW
REFUSED

[CONSISTENCY CHECK: IF W2 – W1 < NUMBER OF DAYS WORKED, DISPLAY CONSISTENCY CHECK.

I have recorded that [you/SUBJECT] worked [W3 days] at the World Trade Center site from September 13th to September 17th, 2001, but that [you/he/she] only worked from [W1 DATE] to [W2 DATE]. Which is correct?

1 WORKED [W3] DAYS AT THE WTC SITE
2 WORKED FROM [W1 DATE] TO [W2 DATE]

IF ANSWER = 1, RETURN TO W1. IF ANSWER = 2, RETURN TO W3. ]

W4

[ASK IF FIRST DAY IS BEFORE 1/1/02. SKIP IF LAST DAY WAS BEFORE 9/18]

How many days did [you/SUBJECT] work (at the World Trade Center site) from September 18th to December 31st, 2001?

READ CATEGORIES AS NECESSARY.

1 0 DAYS
2 1 TO 2 DAYS
3 3 TO 6 DAYS
4 7 TO 30 DAYS
5 31 TO 60 DAYS
6 MORE THAN 60 DAYS
DON’T KNOW
REFUSED

[CONSISTENCY CHECK: IF W2 – W1 < LOWER BOUND OF NUMBER OF DAYS WORKED IN W4, DISPLAY CONSISTENCY CHECK.

I have recorded that [you/SUBJECT] worked [W4 days] at the World Trade Center site from September 18th to December 31st, 2001, but that [you/he/she] only worked from [W1 DATE] to [W2 DATE]. Which is correct?

1 WORKED [W4 DAYS] AT THE WTC SITE
2 WORKED FROM [W1 DATE] TO [W2 DATE]

IF ANSWER=1, RETURN TO W1. IF ANSWER = 2, RETURN TO W4.]

W5

[SKIP IF LAST DAY WAS BEFORE 1/1/02]

How many days did [you/SUBJECT] work (at the World Trade Center site) after December 31st, 2001?

1 0 DAYS
2 1 TO 2 DAYS
3 3 TO 6 DAYS
4  7 TO 30 DAYS
5  31 TO 60 DAYS
6  MORE THAN 60 DAYS
DON'T KNOW
REFUSED

[CONSISTENCY CHECK: IF W2 – W1 IS < LOWER BOUND OF NUMBER OF DAYS WORKED IN W5, DISPLAY CONSISTENCY CHECK.

I have recorded that [you/SUBJECT] worked [W5 DAYS] at the WTC site after January 1\textsuperscript{st}, 2002, but that [you/he/she] only worked from [W1 DATE ] to [W2 DATE]. Which is correct?

1=WORKED [W5 DAYS] AT WTC SITE AFTER JANUARY 1\textsuperscript{ST}, 2002.
2=WORKED FROM [W1 DATE] TO [W2 DATE].

IF ANSWER=1 RETURN TO W1. IF ANSWER =2 RETURN TO W5.]

W6

What organization did you work for at the World Trade Center site?

1  FDNY (includes Ladder Co, Hazmat)
2  Fire Department Personnel (NON-NYC)
3  FDNY-EMS
4  Other NYC EMS
5  EMS (NON-NYC)
6  DMATs, Medcor, other
7  Medical Examiners Office (Morgue attendants, Mes)
8  NYPD (CSUs, uniformed personnel, non-uniformed personnel)
9  Port Authority Police (PAP)
10  Other Port Authority personnel
11  NYS Law Enforcement (State troopers)
12  Federal Law Enforcement (FBI, etc)
13  US Corps of Engineers
14  US Corps of Engineers Contractor (EE&G)
15  US Corps of Engineers Contractor Phillips and Jordan
16  Volunteer Organization (including Red Cross and Salvation Army)
17  Volunteer (non-affiliated)
18  Coast Guard
19  National Guard
20  Secret Service
21  US Environmental Protection Agency
22  Federal Agency not referred to above (including FEMA)
23  New York State Department of Environmental Services
24  Urban Search & Rescue Teams NYS, NYC, Other
25  NYS Agency not referred to above
26  MTA, Transit Authority
27  NYC DEPT OF SANITATION
28  NYC DEPT OF DESIGN AND CONSTRUCTION (DDC)
29  NYC Agency not referred to above
Did you ever work on the pile at the World Trade Center site?


1  YES
2  NO  [SKIP TO W10]
DON’T KNOW  [SKIP TO W10]
REFUSED  [SKIP TO W10]

And did you work on the pile on September 11th, 2001?

1  YES
2  NO  [SKIP TO W10]
DON’T KNOW  [SKIP TO W10]
REFUSED  [SKIP TO W10]

On September 11th, 2001, did you perform any of the following activities on the pile?

NOTE: RESPONDENTS SHOULD NOT COUNT SUPERVISING THESE ACTIVITIES IF THEY DID NOT ACTUALLY PERFORM THE LABOR THEMSELVES, EVEN IF THEY WERE SUPERVISING THE ACTIVITY WHILE STANDING ON THE PILE.

a. Firefighting  YES  NO  DK  REFUSED
b. Search and rescue  YES  NO  DK  REFUSED
c. Hand digging        YES  NO  DK  REFUSED  
d. Welding/steelcutting/torch operation  YES  NO  DK  REFUSED  
e. Heavy equipment operation  YES  NO  DK  REFUSED  
f. Light construction      YES  NO  DK  REFUSED  

W10
[ASK IF W1=9/11.]

1 all of the time  
2 most of the time  
3 some of the time, or  
4 not at all?  
DON’T KNOW  
REFUSED

W11
[ASK IF W1=9/11/01 OR 9/12/01 AND W7=1. ELSE SKIP TO W13.]
Did you work on the pile on September 12th, 2001?

1 YES  
2 NO  [SKIP TO W13]  
DON’T KNOW  [SKIP TO W13]  
REFUSED  [SKIP TO W13]  

W12
[ASK IF W11=1]
On September 12th, 2001, did [you/SUBJECT] perform any of the following activities on the pile?

NOTE: RESPONDENTS SHOULD NOT COUNT SUPERVISING THESE ACTIVITIES IF THEY DID NOT ACTUALLY PERFORM THE LABOR THEMSELVES, EVEN IF THEY WERE SUPERVISING THE ACTIVITY WHILE STANDING ON THE PILE.

a. Firefighting        YES  NO  DK  REFUSED  
b. Search and rescue   YES  NO  DK  REFUSED  
c. Hand digging        YES  NO  DK  REFUSED  
d. Welding/steelcutting/torch operation  YES  NO  DK  REFUSED  
e. Heavy equipment operation  YES  NO  DK  REFUSED  
f. Light construction      YES  NO  DK  REFUSED
W13

[ASK IF (W1=9/11 AND W2 NE 9/11) OR W1=9/12 ]


1 all of the time
2 most of the time
3 some of the time, or
4 not at all?
DON’T KNOW
REFUSED

W14

[ASK IF W3=2 – 7 AND W=1]

Did [you/SUBJECT] work on the pile at any time from September 13th to September 17th, 2001?

1 YES
2 NO [SKIP TO W17]
DON’T KNOW [SKIP TO W17]
REFUSED [SKIP TO W17]

W15

[ASK IF W14=1]

On those days you worked from September 13th to September 17th, 2001, did [you/SUBJECT] perform any of the following activities on the pile?

NOTE: RESPONDENTS SHOULD NOT COUNT SUPERVISING THESE ACTIVITIES IF THEY DID NOT ACTUALLY PERFORM THE LABOR THEMSELVES, EVEN IF THEY WERE SUPERVISING THE ACTIVITY WHILE STANDING ON THE PILE.

a. Firefighting       yes no DK Refused
b. Search and rescue  yes no DK Refused
c. Hand digging       yes no DK Refused
d. Welding/steelfcutting/torch operation yes no DK Refused
e. Heavy equipment operation yes no DK Refused
f. Light construction yes no DK Refused

W16

[ASK IF W14=1]

On those days you worked from September 13th to September 17th, 2001, which area of the World Trade Center site did [you/SUBJECT] work in?

MARK ALL THAT APPLY. READ ANSWERS IF NECESSARY. CONFIRM
WITH RESPONDENT BY READING THE FULL ANSWER CATEGORY.

1 East Side – 2, 4, and 5 World Trade Center (Tully Sector)
2 Northwest Side – 1 and 6 World Trade Center (Amec Sector)
3 Southwest Side – 3 World Trade Center (Bovis Sector)
4 7 World Trade Center (Turner Sector)
6 Other (Specify ________________)

DON’T KNOW
REFUSED

W17

[ASK IF W3=2 – 7]

From September 13th to September 17th, 2001, did [you/SUBJECT] wear a mask . . .

1 all of the time
2 most of the time
3 some of the time, or
4 not at all?

DON’T KNOW
REFUSED

W18

[ASK IF W4 = 2 – 6 AND W7=1. ELSE SKIP TO W21.]

Did [you/SUBJECT] work on the pile at any time from September 18th to December 31st, 2001?

1 YES
2 NO [SKIP TO W21]

DON’T KNOW [SKIP TO W21]
REFUSED [SKIP TO W21]

W19

[ASK IF W18=1]

On those days [you/SUBJECT] worked from September 18th to December 31st 2001, did [you/SUBJECT] perform any of the following activities on the pile?

NOTE: RESPONDENTS SHOULD NOT COUNT SUPERVISING THESE ACTIVITIES IF THEY DID NOT ACTUALLY PERFORM THE LABOR THEMSELVES, EVEN IF THEY WERE SUPERVISING THE ACTIVITY WHILE STANDING ON THE PILE.

a. Firefighting  YES NO DK REFUSED
b. Search and rescue YES NO DK REFUSED
c. Hand digging YES NO DK REFUSED
d. Welding/steelcutting/torch operation YES NO DK REFUSED
e. Heavy equipment operation
   YES  NO  DK  REFUSED
f. Light construction
   YES  NO  DK  REFUSED

W20

[ASK IF W18=1]

On those days you worked from September 18th to December 31st, 2001, which area of the World Trade Center site did [you/SUBJECT] work in?

MARK ALL THAT APPLY.

READ ANSWERS IF NECESSARY. CONFIRM WITH RESPONDENT BY READING THE FULL ANSWER CATEGORY.

1 East Side – 2, 4, and 5 World Trade Center (Tully Sector)
2 Northwest Side – 1 and 6 World Trade Center (Amec Sector)
3 Southwest Side – 3 World Trade Center (Bovis Sector)
4 7 World Trade Center (Turner Sector)
6 Other Specify ____________________
DON’T KNOW
REFUSED

W21

[ASK IF W4=2-6]

From September 18th to December 31st, 2001, did [you/SUBJECT] wear a mask . . .

1 all of the time
2 most of the time
3 some of the time, or
4 not at all?
DON’T KNOW
REFUSED

W22

[ASK IF W5=2-6 AND W7=1]

On those days [you/SUBJECT] worked after December 31st, 2001, did [you/SUBJECT] work on the pile?

1 YES
2 NO  [SKIP TO W25]
Did [you/SUBJECT] perform any of the following activities on the pile at the WTC site after December 31st, 2001?

NOTE: RESPONDENTS SHOULD NOT COUNT SUPERVISING THESE ACTIVITIES IF THEY DID NOT ACTUALLY PERFORM THE LABOR THEMSELVES, EVEN IF THEY WERE SUPERVISING THE ACTIVITY WHILE STANDING ON THE PILE.

a. Firefighting             YES NO DK REFUSED
b. Search and rescue       YES NO DK REFUSED
c. Hand digging             YES NO DK REFUSED
d. Welding/steelcutting/torch operation YES NO DK REFUSED
e. Heavy equipment operation YES NO DK REFUSED
f. Light construction      YES NO DK REFUSED

On those days you worked after December 31st, 2001, which area of the World Trade Center site did [you/SUBJECT] work in?

MARK ALL THAT APPLY.

READ ANSWERS IF NECESSARY. CONFIRM WITH RESPONDENT BY READING THE FULL ANSWER CATEGORY.

1 East Side – 2, 4, and 5 World Trade Center (Tully Sector)
2 Northwest Side – 1 and 6 World Trade Center (Amec Sector)
3 Southwest Side – 3 World Trade Center (Bovis Sector)
4 7 World Trade Center (Turner Sector)
6 Other Specify ________________

1 all of the time
2 most of the time
3 some of the time, or
4 not at all?
DON'T KNOW
REFUSED

W26
[ASK IF E17=1. ELSE SKIP TO RESIDENT SECTION.]

Earlier, you reported that [you/SUBJECT] worked at either the World Trade Center Recovery Operation on Staten Island or on a barge. Which of these did [you/SUBJECT] work on?

1 WORLD TRADE CENTER RECOVERY OPERATION ON STATEN ISLAND
2 BARGE [SKIP TO W36]
3 BOTH
DON'T KNOW [SKIP TO RESIDENT SECTION]
REFUSED [SKIP TO RESIDENT SECTION]

W27
From September 12th 2001, what was [your/SUBJECT’s] first day working at the World Trade Center Recovery Operation on Staten Island?

MM/DD/YYYY

DON'T KNOW
REFUSED

W28
What was [your/SUBJECT’s] last day working at the World Trade Center Recovery Operation on Staten Island?

MM/DD/YYYY

DON’T KNOW
REFUSED

[EDIT CHECK: ALLOW ONLY DAYS ON OR AFTER 9/12/01]

[CONSISTENCY CHECK: IF W28 < W27 DISPLAY CONSISTENCY CHECK.

I have recorded that [your/SUBJECT’s] last day at the site was [W28] but that [your/SUBJECT’s] first date was [W27]. Which is correct?

1=W28
2=W27

IF ANSWER=1 BO BACK TO W27. IF ANSWER=2 GO BACK TO W28.]

W29
[ASK IF DATE IN W27 AND W28 IS BETWEEN 9/12/01 AND 12/31/01. ELSE SKIP]
TO W32]

From **September 12th, 2001 to December 31st, 2001**, how many days did [you/SUBJECT] work at the World Trade Center Recovery Operation on Staten Island?

1 0 DAYS  
2 1 TO 2 DAYS  
3 3 TO 6 DAYS  
4 7 TO 30 DAYS  
5 31 TO 60 DAYS  
6 MORE THAN 60 DAYS  
DON’T KNOW  
REFUSED

[CONSISTENCY CHECK: IF W28-W27 < LOWER BOUND OF NUMBER OF DAYS IN W29, DISPLAY CONSISTENCY CHECK.]

I have recorded that [you/SUBJECT] worked [W29 days] at the World Trade Center Recovery Operation on Staten Island from September 12th to December 31st, 2001, but that [you/he/she] only worked from [W27 DATE] to [W28 DATE]. Which is correct?

1 WORKED [W29 DAYS] AT THE WTC RECOVERY OPERATION ON STATEN ISLAND  
2 WORKED FROM [W27 DATE] TO [W28 DATE].

IF ANSWER=1, RETURN TO W27. IF ANSWER =2, RETURN TO W29.]

W30

From **September 12th, 2001 to December 31st, 2001**, did [you/SUBJECT] work in the exclusion zone?

NOTE: THIS QUESTION REFERS TO EXCLUSION ZONES AND DEBRIS SORTING AREAS AT THE WORLD TRADE CENTER RECOVERY OPERATION ON STATEN ISLAND ONLY. IT DOES NOT INCLUDE THE EXCLUSION ZONE AT THE WORLD TRADE CENTER SITE.

1 YES  
1 NO  
DON’T KNOW  
REFUSED

W31

From **September 12th, 2001 to December 31st, 2001**, did [you/SUBJECT] wear a mask.

1 all of the time  
2 most of the time  
3 some of the time, or  
4 not at all?
W32

[ASK IF DATE IN W28 IS ON AFTER 12/31/01. ELSE SKIP TO W35]

After December 31st, 2001, how many days did [you/SUBJECT] work at the World Trade Center Recovery Operation on Staten Island?

1 0 DAYS
2 1 TO 2 DAYS
3 3 TO 6 DAYS
4 7 TO 30 DAYS
5 31 TO 60 DAYS
6 MORE THAN 60 DAYS

DON’T KNOW
REFUSED

[CONSISTENCY CHECK: IF W28-W27 < LOWER BOUND OF NUMBER OF DAYS IN W32, DISPLAY CONSISTENCY CHECK.

I have recorded that [you/SUBJECT] worked [W32 days] at the World Trade Center Recovery Operation on Staten Island after December 31st, 2001, but that [you/he/she] only worked from [W27 DATE] to [W28 DATE]. Which is correct?

1 WORKED [W32 DAYS] AT THE WTC RECOVERY OPERATION ON STATEN ISLAND
2 WORKED FROM [W27 DATE] TO [W28 DATE].

IF ANSWER=1, RETURN TO W27. IF ANSWER =2, RETURN TO W32.]

W33

[ASK IF W32=2-6. ELSE SKIP TO W35.]

After December 31st, 2001, did [you/SUBJECT] work in the exclusion zone?

NOTE: THIS QUESTION REFERS TO EXCLUSION ZONES AND DEBRIS SORTING AREAS AT THE WORLD TRADE CENTER RECOVERY OPERATION ON STATEN ISLAND ONLY. IT DOES NOT INCLUDE THE EXCLUSION ZONE AT THE WORLD TRADE CENTER SITE.

1 YES
2 NO
DON’T KNOW
REFUSED

W34
(After December 31st, 2001,) Did [you/SUBJECT] wear a mask . . .

1 all of the time
2 most of the time
3 some of the time, or
4 not at all?

DON'T KNOW
REFUSED

W35

[ASK IF W26=1 OR 3]

What organization did [you/SUBJECT] work for at the World Trade Center Recovery Operation on Staten Island?

1 FDNY (includes Ladder Co, Hazmat)
2 Fire Department Personnel (NON-NYC)
3 FDNY-EMS
4 Other NYC EMS
5 EMS (NON-NYC)
6 DMATs, Medcor, other
7 Medical Examiners Office (Morgue attendants, Mes)
8 NYPD (CSUs, uniformed personnel, non-uniformed personnel)
9 Port Authority Police (PAP)
10 Other Port Authority personnel
11 NYS Law Enforcement (State troopers)
12 Federal Law Enforcement (FBI, etc)
13 US Corps of Engineers
14 US Corps of Engineers Contractor (EE&G)
15 US Corps of Engineers Contractor Phillips and Jordan
16 Volunteer Organization (Red Cross, Salvation Army, etal)
17 Volunteer (non-affiliated)
18 Coast Guard
19 National Guard
20 Secret Service
21 US Environmental Protection Agency
22 Federal Agency not referred to above
23 New York State Department of Environmental Services
24 Urban Search & Rescue Teams NYS, NYC, Other
25 NYS Agency not referred to above
26 MTA, Transit Authority
27 NYC DEPT OF SANITATION
28 NYC DEPT OF DESIGN AND CONSTRUCTION (DDC)
29 NYC Agency not referred to above
30 Utility Companies (phone/gas/cable/water/electric)
    Construction Companies (Steel workers, engineers, transport, debris removal, grapple and excavator, demolition, etc)
31 Dust control company
32 Pest control company
33 Clergy
34 OTHER (SPECIFY)
DON’T KNOW
REFUSED

W36
[ASK IF W26=2 OR 3. ELSE, SKIP TO RESIDENT SECTION.]

What was [your/SUBJECT’s] first day working on a barge?

MM/DD/YYYY
DON’T KNOW
REFUSED

[EDIT CHECK: ALLOW ONLY DATES BEFORE 6/30/02.]

W37
What was [your/SUBJECT’s] last day working on a barge?

MM/DD/YYYY
DON’T KNOW
REFUSED

[EDIT CHECK: ALLOW ONLY DAYS AFTER 9/11.]

[CONSISTENCY CHECK: IF W37 < W36 DISPLAY CONSISTENCY CHECK.

I have recorded that [your/SUBJECT’s] last day at the site was [W37] but that [your/SUBJECT’s] first date was [W36]. Which is correct?

1=W37
2=W36

IF ANSWER=1 BO BACK TO W36. IF ANSWER=2 GO BACK TO W37.]

W38
[ASK IF W36=9/12]


1 all of the time
2 most of the time
3 some of the time, or
4 not at all?
DON’T KNOW
REFUSED

W39
[ASK IF STARTED BEFORE 9/18 AND LAST DAY WAS NOT 9/12.]
How many days did [you/SUBJECT] work on a barge from September 13th to September 17th, 2001?

1. 0 DAYS
2. 1 DAY
3. 2 DAYS
4. 3 DAYS
5. 4 DAYS
6. 5 DAYS
7. EVERY DAY
Don't know
Refused

[Consistency check: if W37-W36 < lower bound of number of days in W39, display consistency check.

I have recorded that [you/SUBJECT] worked [W39 days] on a barge from September 13th to September 17th, 2001, but that [you/he/she] only worked from [W36 DATE] to [W37 DATE]. Which is correct?

1. WORKED [W39 DAYS] ON A BARGE
2. WORKED FROM [W36 DATE] TO [W37 DATE].

If answer=1, return to W36. If answer=2, return to W39.]

W40
[Ask if W39=2 - 7]

From September 13th to September 17th, 2001, did [you/SUBJECT] wear a mask . . .

1. all of the time
2. most of the time
3. some of the time, or
4. not at all?
Don't know
Refused

W41
[Ask if first day is before 1/1/02. Skip if last day was before 9/18]

How many days did [you/SUBJECT] work (on a barge) from September 18th to December 31st, 2001?

Read categories as necessary.

1. 0 DAYS
2. 1 TO 2 DAYS
3. 3 TO 6 DAYS
4  7 TO 30 DAYS
5  31 TO 60 DAYS
6  MORE THAN 60 DAYS
DON’T KNOW
REFUSED

[CONSISTENCY CHECK: IF W37-W36 < LOWER BOUND OF NUMBER OF DAYS IN W41, DISPLAY CONSISTENCY CHECK.

I have recorded that [you/SUBJECT] worked [W41 days] on a barge from September 18th to December 31st, 2001, but that [you/he/she] only worked from [W36 DATE] to [W37 DATE]. Which is correct?

1  WORKED [W41 DAYS] ON A BARGE
2  WORKED FROM [W36 DATE] TO [W37 DATE].

IF ANSWER=1, RETURN TO W36. IF ANSWER =2, RETURN TO W41.]

W42

[ASK IF W41=2-6]

From September 18th to December 31st, 2001, did [you/SUBJECT] wear a mask . . .

1  all of the time
2  most of the time
3  some of the time, or
4  not at all?
DON’T KNOW
REFUSED

W43

[SKIP IF LAST DAY WAS BEFORE 1/1]

How many days did [you/SUBJECT] work (on a barge) after December 31st, 2001?

1  0 DAYS
2  1 TO 2 DAYS
3  3 TO 6 DAYS
4  7 TO 30 DAYS
5  31 TO 60 DAYS
6  MORE THAN 60 DAYS
DON’T KNOW
REFUSED

[CONSISTENCY CHECK: IF W37-W36 < LOWER BOUND OF NUMBER OF DAYS IN W43, DISPLAY CONSISTENCY CHECK.

I have recorded that [you/SUBJECT] worked [W43 days] on a barge after December 31st, 2001, but that [you/he/she] only worked from [W36 DATE] to [W37 DATE].
Which is correct?

1 WORKED [W43 DAYS] ON A BARGE
2 WORKED FROM [W36 DATE] TO [W37 DATE].

IF ANSWER=1, RETURN TO W36. IF ANSWER =2, RETURN TO W43.]

W44

[ASK IF W43=2-6]


1 all of the time
2 most of the time
3 some of the time, or
4 not at all?
DON’T KNOW
REFUSED

Resident [ASK IF RESIDENT=1. ELSE SKIP TO HEALTH SECTION.]

RES1
As a result of the World Trade Center disaster, did [you/SUBJECT] have to leave (your/his/her) home?

1 YES
2 NO SKIP TO RES 5
DON’T KNOW SKIP TO RES 5
REFUSE SKIP TO RES 5

RES2
Did [you/SUBJECT] ever return to live in (your/his/her) home after (you/he/she) left?

1 YES
2 NO SKIP TO RES 7
DON’T KNOW SKIP TO RES 7
REFUSE SKIP TO RES 7

RES3
What date did [you/SUBJECT] go back home to live?

KEY DATES FROM 2001:
YOM KIPPUR – SEPTEMBER 27
ROSH HASHANAH – SEPTEMBER 18-19
COLUMBUS DAY – OCTOBER 8
VETERANS DAY – NOVEMBER 11

Final Quex -- 031904
THANKSGIVING DAY – NOVEMBER 22
HANUKKAH – DECEMBER 10-17

IF RESPONDENT IS UNABLE TO PROVIDE DATE, USE ALTERNATE OPTION BELOW.

MM/DD/YYYY

ALTERNATE RESPONSE OPTION:

ABOUT ____ DAYS/WEEKS/MONTHS AFTER 9/11

DON’T KNOW
REFUSED

[CHECK DATE IN RES 3 IS BEFORE JANUARY 1, 2002. IF NOT GO TO RES5]

RES4

From September 11th, 2001 to December 31st, 2001, how many nights did [you/SUBJECT] sleep in (your/his/her) home?

KEY DATES FROM 2001:
YOM KIPPUR – SEPTEMBER 27
ROSH HASHANAH – SEPTEMBER 18-19
COLUMBUS DAY – OCTOBER 8
VETERANS DAY – NOVEMBER 11
THANKSGIVING DAY – NOVEMBER 22
HANUKKAH – DECEMBER 10-17

ENTER ANSWER IN DAYS, WEEKS OR MONTHS.

DAYS ______ [0 TO 120]

WEEKS______ [0-12]

MONTHS _________[ 0 – 3]

DON’T KNOW
REFUSE

[SOFT RANGE CHECK: IF RES4=DK, DISPLAY: Please give me your best estimate. You can provide your answer in days, weeks, or months. If it would help you remember, I can tell you the dates of some of the major holidays in 2001.]

[CONSISTENCY CHECK: IF DATE IN RES3 – 9/11/01 < DAYS, WEEKS, OR MONTHS IN RES4, DISPLAY CONSISTENCY CHECK:}
I have recorded that [you/SUBJECT] slept in [your/his/her] home for [RES4 DAYS/WEEKS/MONTHS] from September 11th to December 31st 2001, but that [you/SUBJECT] went back home to live on [RES3 DATE]. Which is correct?

2. WENT BACK HOME TO LIVE ON [RES3 DATE].
3. BOTH ARE CORRECT.

IF ANSWER=1, GO BACK TO RES3. IF ANSWER=2 RETURN TO RES4. ELSE CONTINUE TO NEXT QUESTION.

RES5

[IF SPAWN AND PROXY IS SAME RESPONDENT, SKIP TO HLTH1.]

The next questions are about cleaning your home after 9/11. When did you first attempt to clean your home after 9/11/01?

KEY DATES FROM 2001:
YOM KIPPUR – SEPTEMBER 27
ROSH HASHANAH – SEPTEMBER 18-19
COLUMBUS DAY – OCTOBER 8
VETERANS DAY – NOVEMBER 11
THANKSGIVING DAY – NOVEMBER 22
HANUKKAH – DECEMBER 10-17

IF RESPONDENT IS UNABLE TO PROVIDE DATE, USE ALTERNATE OPTION BELOW.

MM/DD/YYYY

ALTERNATE RESPONSE OPTION:
ABOUT ____ DAYS/WEEKS/MONTHS AFTER 9/11 DID NOT CLEAN [SKIP TO RES7]
DON’T KNOW
REFUSED

[SOFT EDIT CHECK: IF RES5=DK, DISPLAY: Please give me your best estimate. If you can't remember the exact date, you can provide your answer in days, weeks, or months after 9/11. If it would help you remember, I can tell you the dates of some of the major holidays in 2001.]

RES6

How did [you/SUBJECT] clean your home during the first cleaning(s) after 9/11? Did [you/he/she] use . . .

SELECT ALL THAT APPLY
NOTE: A HEPA FILTER IS A HIGH ENERGY PARTICULATE AIR FILTER THAT REMOVES VERY SMALL DUST AND MICROBE PARTICLES FROM THE AIR.

1 damp cloth/wet mop/damp sponge
2 vacuum with a HEPA filter
3 vacuum without a HEPA filter
4 dusted/swept w/o water
5 OTHER
6 DID NOT CLEAN
DON'T KNOW
REFUSED

RES7
How many people, including (yourself/SUBJECT), lived in (your/his/her) home on September 11th, 2001?

PEOPLE: _____ [IF 1 SKIP TO NEXT SECTION.]
DON'T KNOW [SKIP TO NEXT SECTION]
REFUSED [SKIP TO NEXT SECTION]

RES8
[SKIP IF SPAWN=1 AND I9=1]
Please tell me the name, age, date of birth, and sex of each person living in [your/SUBJECT's] household on September 11th, 2001, not including [yourself/SUBJECT.] Start with the oldest person and work down in age.

IF NAMES ARE PRELOADED, REVIEW THE LIST AND INDICATE WHETHER EACH PERSON IN THE LIST BELOW IS NAMED BY R. FOLLOW UP WITH PROBES FOR AGE, DOB, AND SEX IF IT IS UNCLEAR WHETHER R IS NAMING LISTED PERSON.

IF R DOES NOT NAME ONE OR MORE PEOPLE ON THE LIST, PROBE TO DETERMINE IF THAT PERSON SHOULD BE NAMED.

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>DOB</th>
<th>Sex</th>
<th>Did R name this person?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person 1 Name</td>
<td>28</td>
<td>8-4-74</td>
<td>M</td>
<td>1=Yes</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>2=No</td>
</tr>
<tr>
<td>Person 2 Name</td>
<td>28</td>
<td>11-11-74</td>
<td>F</td>
<td>1=Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2=No</td>
</tr>
<tr>
<td>Person 3 Name</td>
<td>5</td>
<td>9-1-97</td>
<td>M</td>
<td>1=Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2=No</td>
</tr>
</tbody>
</table>

BUTTONS: “CONTINUE” “ADD NAME(S)”
Note: Interviewer will indicate whether or not R reported HH member by selecting “Yes” or “No” in the “Named by R?” column. Interviewer will probe all names listed that R does not mention. Interviewer will select “ADD NAME” to add additional names to the list.

Health

HLTH1
The next questions are about [your/SUBJECT’s health since 9/11. We’d like to find out about symptoms [you/SUBJECT] may have had after 9/11, as well as symptoms [you/SUBJECT] had before 9/11 that have gotten worse since then. On 9/11, did [you/SUBJECT] have any of the following injuries as a result of the World Trade Center terrorist attack?

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>REF</th>
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<tbody>
<tr>
<td>a.</td>
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</tbody>
</table>

HLTH2
Since 9/11, [have you/has SUBJECT] had any of the following symptoms?

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>REF</th>
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<tbody>
<tr>
<td>a.</td>
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HLTH3a
[ASK IF HLTH2a=1]

Before 9/11 did [you/SUBJECT] have wheezing?

1  YES
2  NO
DONT\'T KNOW
REFUSED

HLTH3b
[ASK IF HLTH3a=1]

Did [your/SUBJECT\’s] wheezing get worse after 9/11?
1  YES
2  NO
DONT\'T KNOW
REFUSED

HLTH4a
[ASK IF HLTH2b=1]

Before 9/11 did [you/SUBJECT] have shortness of breath?
1  YES
2  NO
DONT\'T KNOW
REFUSED

HLTH4b
[ASK IF HLTH4a=1]

Did [your/SUBJECT\’s] shortness of breath get worse after 9/11?
1  YES
2  NO
DONT\'T KNOW
REFUSED

HLTH5a
[ASK IF HLTH2c=1]

Before 9/11 did [you/SUBJECT] have a persistent cough?
1  YES
2  NO
DONT\'T KNOW
REFUSED

HLTH5b
[ASK IF HLTH5a=1]

Did [your/SUBJECT\’s] persistent cough get worse after 9/11?
YES
NO
DON’T KNOW
REFUSED

HLTH6a
[ASK IF HLTH2d=1]

Before 9/11 did [you/SUBJECT] have sinus problems, nose irritation, or post nasal irritation?

YES
NO
DON’T KNOW
REFUSED

HLTH6b
[ASK IF HLTH6a=1]

Did [your/SUBJECT’s] sinus problems, nose irritation, or post nasal irritation get worse after 9/11?

YES
NO
DON’T KNOW
REFUSED

HLTH7a
[ASK IF HLTH2e=1]

Before 9/11 did [you/SUBJECT] have an eye irritation?

YES
NO
DON’T KNOW
REFUSED

HLTH7b
[ASK IF HLTH7a=1]

Did [your/SUBJECT’s] eye irritation get worse after 9/11?

YES
NO
DON’T KNOW
REFUSED
HLTH8a
[ASK IF HLTH2f=1]
Before 9/11 did [you/SUBJECT] have a throat irritation?
1 YES
2 NO
DON’T KNOW
REFUSED

HLTH8b
[ASK IF HLTH8a=1]
Did [your/SUBJECT’S] throat irritation get worse after 9/11?
1 YES
2 NO
DON’T KNOW
REFUSED

HLTH9a
[ASK IF HLTH2g=1]
Before 9/11 did [you/SUBJECT] have a skin rash or irritation?
1 YES
2 NO
DON’T KNOW
REFUSED

HLTH9b
[ASK IF HLTH9a=1]
Did [your/SUBJECT’S] skin rash or irritation get worse after 9/11?
1 YES
2 NO
DON’T KNOW
REFUSED

HLTH10a
[ASK IF HLTH2h=1]
Before 9/11 did [you/SUBJECT] have a hearing problem or hearing loss?
1 YES
2 NO
DON’T KNOW
REFUSED

HLTH10b
[ASK IF HLTH10a=1]
Did [your/SUBJECT’s] hearing problem or hearing loss get worse after 9/11?
1 YES
2 NO
DON’T KNOW
REFUSED

HLTH11a
[ASK IF HLTH2i=1]
Before 9/11 did [you/SUBJECT] have frequent severe headaches?
1 YES
2 NO
DON’T KNOW
REFUSED

HLTH11b
[ASK IF HLTH11a=1]
Did [your/SUBJECT’s] frequent severe headaches get worse after 9/11?
1 YES
2 NO
DON’T KNOW
REFUSED

HLTH12a
[ASK IF HLTH2j=1]
Before 9/11 did [you/SUBJECT] have heartburn, indigestion, or reflux?
1 YES
2 NO
DON’T KNOW
REFUSED

HLTH12b
[ASK IF HLTH12a=1]
Did [your/SUBJECT’s] heartburn, indigestion, or reflux get worse after 9/11?
1 YES
2 NO
DON’T KNOW
REFUSED

HLTH13a
[ASK IF HLTH2k=1]
Before 9/11 did [you/SUBJECT] have depression, anxiety or any other emotional problem?

1 YES
2 NO
DON’T KNOW
REFUSED

HLTH13b
[ASK IF HLTH13a=1]
Did [your/SUBJECT’s] depression, anxiety, or other emotional problem get worse after 9/11?

1 YES
2 NO
DON’T KNOW
REFUSED

HLTH14a
[ASK IF HLTH2l=1]
Before 9/11 did [you/SUBJECT] have [FILL OTHER PROBLEM]?

1 YES
2 NO
DON’T KNOW
REFUSED

HLTH14b
[ASK IF HLTH14a=1]
Did [your/SUBJECT’s] [FILL OTHER PROBLEM] get worse after 9/11?

1 YES
2 NO
DON’T KNOW
REFUSED

HLTH15
The next questions ask about health conditions diagnosed by a doctor, that [you/SUBJECT] ever had, including before 9/11. [Have you/Has SUBJECT] ever been told by a doctor or other health professional that you had . . .

YES NO DK REF
a Asthma
b Hypertension, also called high blood pressure
c Coronary heart disease
d Angina, also called angina pectoris
e A heart attack (also called myocardial infarction)
f Any other kind of heart condition or heart disease
g A stroke
h Emphysema
i Diabetes or sugar diabetes
j Cancer or a malignancy of any kind.

**HLTH16a**  
[IF HLTH15a=1]  
Did a doctor or other health professional first tell [you/SUBJECT] that [you/he/she] had asthma before 9/11 or after 9/11?  

1 BEFORE 9/11  
2 AFTER 9/11  
DON’T KNOW  
REFUSED  

**HLTH16b**  
[IF HLTH15b=1]  
Did a doctor or other health professional first tell [you/SUBJECT] that [you/he/she] had hypertension, also called high blood pressure, before 9/11 or after 9/11?  

1 BEFORE 9/11  
2 AFTER 9/11  
DON’T KNOW  
REFUSED  

**HLTH16c**  
[IF HLTH15c=1]  
Did a doctor or other health professional first tell [you/SUBJECT] that [you/he/she] had coronary heart disease before 9/11 or after 9/11?  

1 BEFORE 9/11  
2 AFTER 9/11  
DON’T KNOW  
REFUSED  

**HLTH16d**  
[IF HLTH15d=1]  
Did a doctor or other health professional first tell [you/SUBJECT] that [you/he/she] had angina (also called angina pectoris) before 9/11 or after 9/11?  

1 BEFORE 9/11
2 AFTER 9/11
DON’T KNOW
REFUSED

HLTH16e
[IF HLTH15e=1]

Did a doctor or other health professional first tell [you/SUBJECT] that [you/he/she] had a heart attack (also called myocardial infarction) before 9/11 or after 9/11?

1 BEFORE 9/11
2 AFTER 9/11
DON’T KNOW
REFUSED

HLTH16f
[IF HLTH15f=1]

Did a doctor or other health professional first tell [you/SUBJECT] that [you/he/she] had any other kind of heart condition or heart disease before 9/11 or after 9/11?

1 BEFORE 9/11
2 AFTER 9/11
DON’T KNOW
REFUSED

HLTH16g
[IF HLTH15g=1]

Did a doctor or other health professional first tell [you/SUBJECT] that [you/he/she] had a stroke before 9/11 or after 9/11?

1 BEFORE 9/11
2 AFTER 9/11
DON’T KNOW
REFUSED

HLTH16h
[IF HLTH15h=1]

Did a doctor or other health professional first tell [you/SUBJECT] that [you/he/she] had a emphysema before 9/11 or after 9/11?

1 BEFORE 9/11
2 AFTER 9/11
DON’T KNOW
REFUSED
HLTH16i
[IF HLTH15i=1]

Did a doctor or other health professional first tell [you/SUBJECT] that [you/he/she] had diabetes or sugar diabetes before 9/11 or after 9/11?

1 BEFORE 9/11
2 AFTER 9/11
DON’T KNOW
REFUSED

HLTH16j
[IF HLTH15j=1]

Did a doctor or other health professional first tell [you/SUBJECT] that [you/he/she] had cancer or a malignancy of any kind before 9/11 or after 9/11?

1 BEFORE 9/11
2 AFTER 9/11
DON’T KNOW
REFUSED

HLTH16k
[ASK IF HLTH15j=1]

What kind of cancer was it?

1 BLADDER
2 BLOOD
3 BONE
4 BRAIN
5 BREAST
6 CERVIX
7 COLON
8 ESOPHAGUS
9 GALLBLADDER
10 KIDNEY
11 LARYNX-WINDPIPE
12 LEUKEMIA
13 LIVER
14 LUNG
15 LYMPHOMA
16 MELANOMA
17 MOUTH/TONGUE/LIP
18 OVARY
19 PANCREAS
20 PROSTATE
21 RECTUM
22 SKIN (NON-MELANOMA)
23 SKIN (DON’T KNOW WHAT KIND)
24 SOFT TISSUE
25 STOMACH
26 TESTIS
27 THROAT – PHARYNX
28 THYROID
29 UTERUS
30 OTHER
DON’T KNOW
REFUSED

HLTH17a

[IF PROXY IS ANSWERING FOR A CHILD YOUNGER THAN 18 YEARS OF AGE THEN SKIP TO HLTH36]

During the past 30 days, that is, since (REFERENCE DATE) how often did [you/SUBJECT] feel …

So sad that nothing could cheer [you/SUBJECT] up?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time
DON’T KNOW
REFUSED

HLTH17b

During the past 30 days, that is, since (REFERENCE DATE) how often did [you/SUBJECT] feel …

Nervous?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time
DON’T KNOW
REFUSED

HLTH17c

During the past 30 days, that is, since (REFERENCE DATE) how often did [you/SUBJECT] feel …

Restless or fidgety?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
During the past 30 days, that is, since (REFERENCE DATE) how often did [you/SUBJECT] feel …

**Hopeless?**

1. All of the time
2. Most of the time
3. Some of the time
4. A little of the time
5. None of the time

**That everything was an effort?**

1. All of the time
2. Most of the time
3. Some of the time
4. A little of the time
5. None of the time

**Worthless?**

1. All of the time
2. Most of the time
3. Some of the time
4. A little of the time
5. None of the time

[ASK HLTH18 IF AT LEAST ONE OF HLTH17a-f =1-3. ELSE SKIP TO HLTH19. ]
We just talked about a number of feelings [you/SUBJECT] had during the past 30 days, that is, since (REFERENCE DATE). Altogether, how much did these feelings interfere with [your/SUBJECT’s] life or activities: a lot, some, a little, or not at all?

1  A LOT
2  SOME
3  A LITTLE
4  NOT AT ALL
DON’T KNOW
REFUSED

HLTH19
I’m going to read you a list of problems and complaints that people sometimes have in response to stressful life experiences like the events of 9/11. Please tell me how much [you have/SUBJECT has] been bothered by each problem during the past 4 weeks, that is, since [REFERENCE DATE]

In the past 4 weeks, how much [have you/has SUBJECT] been bothered by repeated, disturbing memories, thoughts, or images of the events of 9/11?

1  Not at all
2  A little bit
3  Moderately
4  Quite a bit
5  Extremely
DON’T KNOW
REFUSED

HLTH20
In the past 4 weeks, how much [have you/has SUBJECT] been bothered by repeated, disturbing dreams of the events of 9/11?

1  Not at all
2  A little bit
3  Moderately
4  Quite a bit
5  Extremely
DON’T KNOW
REFUSED

HLTH21
In the past 4 weeks, how much [have you/has SUBJECT] been bothered by suddenly acting or feeling as if the events of 9/11 were happening again (as if [you/SUBJECT] were reliving them)?

1  Not at all
2  A little bit
3  Moderately
4  Quite a bit
5  Extremely
DON’T KNOW
REFUSED

HLTH22
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by) feeling very upset when something reminded you of the events of 9/11?

1  Not at all
2  A little bit
3  Moderately
4  Quite a bit
5  Extremely
DON’T KNOW
REFUSED

HLTH23
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by) having physical reactions (e.g., heart pounding, trouble breathing, sweating) when something reminded you of the events of 9/11?

1  Not at all
2  A little bit
3  Moderately
4  Quite a bit
5  Extremely
DON’T KNOW
REFUSED

HLTH24
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by) avoiding thinking about or talking about the events of 9/11 or avoiding having feelings related to it?

1  Not at all
2  A little bit
3  Moderately
4  Quite a bit
5 Extremely
DON’T KNOW
REFUSED

HLTH25
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by)
avoiding activities or situations because they reminded you of the events of 9/11?

1 Not at all
2 A little bit
3 Moderately
4 Quite a bit
5 Extremely
DON’T KNOW
REFUSED

HLTH26
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by)
trouble remembering important parts of the events of 9/11?

1 Not at all
2 A little bit
3 Moderately
4 Quite a bit
5 Extremely
DON’T KNOW
REFUSED

HLTH27
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by) loss
of interest in activities that you used to enjoy?

1 Not at all
2 A little bit
3 Moderately
4 Quite a bit
5 Extremely
DON’T KNOW
REFUSED

HLTH28
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by)
feeling distant or cut off from other people?

1 Not at all
2 A little bit
3 Moderately
4 Quite a bit
5 Extremely
DON’T KNOW
REFUSED

HLTH29
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by)
feeling emotionally numb or being unable to have loving feelings for those close
to you?
1 Not at all
2 A little bit
3 Moderately
4 Quite a bit
5 Extremely
DON’T KNOW
REFUSED

HLTH30
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by)
feeling as if your future somehow will be cut short?
1 Not at all
2 A little bit
3 Moderately
4 Quite a bit
5 Extremely
DON’T KNOW
REFUSED

HLTH31
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by)
trouble falling or staying asleep?
1 Not at all
2 A little bit
3 Moderately
4 Quite a bit
5 Extremely
DON’T KNOW
REFUSED
HLTH32
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by)
feeling irritable or having angry outbursts?

1  Not at all
2  A little bit
3  Moderately
4  Quite a bit
5  Extremely
DON’T KNOW
REFUSED

HLTH33
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by)
having difficulty concentrating?

1  Not at all
2  A little bit
3  Moderately
4  Quite a bit
5  Extremely
DON’T KNOW
REFUSED

HLTH34
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by)
being "superalert" or watchful or on guard?

1  Not at all
2  A little bit
3  Moderately
4  Quite a bit
5  Extremely
DON’T KNOW
REFUSED

HLTH35
(In the past 4 weeks, how much [have you/has SUBJECT] been bothered by)
feeling jumpy or easily startled?

1  Not at all
2  A little bit
3  Moderately
4  Quite a bit
5  Extremely
DON’T KNOW
For these next questions, we want you to tell us what you’ve learned or been told about [SUBJECT]’s behavior during the past 4 weeks, that is, since [REFERENCE DATE] in relation to the World Trade Center disaster.

In the past 4 weeks, has [SUBJECT] often thought about what happened at the World Trade Center or what [he/she] saw?

1 YES
2 NO
DON’T KNOW
REFUSED

In the past 4 weeks, has [SUBJECT] had problems falling asleep or staying asleep because of 9/11?

1 YES
2 NO
DON’T KNOW
REFUSED

In the past 4 weeks, has [SUBJECT] had a lot of nightmares because of 9/11?

1 YES
2 NO
DON’T KNOW
REFUSED

(In the past 4 weeks,) has [SUBJECT] tried not to think about the World Trade Center attack and does not want to hear about it or talk about it?

1 YES
2 NO
DON’T KNOW
REFUSED

HLTH40
(In the past 4 weeks,) has [SUBJECT] avoided going places or doing things that might make (him/her) think about the attack?

1  YES
2  NO
DON’T KNOW
REFUSED

HLTH41
(In the past 4 weeks,) has [SUBJECT] tried to keep away from people who might remind (him/her) of the World Trade Center attack?

1  YES
2  NO
DON’T KNOW
REFUSED

HLTH42
(In the past 4 weeks,) has [SUBJECT] avoided thinking about the future or about things (he/she) might do when (he/she) are older because of 9/11?

1  YES
2  NO
DON’T KNOW
REFUSED

HLTH43
(In the past 4 weeks,) has it been hard for SUBJECT to keep her/his mind on things or to concentrate because of 9/11?

1  YES
2  NO
DON’T KNOW
REFUSED

PTSD Scoring (Lifenet variable)

IF HLTH17a + HLTH17b + HLTH17c + HLTH17d + HLTH17e + HLTH17f < 12 AND HLTH19 + HLTH20 + HLTH21 + HLTH22 + HLTH23 + HLTH24 + HLTH25 + HLTH26 + HLTH27 + HLTH28 + HLTH29 + HLTH30 + HLTH31 + HLTH32 + HLTH33 + HLTH34 + HLTH35 = 45 – 49 SET LIFENET=1.

IF HLTH19 + HLTH20 + HLTH21 + HLTH22 + HLTH23 + HLTH24 + HLTH25 + HLTH26 + HLTH27 + HLTH28 + HLTH29 + HLTH30 + HLTH31 + HLTH32 + HLTH33 + HLTH34 + HLTH35 >= 50 SET LIFENET = 1.

IF AT LEAST 5 QUESTIONS BETWEEN HLTH36 AND HLTH43 = 1 SET
LIFENET=1.

ELSE SET LIFENET=0.

HLTH44

[ASK IF LIFENET=1. ELSE SKIP TO HLTH45.]

Before we continue, I want to let you know about a toll free number that you can call 24 hours a day, 7 days a week to get free counseling and other services: 1-800-LIFENET. We will be sending you additional information about the services available through LifeNet but I’d like to give you the number now in case [you/SUBJECT] want to talk with someone about September 11th before you receive these materials in the mail.

HLTH45

[IF CURRENT AGE < 12 SKIP TO D1.]

This next question is about smoking. (Have you/Has SUBJECT) smoked at least 100 cigarettes in (your/his/her) entire life? (A pack is about 20 cigarettes.)

1 YES
2 NO  SKIP TO D1
DON’T KNOW  SKIP TO D1
REFUSED   SKIP TO D1

HLTH46

Do [you/SUBJECT] now smoke cigarettes every day, some days, or not at all?

1 EVERY DAY
2 SOME DAYS
3 NOT AT ALL  SKIP TO D1
DON’T KNOW  SKIP TO D1
REFUSED   SKIP TO D1

HLTH47

How many cigarettes on average [do you/does SUBJECT] smoke per day?

NUMBER: ______ [RANGE: 0 – 100]
DON’T KNOW
REFUSED
Next, we will be asking for personal information to help us find [you/SUBJECT] in the future. This next question is about [your/SUBJECT's] social security number. We want you to know that giving us [your/SUBJECT's] social security number is voluntary. We will keep [your/SUBJECT's] number private. [Your/SUBJECT's] number will not be made public. We will use [your/SUBJECT's] social security number to match to other health registries. We will also use it to try to let [you/SUBJECT] know about future follow-up studies. As with any question in this survey, you may refuse to answer it if you like.

What is [your/SUBJECT's] Social Security Number?

NOTE: CHINESE RESPONDENTS MAY REFER TO "WORKER CARD NUMBER" INSTEAD OF SSN. IF SSN IS NOT APPLICABLE, ENTER "N/A" IN FIELD BELOW.

(The social security number is important for health studies such as this one. It helps obtain records from other government agencies to track the long-term health effects of 9/11. It also helps us contact [you/SUBJECT] in the future. We know this is personal, but our project has a Federal Certificate of Confidentiality. This means researchers cannot be forced to give personal data by subpoena or court order. [Your/SUBJECT’s] social security number will remain private and protected.)

SSN: _ _ _ - _ _ - _ _ _ _

NOT APPLICABLE (NO SSN)
DON’T KNOW
REFUSED

[SOFT EDIT CHECK: DISPLAY IF D1=DK OR REF: Will you tell me the last 4 digits only of [your/SUBJECT’s] social security number? While not as useful as the whole number, the last 4 digits will help us to match to other health registries.]

(D2)

(Are you/Is SUBJECT) Hispanic or (Latino/Latina)?

1 YES
2 NO
DON’T KNOW
REFUSED

(D3)

Which of the following would you say is [your/SUBJECT’s] race? You may select more than one category.

1 White
2 Black or African American
The next question is about [your/subject’s] household income. What was [your/subject’s] total household income in 2002 before taxes?

(As with any question in this survey, you may refuse to answer it if you like. Giving us [your/subject’s] income is completely voluntary. We will keep your answer private. If you choose to not give us your income, you can still participate in the Registry.)

1. Less than $10,000
2. $10,000 to less than $15,000
3. $15,000 to less than $25,000
4. $25,000 to less than $35,000
5. $35,000 to less than $50,000
6. $50,000 to less than $75,000
7. $75,000 to less than $100,000
8. $100,000 to less than $150,000
9. $150,000 to less than $200,000
10. $200,000 or more

Don’t Know
Refused

[Soft edit check: Display if D4=DK or REF. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.]

[Skip if age <15]

What is [your/subject’s] current marital status? Would you say . . .

1. Now married
2. Not married, but living with partner
3. Widowed
4. Divorced
5. Separated, or
6. Never married

Don’t Know
Refused

D6
[ASK ONLY IF AGE=15 – 50 ON 9/11 AND GENDER=FEMALE.]

[Were you/Was SUBJECT] pregnant on September 11th, 2001?

1 YES
2 NO
DON’T KNOW
REFUSED

D7
What is the highest grade or year of school [you/SUBJECT] completed?

1 NEVER ATTENDED SCHOOL OR ONLY ATTENDED KINDERGARTEN
2 GRADES 1 THROUGH 8 (ELEMENTARY)
3 GRADES 9 THROUGH 11 (SOME HIGH SCHOOL)
4 GRADE 12 OR GED (HIGH SCHOOL GRADUATE)
5 COLLEGE 1 YEAR TO 3 YEARS (SOME COLLEGE OR TECHNICAL SCHOOL)
6 COLLEGE 4 YEARS OR MORE (COLLEGE GRADUATE)
7 POSTGRADUATE DEGREE
DON’T KNOW
REFUSED

D8
[IF AGE <12 ON 9/11, SKIP TO C1]

On September 11th, 2001, [were you/was SUBJECT] employed? By employed, I mean working at a job or business or self-employed.

1 YES
2 NO [SKIP TO D10]
DON’T KNOW [SKIP TO D10]
REFUSED [SKIP TO D10]

D9
[SKIP IF E20=1 OR E21=1]

What company, organization or business did [you/SUBJECT] work for?

NOTE: IF SELF EMPLOYED, AND NO COMPANY NAME TYPE IN “SELF-EMPLOYED”.

___________

D10
[SKIP IF CURRENT AGE< 12.]

(Are you/Is SUBJECT) currently employed at a job or business or self-employed?

1 YES
Revised Contact and Locating Section

C1

[SKIP IF ADDRESS IN ELIGIBILITY SECTION IS BLANK.]

We are nearing the end of the interview. Before we end, I’d like to get some contact information from you. In order to better understand the impact of the World Trade Center disaster, researchers may want to include [you/SUBJECT] in other studies. These studies would be approved by the New York City Department of Health and Mental Hygiene to ensure that they are appropriately conducted.

Earlier, you reported that [your/SUBJECT’s] primary home address on September 11th, 2001 was:

[FILL ADDRESS VERIFIED IN E5.]

Is this still [your/SUBJECT’s] primary home address?

1 YES [SKIP TO C3]
2 NO
DON’T KNOW
REFUSED

C2

What is [your/SUBJECT’s] current home address?

NOTE: PROBE FOR COMPLETE ADDRESS INFORMATION.

NUMBER AND STREET, APT. NO.,
CITY, STATE ZIP CODE
DON’T KNOW
REFUSED

C3

[IF AGE < 18 SKIP TO C5.]

Now I’d like to record/verify [your/SUBJECT’s] phone numbers.

HOME PHONE: ( )__________ DK REF
WORK PHONE: ( )__________ DK REF
CELL PHONE: ( )__________ DK REF
[Do you/Does SUBJECT] have an email address?

1 YES (SPECIFY WORK AND HOME EMAIL ADDRESSES)
2 NO
DON’T KNOW
REFUSED

C5

[IF THIS IS A CASE WHERE SPAWN=1, AT LEAST ONE ADDITIONAL INTERVIEW HAS BEEN CONDUCTED ON THIS CALL WITH THE SAME PERSON ON PHONE, SKIP TO CS1.]

[ASK IF PROXY. ELSE SKIP TO C8]

Now I need some information about you, not [SUBJECT]. What is your home address?

(We need your contact information because we may want to collect more information about SUBJECT as part of a future study of the effects of the World Trade Center Disaster.)

NOTE: PROBE FOR COMPLETE ADDRESS INFORMATION.

NUMBER AND STREET, APT. NO.,
CITY, STATE ZIP CODE
DON’T KNOW
REFUSED

C6

Now I’d like to record your phone numbers.

HOME PHONE: (   )__________ DK REF
WORK PHONE:  (   )__________ DK REF
CELL PHONE:  (   )__________ DK REF

C7

Do you have an email address?

1 YES (SPECIFY WORK AND HOME EMAIL ADDRESSES)
2 NO
DON’T KNOW
REFUSED

C8

Is there someone who does not live with you who can always reach [you/SUBJECT]?

(We are collecting contact information on close friends or family members who don’t live with registrants in case we have problems getting in touch with [you/SUBJECT] as part of a future study. Registry data may be analyzed for up to 20 years as new information is obtained about the effects of the World Trade Center disaster.)
[SOFT EDIT CHECK: IF C8=DK OR REF, DISPLAY: Because of the necessity to track the long term health effects of the World Trade Center disaster over time, information on how to get back in touch with you is very important to the success of future studies. Close friends and family members are usually the best source of this information. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and will not be used for any other purpose. We will never contact your friends or family for any other reason other than to get in touch with you.]

C9
What is that person’s name?

FIRST NAME  MIDDLE INITIAL  LAST NAME  SUFFIX
DON’T KNOW  REFUSED

C10
What is this person’s relationship to [you/SUBJECT]?

1  SPOUSE OR SIGNIFICANT OTHER
2  PARENT
3  SON/DAUGHTER
4  BROTHER OR SISTER
5  FRIEND
6  OTHER (SPECIFY: ________________)
DON’T KNOW  REFUSED

C11
What is this person’s home address?

NUMBER AND STREET, APT. NO.,
CITY, STATE ZIP CODE
COUNTRY:__________________
DON’T KNOW  REFUSED

C12
What are this person’s telephone numbers?

NOTE: IF YOU ARE ENTERING AN INTERNATIONAL NUMBER, THE NUMBER
C13

Does this person have an email address?

1  YES (SPECIFY WORK AND HOME EMAIL ADDRESSES)
2  NO
DON’T KNOW
REFUSED

C14

Is there another person who does not live with you who can always reach [you/SUBJECT]?

(We are collecting contact information on close friends or family members who don’t live with registrants in case we have problems getting in touch with [you/SUBJECT] as part of a future study. Registry data may be analyzed for up to 20 years as new information is obtained about the effects of the World Trade Center disaster.)

1  YES
2  NO [SKIP TO NEXT SECTION]
DON’T KNOW [SKIP TO NEXT SECTION]
REFUSED [SKIP TO NEXT SECTION]

C15

What is that person’s name?

FIRST NAME  MIDDLE INITIAL  LAST NAME  SUFFIX
DON’T KNOW
REFUSED

C16

What is this person’s relationship to [you/SUBJECT]?

1  SPOUSE OR SIGNIFICANT OTHER
C17
What is this person’s home address?

NUMBER AND STREET, APT. NO.,
CITY, STATE ZIP CODE
COUNTRY:______________________
DON’T KNOW
REFUSED

C18
What are this person’s telephone numbers?

NOTE: IF YOU ARE ENTERING AN INTERNATIONAL NUMBER, THE NUMBER SHOULD BEGIN WITH 011.

HOME____-____-_____
WORK____-____-_____
CELL____-____-_____
DON’T KNOW
REFUSED

C19
Does this person have an email address?

1 YES (SPECIFY WORK AND HOME EMAIL ADDRESSES)
2 NO
DON’T KNOW
REFUSED

C20
Is there another person who does not live with you who can always reach [you/SUBJECT]?

(We are collecting contact information on close friends or family members who don’t live with registrants in case we have problems getting in touch with [you/SUBJECT] as part of a future study. Registry data may be analyzed for up to 20 years as new information is obtained about the effects of the World Trade Center disaster.)

1 YES
2 NO [SKIP TO NEXT SECTION]
DON’T KNOW [SKIP TO NEXT SECTION]
Because of the necessity to track the long term health effects of the World Trade Center disaster over time, information on how to get back in touch with you is very important to the success of future studies. Close friends and family members are usually the best source of this information. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and will not be used for any other purpose. We will never contact your friends or family for any other reason other than to get in touch with you.

C21

What is that person’s name?

FIRST NAME  MIDDLE INITIAL  LAST NAME  SUFFIX
DON’T KNOW
REFUSED

C22

What is this person’s relationship to [you/SUBJECT]?

1  SPOUSE OR SIGNIFICANT OTHER
2  PARENT
3  SON/DAUGHTER
4  BROTHER OR SISTER
5  FRIEND
6  OTHER (SPECIFY: ________________)
DON’T KNOW
REFUSED

C23

What is this person’s home address?

NUMBER AND STREET, APT. NO.,
CITY, STATE ZIP CODE
COUNTRY:______________________
DON’T KNOW
REFUSED

C24

What are this person’s telephone numbers?

NOTE: IF YOU ARE ENTERING AN INTERNATIONAL NUMBER, THE NUMBER SHOULD BEGIN WITH 011.

HOME_____-____-_____
WORK ____-____-_____
CELL ___ - ___ - ____
C25
Does this person have an email address?
1 YES (SPECIFY WORK AND HOME EMAIL ADDRESSES)
2 NO
DON’T KNOW
REFUSED

CS1
As I said at the start of the interview, researchers may want [you/SUBJECT] to participate in other World Trade Center studies. Is it ok if the New York City Department of Health and Mental Hygiene calls [you/you on behalf of SUBJECT] in the future about other studies?
1 YES
2 NO
DON’T KNOW
REFUSED

CS2
What about if the New York City Department of Health and Mental Hygiene mails health information [to you/to you on behalf of SUBJECT] once in a while, is that ok?
1 YES
2 NO
DON’T KNOW
REFUSED

CS3
[IF CS1=2 AND CS2=2 SKIP TO CS4.]
[ASK ONLY IF C7=1]
Can we use your email address to send these materials?
1 YES
2 NO
DON’T KNOW
REFUSED

CS4
Within 30 days after the interview, we will send you a letter thanking you for participating. You will also get a copy of the Fact Sheet which summarizes your rights as
a research participant in the Registry.

CS5

[ASK IF I3=2 OR 3 AND NO SPAWNS (INCLUDING TRIAGE CASES).]

Would you like to register anyone else at this phone number?

1 YES [START NEW INTERVIEW AT I6.]
2 NO

SP1

[IF NO SPAWNS, SKIP TO CS6 AND CLOSE OUT INTERVIEW.]

Earlier in the interview, you said that there [was another person/were other people] living in [your/SUBJECT’s] household on September 11th, 2001. [This person is/These people are] also eligible for the World Trade Center Health Registry. To be sure that we have the most comprehensive list possible of people affected by the World Trade Center disaster, we’d like to try to interview [that person/those other people.]

SP2

<table>
<thead>
<tr>
<th>Is . . .</th>
<th>still living in the household?</th>
<th>(Is (he/she) ) physically or mentally incapacitated, or otherwise restricted from completing an interview?</th>
<th>Is (he/she) under the age of 18?</th>
<th>ASK IF NECESSARY: (Is he/she) deceased?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person 1 Name</td>
<td>1=Yes 2=No</td>
<td>1=Yes 2=No</td>
<td>1=Yes 2=No</td>
<td>1=Yes 2=No</td>
</tr>
<tr>
<td>Person 2 Name</td>
<td>1=Yes 2=No</td>
<td>1=Yes 2=No</td>
<td>1=Yes 2=No</td>
<td>1=Yes 2=No</td>
</tr>
<tr>
<td>Person 3 Name</td>
<td>1=Yes 2=No</td>
<td>1=Yes 2=No</td>
<td>1=Yes 2=No</td>
<td>1=Yes 2=No</td>
</tr>
</tbody>
</table>

[IF DATE OF DEATH IS AFTER 9/11/01, PERSON IS ELIGIBLE FOR REGISTRY.]

SP3

[FOR EACH PERSON LISTED AS NO LONGER LIVING IN HH, ASK THE FOLLOWING QUESTIONS. IF SPAWN IS DECEASED, SKIP TO SP4. ELSE SKIP TO SP6.]
We would like to contact [SPAWN] and add (him/her) to the registry. What current telephone numbers do you have for [SPAWN]?

HOME PHONE: (   )___________
WORK PHONE: (   )___________
CELL PHONE: (   )___________

What is [SPAWN]’s address?

NUMBER AND STREET, APT. NO.,
CITY, STATE ZIP CODE

Is that a home or work address?

1 HOME
2 WORK

What is [SPAWN]’s email address?

HOME: _______________________
WORK: _______________________

SP4 [ASK OF ALL NAMES OF ELIGIBLE DECEASED, <18, AND INCAPACITATED.]

[SPAWN] is eligible for the World Trade Center Health Registry, but this person will need a proxy respondent to answer the survey questions for him/her. (A parent or guardian must respond for anyone under the age of 18.)

Who is the best proxy for [SPAWN]?

ENTER PROXY NAME: ________________

IS PROXY     1 CURRENT RESPONDENT
              2 SOMEONE ELSE

DOES PROXY LIVE IN HOUSEHOLD?

1 YES
2 NO

IF NO, COLLECT PROXY PHONE NUMBERS.

PROXY HOME PHONE: ________________
PROXY WORK PHONE: ________________
PROXY CELL PHONE: ________________
SP5 INTERVIEWER: DETERMINE IF ANY OF THE LISTED SUBJECTS OR PROXIES ARE AVAILABLE TO DO THE INTERVIEW.

<table>
<thead>
<tr>
<th>SUBJECT NAME</th>
<th>PROXY NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person 1 Name</td>
<td>None</td>
</tr>
<tr>
<td>Person 2 Name</td>
<td>None</td>
</tr>
<tr>
<td>Person 3 Name</td>
<td>Person 1 Name</td>
</tr>
</tbody>
</table>

NOTE: Hyperlinked name will start interview for that subject or proxy.

SP6 [ASK IF NO NAMES ARE SELECTED] Thank you for your time. I’d like to call back later to complete the remaining (interview/interviews).

SKIP TO CALL.

BRK. ARE YOU SURE YOU WANT TO BREAK OFF THIS INTERVIEW?

1 YES [SKIP TO PHON]
2 NO [RETURN TO LAST QUESTION]

PHON. So that I can call back to complete the interview, I’d like to record a home, work, and cell phone number if available. Please note that since our main call center is in North Carolina, the number that will show up on caller ID begins with the North Carolina area code 919.

HOME PHONE: (   )___________
WORK PHONE:  (   )___________
CELL PHONE:  (   )___________

CALL. Would it be best that I call back on a weekday before 5:00 PM, a weekday after 5:00 PM, on the weekend, or anytime nights and weekends?

1 WEEKDAY BEFORE 5:00 PM
2 WEEKDAY AFTER 5:00 PM
3 WEEKEND
4 ANYTIME NIGHTS AND WEEKENDS
5 OTHER

CS6. (That's the end of our interview.) Thank you very much for participating in the World Trade Center Health Registry. If you know of anyone else who might be eligible to be part of the World Trade Center Health Registry, please give them our toll-free number, 1-866-NYCWTCR (1-866-692-9827) and encourage them to call us.
IO1. (Please bear with me for a couple of seconds while I close out this interview and prepare for the next.) DID THE RESPONDENT DEMONSTRATE ANY SIGNS OF EMOTIONAL DISTRESS?

IF THIS INTERVIEW WAS BROKEN OFF TO MAKE AN IMMEDIATE LIFENET REFERRAL, COUNT SIGNS OF EMOTIONAL DISTRESS PRIOR TO AND AFTER THE BREAKOFF.

1  YES
2  NO  [END INTERVIEW]

IO2. PLEASE MARK ALL SIGNS OF DISTRESS DISPLAYED.

IF A BREAKOFF DUE TO LIFENET REFERRAL WAS REQUIRED AND THIS IS THE SECOND TIME THIS QUESTION HAS BEEN ASKED, PLEASE ADD TO THE ANSWERS ALREADY DISPLAYED BELOW.

1  CHANGES IN TONE OF VOICE
2  CHANGES IN VOLUME
3  CHANGES IN ACE OF RESPONSES TO QUESTIONS
4  CHANGES IN USE OF LANGUAGE, INCLUDING INAPPROPRIATE LANGUAGE
5  CHANGES IN FOCUS ON QUESTIONS AND RESPONSES
6  RESPONSES THAT DO NOT RELATE TO THE QUESTIONS ASKED
7  HESITANCY IN RESPONDING
8  REFUSAL TO RESPOND
9  SOBBING AND CRYING SOFTLY
10  OPEN WEEPING
11  OTHER VERBAL SIGNS OF DISTRESS
12  AGITATION
13  TAPPING HANDS AND FEET
14  FIDGETING IN SEAT
15  STANDING UP
16  WALKING AROUND
17  LEAVING THE AREA
18  OTHER NON-VERBAL SIGNS OF DISTRESS

IO3. WHAT LEVEL OF DISTRESS DID YOU ASSOCIATE WITH THE SIGNS DISPLAYED?

IF A BREAKOFF DUE TO LIFENET REFERRAL WAS REQUIRED, PLEASE REPORT THE HIGHEST LEVEL OF DISTRESS DISPLAYED DURING ALL
PORTIONS OF THE INTERVIEW (BOTH BEFORE AND AFTER THE BREAKOFF).

1 LEVEL 1 -fw MILD
2 LEVEL 2 -fw MODERATE
3 LEVEL 3 -fw SEVERE

IO4. PLEASE MARK ALL ACTIONS TAKEN DURING THE INTERVIEW.

IF A BREAKOFF DUE TO LIFENET REFERRAL WAS REQUIRED AND THIS IS THE SECOND TIME THIS QUESTION HAS BEEN ASKED, PLEASE ADD TO THE ANSWERS ALREADY DISPLAYED BELOW.

1 OFFERED TO TAKE BREAK, BUT DID NOT
2 TOOK A BREAK
3 STOPPED INTERVIEW
4 MADE A LIFENET REFERRAL
5 CALLED LIFE NET
6 CALLED 911

IO5. DO YOU HAVE ANY OTHER COMMENTS ABOUT THE EMOTIONAL DISTRESS DISPLAYED AND YOUR RESPONSE TO THE SITUATION? (IF YOU CALLED LIFENET, PLEASE ENTER THE CALL NUMBER THAT THEY GAVE YOU)

IF A BREAKOFF DUE TO LIFENET REFERRAL WAS REQUIRED AND THIS IS THE SECOND TIME THIS QUESTION HAS BEEN ASKED, PLEASE ADD YOUR COMMENTS TO THE TEXT ALREADY DISPLAYED BELOW.

[END INTERVIEW]