GuLF STUDY

A health study for oil spill clean-up workers and volunteers

Telephone Enrollment and Baseline Scripts and Questionnaires Sections B - L

OMB#0925-XXX
EXP:xx/xxxx

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Part 1: Scripts – Pre-Telephone Enrollment Questionnaire (Estimated Burden: 2 minutes)

SECTION B: Deceased or Incapacitated Participants

SECTION B.1: Apparently Deceased Participant

I'm very sorry to hear that.

B.1.0. Would it be okay if I asked you a few questions about [PARTICIPANT'S NAME]? This will only take about 5 minutes. The information you provide will help us to identify health needs of people involved in oil spills and could change public health responses to similar disasters.
Yes.....1
No……......2 [GO TO SECTION B.1.c]
NEEDS TIME TO CONSIDER .....3 [GO TO SECTION B.1.e]
REFUSED.....9 [GO TO SECTION B.1.c]

SECTION B.1.a: Collection of information and confirmation of identity

Thank you for doing this. I understand that this may be difficult for you. If there is a question you don't want to answer, just let me know.

B1a.1. Was [PARTICIPANT'S NAME] a male or female? [ASK ONLY IF UNKNOWN]
Male..... 1
Female..... 2
DON'T KNOW..... 8
REFUSED..... 9

B1a.2. Did he/she work on the oil spill clean-up effort in any capacity, such as cleaning up oil on the water or on the shore, cleaning wildlife, or oil clean-up office work and support activities?
YES..... 1
NO ..... 2 [GO TO QUESTION B1a.6]
DON'T KNOW..... 8 [GO TO QUESTION B1a.6]
REFUSED..... 9 [GO TO QUESTION B1a.6]

B1a.3. What type of work did he/she do for the oil spill clean-up effort? I would like to know as much detail as you can provide.
[FREE TEXT]
DON'T KNOW..... 8
REFUSED..... 9

B1a.4. What is the approximate date when he/she started doing this work? [INTERVIEWER: IF RESPONDENT HAS TROUBLE ANSWERING, ASK "Can you tell me the <u>year</u> that he/she started?". THEN ASK "Can you tell me the <u>month</u> and whether he/she started early, middle, or late in the month?"; ENTER DAY AS "EE", "MM", OR "LL" FOR EARLY, MIDDLE, OR LATE,

RESPECTIVELY. IF RESPONDENT CONTINUES TO HAVE TROUBLE ANSWERING, ASK “Can you tell me just the month that he/she started?”; ENTER DAY AS 88.]

__/__/__ start date
DON’T KNOW……88888888
REFUSED…….. 99999999

B1a.5. What is the approximate date when he/she stopped doing this work? [INTERVIEWER: IF RESPONDENT HAS TROUBLE ANSWERING, ASK “CAN YOU TELL ME THE YEAR THAT HE/SHE STOPPED?”. THEN ASK “CAN YOU TELL ME THE MONTH AND WHETHER HE/SHE STOPPED EARLY, MIDDLE, OR LATE IN THE MONTH?”; ENTER DAY AS “EE”, “MM”, OR “LL” FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY. IF RESPONDENT CONTINUES TO HAVE TROUBLE ANSWERING, ASK “CAN YOU TELL ME JUST THE MONTH THAT HE/SHE STOPPED?”; ENTER DAY AS 88.]

__/__/__ stop date
NOT CONTINUOUS….77777777
DON’T KNOW……88888888
REFUSED……..99999999

B1a.5.a. What was the reason that his/her work was not continuous? [FREE TEXT FIELD]

B1a.6. What did he/she die of?
[FREE TEXT]
DON’T KNOW..... 8
REFUSED..... 9

B1a.7. When did he/she die?
[INTERVIEWER: IF RESPONDENT HAS TROUBLE ANSWERING, ASK “Can you tell me the month and year when he/she died?”; ENTER AS MUCH DETAIL AS PROVIDED, FILLING IN DAY AS “EE”, “MM”, OR “LL” FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY, OR AS 88 IF NO INFORMATION IS PROVIDED ON THE TIMING WITHIN THE MONTH.]

___ ___ / ___ ___ / ___ ___ ___ ___ [MM/DD/YYYY]
DON’T KNOW.....88 88 8888
REFUSED.....99 99 9999

B1a.7a. What state did he/she die in?

[DROP DOWN BOX OF 50 USA STATES]
[OUTSIDE OF THE USA]……..77
DON’T KNOW.....88

REFUSED.....99

B1a.8. What was his/her date of birth?
[INTERVIEWER: IF RESPONDENT HAS TROUBLE ANSWERING, ASK "Can you tell me the month and year when he/she was born?"; ENTER AS MUCH DETAIL AS PROVIDED, FILLING IN DAY AS "EE", "MM", OR "LL" FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY, OR AS 88 IF NO INFORMATION IS PROVIDED ON THE TIMING WITHIN THE MONTH.]

___ ___ / ___ ___ / ___ ___ ___ ___ [MM/DD/YYYY]
DON'T KNOW.....88 88 8888
REFUSED.....99 99 9999

B1a.9. Would you please confirm his/her full name, including middle initial?
[SPELL FIRST, MI, THEN LAST NAME]
B1a.9a.FIRST: _____ [FREE TEXT FIELD]
B1a.9b. MI: _____[FREE TEXT FIELD]
B1a.9c. LAST: _____[FREE TEXT FIELD]

B1a.10. What was his/her address at the time that he/she died?
B1a.10a. House number: _____[FREE TEXT FIELD]
B1a.10b. Street name: _____[FREE TEXT FIELD]
B1a.10c. Apartment number: _____[FREE TEXT FIELD]
B1a.10d. City: _____[FREE TEXT FIELD]
B1a.10e. State: _____[STATE DROP DOWN BOX]
B1a.10f. Zip Code: ___/___/___/___/___/
DON'T KNOW..... 8
REFUSED..... 9

B1a.11. [ASK ONLY IF B1a.2 = 1; IF B1a.2 = 2, 8, OR 9 GO TO B1a.12] Did he/she live at this address while working on the oil spill?
Yes..... 1 [GO TO QUESTION B1a.13]
No…….. 2
DON'T KNOW..... 8
REFUSED..... 9

B1a.11a. What was his/her address while working on the oil spill?
B1a.11a.1. House number: _____[FREE TEXT FIELD]
B1a.11a.2. Street name: _____[FREE TEXT FIELD]
B1a.11a.3. Apartment number: _____[FREE TEXT FIELD]
B1a.11a.4. City: _____[FREE TEXT FIELD]

B1a.11a.5. State: _____[STATE DROP DOWN BOX] [GO TO QUESTION B1a.13]
DON'T KNOW ..... 8 [GO TO QUESTION B1a.13]
REFUSED ..... 9 [GO TO QUESTION B1a.13]

B1a.12. [ASK ONLY IF B1a.2 = 2, 8, OR 9; IF B1a.2 = 1 GO TO B1a.13] Did he/she live at this address in the spring and summer of 2010?
Yes..... 1 [GO TO QUESTION B13]
No……. 2
DON'T KNOW..... 8
REFUSED..... 9

B1a.12a. Where did he/she live at that time?
B1a.12a.1. House number: _____[FREE TEXT FIELD]
B1a.12a.2. Street name: _____[FREE TEXT FIELD]
B1a.12a.3. Apartment number: _____[FREE TEXT FIELD]
B1a.12a.4. City: _____[FREE TEXT FIELD]
B1a.12a.5. State: _____[STATE DROP DOWN BOX]
DON'T KNOW 8
REFUSED 9

B1a.13. Is there any other address that he/she may have given?
Yes..... 1
No……. ..... 2 [GO TO QUESTION B1a.14]
DON'T KNOW..... 8 [GO TO QUESTION B1a.14]
REFUSED..... 9 [GO TO QUESTION B1a.14]

B1a.13a. What was it?
B1a.13a.1. House number: _____[FREE TEXT FIELD]
B1a.13a.2. Street name: _____[FREE TEXT FIELD]
B1a.13a.3. Apartment number: _____[FREE TEXT FIELD]
B1a.13a.4. City: _____[FREE TEXT FIELD]
B1a.13a.5. State: _____[STATE DROP DOWN BOX]
DON'T KNOW 8
REFUSED 9

B1a.14. What was his/her social security number?
[PROBE: His/Her social security number will help us link to the correct health records for him/her and help us make sure we have the correct person in our

files. Reporting his/her social security number is voluntary. We will not share this information with others and we will do everything possible to keep it private.]

__/__/__/ - __/__/ - __/__/__/__/ [GO TO SECTION B.1.b]
DON'T HAVE ..... HHH HH HHHH [GO TO SECTION B.1.b]
DON'T KNOW ..... KKK KK KKKK
REFUSED ..... RRR RR RRRR

B1a.14a. Would you be willing or able to tell me the last four digits of his/her social security number? The last four digits of his/her social security number are not unique to him/her. Other people have those same last four digits. However, it will help us do a better job of linking to his/her public health records.
Last 4 numbers of SSN - __ __ __ __
DON'T HAVE ..... HHHH
DON'T KNOW ..... KKKK
REFUSED ..... RRRR

SECTION B.1.b: End of Call for Deceased Participants

B1b.15. What was your relationship to him/her?
[PULL-DOWN MENU]

B1b.16. Would you please tell me your name? [SPELL FIRST, MI, THEN LAST NAME]
B1b.16.a. FIRST: _____ [FREE TEXT FIELD]
B1b.16.b. MI: _____[FREE TEXT FIELD]
B1b.16.c. LAST: _____[FREE TEXT FIELD]
REFUSED..... 9

That is all of the questions I have for you. Thank you for taking the time to talk with me today.

B1b.17. Do you have any questions for me?
Yes..... 1 [RESPOND TO CONCERNS BASED ON INFORMATION FROM THE FAQ, THEN READ SCRIPT BELOW]
No ..... 2 [READ SCRIPT BELOW]
DON'T KNOW..... 8 [READ SCRIPT BELOW]
REFUSED..... 9 [READ SCRIPT BELOW]

If you have any other questions about the study, you may call us toll-free at 855-NIH-GuLF (855-644-4853). You can also visit the website at www.nihgulfstudy.org.

Thank you again for talking with me. Again, I am sorry for your loss.

[TERMINATE CALL]

SECTION B.1.c: Response to Refusals

[IF A REASON IS GIVEN FOR REFUSAL GO TO SECTION B.1.c.1;
IF A REASON IS NOT GIVEN FOR REFUSAL GO TO SECTION B.1.c.2]

SECTION B.1.c.1. I understand you said …

RESTATE REASONS AND USE TELEPHONE INTERVIEW Q & A BENEFITS TO ATTEMPT A CONVERSION

If you don't mind, I'd like to make a note of your reason. This information will help us improve the GuLF STUDY.

B.1.c.1.a. [RECORD REASON – FREE TEXT FIELD]

[IF CONVERSION ATTEMPT IS SUCCESSFUL GO TO SECTION B.1.a; IF CONVERSION ATTEMPT IS UNSUCCESSFUL GO TO SECTION B.1.d]

SECTION B.1.c.2: May I ask why you do not want to answer any questions?

[INTERVIEWER: USE TELEPHONE INTERVIEW Q & A TO RESPOND TO REASON FOR REFUSAL BY STATING THE BENEFITS]

B.1.c.2.a.[RECORD REASON– FREE TEXT FIELD]

[IF CONVERSION ATTEMPT IS SUCCESSFUL GO TO SECTION B.1.a; IF CONVERSION ATTEMPT IS UNSUCCESSFUL GO TO SECTION B.1.d]

SECTION B.1.d. End of Call for Refusals

Thank you for your time. Again, I want to extend my condolences to you.

[TERMINATE CALL]

SECTION B.1.e: Reschedule Call

We appreciate your willingness to consider answering our questions. When might you have time for a 5 minute call?
B.1.e.1. DATE 1: __/__/___ [MM/DD/YYYY] [CALENDAR]
B.1.e.2. TIME OF DAY 1: _/_/ [AM/PM]

Thank you. We'll call you then. In the meantime, if you have any questions you can call us toll-free at 855-NIH-GuLF (855-644-4853).

Thank you for your time. Again, I want to extend my condolences to you.

SECTION B.2.: Apparently Incapacitated Participant

I'm very sorry to hear that.

B.2.0. Would it be okay if I asked you a few questions about [PARTICIPANT'S NAME]? This will take only 5 minutes. The information you provide will help us to identify health needs of people involved in oil spills and could change public health responses to similar disasters.
Yes.....1
No…….....2 [GO TO B.2.c]
NEEDS TIME TO CONSIDER .....8 [GO TO B.2.e]
REFUSED.....9 [GO TO B.2.c]

SECTION B.2.a: Collection of Information and Confirmation of Identity

Thank you for doing this. I understand that this may be difficult for you. If there is a question you don't want to answer, just let me know.

B.2.a.18. Is [PARTICIPANT'S NAME] a male or female? [ASK ONLY IF UNKNOWN]
Male..... 1
Female..... 2
DON'T KNOW..... 8
REFUSED..... 9

B.2.a.19. Did he/she work on the oil spill clean-up effort in any capacity, such as cleaning up oil on the water or on the shore, cleaning wildlife, or oil clean-up office work and support activities?
YES..... 1
NO ..... 2 [GO TO QUESTION B.2.a.23]
DON'T KNOW..... 8 [GO TO QUESTION B.2.a.23]
REFUSED..... 9 [GO TO QUESTION B.2.a.23]

B.2.a.20. What type of work did he/she do for the oil spill clean-up effort? I would like to know as much detail as you can provide.
[FREE TEXT]
DON'T KNOW..... 8
REFUSED..... 9

B.2.a.21. What is the approximate date when he/she started doing this work? [PROGRAMMER NOTE: THIS DATE NEEDS TO BE ABLE TO CAPTURE ALL OR PARTIAL FIELDS]
MM/DD/YYYY [IF COMPLETE DATE, GO TO B.2.a.22; IF DD IS UNKNOWN, GO TO B.2.a.21a]
DON'T KNOW..... 8 [GO TO QUESTION B.2.a.22]
REFUSED..... 9 [GO TO QUESTION B.2.a.22]

B.2.a.21a. Was it the beginning, middle, or end of the month?
Beginning 1
Middle 2
End..... 3
DON'T KNOW 8
REFUSED 9

B.2.a.22. What is the approximate date when he/she stopped doing this work? [PROGRAMMER NOTE: THIS DATE NEEDS TO BE ABLE TO CAPTURE ALL OR PARTIAL FIELDS; ALSO NEEDS TO BE ABLE TO CAPTURE DATE AND SELECT THAT WORK WAS NOT CONTINUOUS. IF NOT CONTINUOUS IS SELECTED THEN TEXT FIELD TO CAPTURE REASON, IF PROVIDED]
MM/DD/YYYY [IF COMPLETE DATE, GO TO B.2.a.23; IF DD IS UNKNOWN, GO TO B.2.a.22a]
NOT CONTINUOUS……7 [TEXT FIELD FOR REASON]
DON'T KNOW..... ..... 8 [GO TO QUESTION B.2.a.23]
REFUSED..... ..... 9 [GO TO QUESTION B.2.a.23]

B.2.a.22a. Was it the beginning, middle, or end of the month?
Beginning 1
Middle 2
End..... 3
DON'T KNOW 8
REFUSED 9

B.2.a.23. [INTERVIEWER: IF RESPONDENT HAS PROVIDED THE NATURE / CAUSE OF INCAPACITATION] If you don't mind, I'd like a moment to make a note.
B.2.a.23.a. [FREE TEXT] [RECORD NATURE/CAUSE OF INCAPACITATION PROVIDED BY RESPONDENT]

[INTERVIEWER: IF THE RESPONDENT HAS NOT PROVIDED THE REASON OF PARTICIPANT INCAPACITATION]
What is the cause of [PARTICIPANT'S NAME] incapacitation?
B.2.a.23.b. [FREE TEXT] [RECORD NATURE/CAUSE OF INCAPACITATION PROVIDED BY RESPONDENT]

DON'T KNOW..... 8

REFUSED..... 9

B.2.a.24. When did he/she [CAUSE OF INCAPACITATION, AS PROVIDED BY RESPONDENT, PARAPHRASED IF NECESSARY BY INTERVIEWER]?
___ ___ / ___ ___ / ___ ___ ___ ___ [MM/DD/YYYY]
DON'T KNOW..... 88 88 8888
REFUSED..... 99 99 9999

B.2.a.25. What is his/her date of birth?
[INTERVIEWER: IF RESPONDENT HAS TROUBLE ANSWERING, ASK "Can you tell me the month and year when he/she was born?"; ENTER AS MUCH DETAIL AS PROVIDED, FILLING IN DAY AS "EE", "MM", OR "LL" FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY, OR AS 88 IF NO INFORMATION IS PROVIDED ON THE TIMING WITHIN THE MONTH.]
___ ___ / ___ ___ / ___ ___ ___ ___ [MM/DD/YYYY]
DON'T KNOW..... 88 88 8888
REFUSED..... 99 99 9999

B.2.a.26. Would you please confirm his/her full name, including middle initial? [SPELL FIRST, MI, THEN LAST NAME]
B.2.a.26a. FIRST: _____ [FREE TEXT FIELD]
B.2.a.26b. MI: _____[FREE TEXT FIELD]
B.2.a.26c. LAST: _____[FREE TEXT FIELD]

B.2.a.27. What is his/her address?
B.2.a.27a. House number: _____[FREE TEXT FIELD]
B.2.a.27b. Street name: _____[FREE TEXT FIELD]
B.2.a.27c. Apartment number: _____[FREE TEXT FIELD]
B.2.a.27d. City: _____[FREE TEXT FIELD]
B.2.a.27e. State: _____[STATE DROP DOWN BOX]
B.2.a.27f. Zip Code: ___/___/___/___/___/
DON'T KNOW..... 8
REFUSED..... 9

B.2.a.28. [ASK ONLY IF B.2.a.19 = 1; IF B.2.a.19 = 2, 8, OR 9 GO TO B.2.a.29]
Did he/she live at this address while working on the oil spill?
Yes..... 1 [GO TO QUESTION B.2.a.30]
No……..... 2
DON'T KNOW..... 8
REFUSED..... 9

B.2.a.28a. What was his/her address while working on the oil spill?
B.2.a.28a.1. House number: _____[FREE TEXT FIELD]
B.2.a.28a.2. Street name: _____[FREE TEXT FIELD]

B.2.a.28a.3. Apartment number: _____[FREE TEXT FIELD]
B.2.a.28a.4. City: _____[FREE TEXT FIELD]
B.2.a.28a.5. State: _____[STATE DROP DOWN BOX] [GO TO QUESTION B.2.a.30]
DON'T KNOW..... 8 [GO TO QUESTION B.2.a.30]
REFUSED..... 9 [GO TO QUESTION B.2.a.30]

B.2.a.29. [ASK ONLY IF B.2.a.19 = 2, 8, OR 9; IF B.2.a.19 = 1 GO TO B.2.a.30]
Did he/she live at this address in the spring and summer of 2010?
Yes..... 1 [GO TO QUESTION B.2.a.30]
No…….. 2
DON'T KNOW..... 8
REFUSED..... 9

B.2.a.29a. Where did they live at that time?
B.2.a.29a.1. House number: _____[FREE TEXT FIELD]
B.2.a.29a.2. Street name: _____[FREE TEXT FIELD]
B.2.a.29a.3. Apartment number: _____[FREE TEXT FIELD]
B.2.a.29a.4. City: _____[FREE TEXT FIELD]
B.2.a.29a.5. State: _____[STATE DROP DOWN BOX]
DON'T KNOW..... 8
REFUSED..... 9

B.2.a.30. Is there any other address that they may have given?
Yes..... 1
No…….. ..... 2 [GO TO QUESTION B.2.a.31]
DON'T KNOW..... 8 [GO TO QUESTION B.2.a.31]
REFUSED..... 9 [GO TO QUESTION B.2.a.31]

B.2.a.30a. What was it?
B.2.a.30a.1. House number: _____[FREE TEXT FIELD]
B.2.a.30a.2. Street name: _____[FREE TEXT FIELD]
B.2.a.30a.3. Apartment number: _____[FREE TEXT FIELD]
B.2.a.30a.4. City: _____[FREE TEXT FIELD]
B.2.a.30a.5. State: _____[STATE DROP DOWN BOX]
DON'T KNOW..... 8
REFUSED..... 9

B.2.a.31. What is his/her social security number?

[PROBE: His/Her social security number will help us link to the correct health records for him/her. Reporting his/her social security number is voluntary. We will not share this information with others and we will do everything possible to keep it private.]

__/__/__/ - __/__/ - __/__/__/__/ [GO TO SECTION B.2.b]
DON'T HAVE ..... HHH HH HHHH [GO TO SECTION B.2.b]
DON'T KNOW ..... KKK KK KKKK
REFUSED ..... RRR RR RRRR

B.2.a.31a. Would you be willing or able to tell me the last four digits of his/her social security number? The last four digits of his/her social security number are not unique to him/her. Other people have those same last four digits. However, it will help us do a better job of linking to his/her public health records.
Last 4 numbers of SSN - __ __ __ __
DON'T HAVE ..... HHHH
DON'T KNOW ..... KKKK
REFUSED ..... RRRR

SECTION B.2.b: End of Call for Incapacitated Participants

B.2.b.32. What is your relationship to him/her?
[PULL-DOWN MENU]

B.2.a.33. Would you please tell me your name? [SPELL FIRST, MI, THEN LAST NAME]
B.2.a.33.a. FIRST: _____ [FREE TEXT FIELD]
B.2.a.33.b. MI: _____[FREE TEXT FIELD]
B.2.a.33.c. LAST: _____[FREE TEXT FIELD]
REFUSED..... 9

B2.a.33.d. Is this the best address and phone number to reach you?
Yes…….. 1 [SKIP TO B2.a.33.e.8]
No…… 2
DON'T KNOW ….. 8
REFUSED ……. 9

B2.a.33.e.What is the best address to reach you?
B2.a.33.e.1. House number: _____[FREE TEXT FIELD]
B2.a.33.e 2. Street name: _____[FREE TEXT FIELD]
B2.a.33.e.3. Apartment number: _____[FREE TEXT FIELD]
B2.a.33.e.4. City: _____[FREE TEXT FIELD]
B2.a.33.e.5. State: _____[STATE DROP DOWN BOX] [GO TO QUESTION B2.a.33.e.6]

DON'T KNOW 8 [GO TO QUESTION B2.a.33.e.6]
REFUSED 9 [GO TO QUESTION B2.a.33.e6]

B2.a.33.e.6. What is the best phone number to reach you?

|_|_|_|-|_|_|_|-|_|_|_|_|
DON'T KNOW ….. 888-888-8888
REFUSED ……. 999-999-9999

B2.a.33.e.6.a Is this number a cellphone?
Yes…….. 1
No…… 2
DON'T KNOW ….. 8
REFUSED ……. 9

B2.a.33.e.7. ALTERNATE NUMBER (IF VOLUNTEERED)

|_|_|_|-|_|_|_|-|_|_|_|_|
DON'T KNOW ….. 888-888-8888
REFUSED ……. 999-999-9999

B2.a.33.e.7.a Is this number a cellphone?
Yes…….. 1
No…… 2
DON'T KNOW ….. 8
REFUSED ……. 9

B2.a.33.e.8. Is this number a cell phone?
Yes…….. 1
No…… 2
DON'T KNOW ….. 8
REFUSED ……. 9

That is all of the questions I have for you. Thank you for taking the time to talk with me today.

B2.a.34. Do you have any questions for me?
Yes..... 1 [RESPOND TO CONCERNS BASED ON INFORMATION FROM THE FAQ, THEN READ SCRIPT BELOW]
No ..... 2 [READ SCRIPT BELOW]
DON'T KNOW..... 8 [READ SCRIPT BELOW]
REFUSED..... 9 [READ SCRIPT BELOW]

If you have any other questions about the study, you may call us toll-free at 855-NIH-GuLF (855-644-4853). You can also visit our website at www.nihgulfstudy.org.

Thank you again for talking with me. Please don't hesitate to contact us if you have any questions later. Again, I am sorry to hear about what happened to [PARTICIPANT'S NAME].

[TERMINATE CALL]

SECTION B.2.c: Response to Refusals

[IF A REASON IS GIVEN FOR REFUSAL GO TO SECTION B.2.c.1;
IF A REASON IS NOT GIVEN FOR REFUSAL GO TO SECTION B.2.c.2]

SECTION B.2.c.1: I understand you said …

RESTATE REASONS AND USE TELEPHONE INTERVIEW Q & A BENEFITS TO ATTEMPT A CONVERSION

If you don't mind, I'd like to make a note of your reason. This information will help us improve the GuLF STUDY.

B.2.c.1.a. [RECORD REASON – FREE TEXT FIELD]

[IF CONVERSION ATTEMPT IS SUCCESSFUL GO TO SECTION B.2.a; IF CONVERSION ATTEMPT IS UNSUCCESSFUL GO TO SECTION B.2.d]

SECTION B.2.c.2: May I ask why you do not want to answer any questions?

[INTERVIEWER: USE TELEPHONE INTERVIEW Q & A TO RESPOND TO REASON FOR REFUSAL BY STATING THE BENEFITS]

B.2.c.1.a. [RECORD REASON– FREE TEXT FIELD]

[IF CONVERSION ATTEMPT IS SUCCESSFUL GO TO SECTION B2.c.2.a; IF CONVERSION ATTEMPT IS UNSUCCESSFUL GO TO SECTION B.2.c.2.d]

SECTION B.2.d. End of Call for Refusals

Thank you for your time. Again, I am sorry to hear about what happened to [PARTICIPANT'S NAME].

[TERMINATE CALL]

SECTION B.2.e: Reschedule Call

We appreciate your willingness to consider answering our questions. When might you have time for a 5 minute call?
B.2.e.1. DATE 1: __/__/___ [MM/DD/YYYY] [CALENDAR]
B.2.e.2. TIME OF DAY 1: _/_/ [AM/PM]

Thank you. We'll call you then. In the meantime, if you have any questions you can call us toll-free at 855-NIH-GuLF (855-644-4853).

Thank you for your time.

Part 2: Telephone Enrollment Questionnaire (Estimated Burden: Shortest Path = 30 minutes; Longest Path = 50 minutes)

SECTION C: Background Information

Thank you for agreeing to take part in the study. Let's get started.

C1. What is your date of birth?
___ ___ / ___ ___ / ___ ___ ___ ___ [MM/DD/YYYY]
DON'T KNOW..... 88 88 8888
REFUSED..... 99 99 9999

[INTERVIEWER PROBE: IF DK OR REFUSED: for legal reasons we need to know if you are old enough to participate in the study. REPEAT QUESTION]

[IF AGE INELIGIBLE, GO TO SECTION L.9]

I would like to make sure we have the right contact information for you.

[INTERVIEWER: REFER TO FAQ IF PARTICIPANT ASKS HOW NAME WAS OBTAINED]

C2. Is your name [SPELL FIRST, MI, THEN LAST NAME]?
C2.a. FIRST: _____ [FREE TEXT FIELD]
C2.b. MI: _____[FREE TEXT FIELD]
C2.c. LAST: _____[FREE TEXT FIELD]
C2.d. Suffix:_____[FREE TEXT FIELD]

C3. What is your current address?
[PROBE: I would like to know the physical location of this address – not a post-office box or rural route number.]
C3.a. House number: _____[FREE TEXT FIELD]
C3.b. Street name: _____[FREE TEXT FIELD]
C3.c. Apartment number: _____[FREE TEXT FIELD]
C3.d. City: _____[FREE TEXT FIELD]
C3.e. State: _____[STATE DROP DOWN BOX]
C3.f. Zip Code: ___/___/___/___/___/

C3a1. [PROGRAMMER NOTE: SHOW ONLY IF STATE= LOUISIANA OR ALABAMA.] What is the name of the county or parish for your current address?
[DROP DOWN LIST WITH THE FOLLOWING COUNTIES:
Alabama
Baldwin
Clarke
Covington
Escambia
Geneva
Mobile
Monroe

Washington

Louisiana
Acadia
Ascension
Assumption
Calcasieu
Cameron
Iberia
Iberville
Jefferson
Jefferson Davis
Lafayette
Lafourche
Orleans
Plaquemines
Saint Bernard
Saint Charles
Saint James
Saint Martin
Saint Mary
Saint Tammany
St John the Baptist
Terrebonne
Vermilion
Texas
Aransas
Bee
Brazonia
Brooks
Calhoun
Cameron
Chambers
Fort Bend
Galveston
Hardin
Hildago
Jackson
Jim Wells
Kenedy
Kleberg
Liberty
Matagorda
Nueces
Orange
Refugio

San Patrico
Victoria
Wharton
Willacy
Not in list above
Other

C4. [INTENTIONALLY BLANK]

C5. [INTENTIONALLY BLANK]

C6. [IF QUESTION A.2.a.1 = 1, GO TO QUESTION D1] Is your mailing address different from your current address?
Yes..... 1
No…….. ..... 2 [GO TO D1]
DON'T KNOW..... 8 [GO TO D1]
REFUSED..... 9 [GO TO D1]

C6a. What is your mailing address?
C6.a.1. House number: _____[FREE TEXT FIELD]
C6.a.2. Street name: _____[FREE TEXT FIELD]
C6.a.3. Apartment number: _____[FREE TEXT FIELD]
C6.a.4. City: _____[FREE TEXT FIELD]
C6.a.5. State: _____[STATE DROP DOWN BOX]
C6.a.6. Zip Code: ___/___/___/___/___/
DON'T KNOW..... 8
REFUSED..... 9

C7. [INTENTIONALLY BLANK]

C8. [INTENTIONALLY BLANK]

SECTION D: Demographic Measures

D1. [ASK ONLY IF UNKNOWN OR UNCERTAIN] Are you male or female?
Male 1
Female 2
DON'T KNOW..... 8
REFUSED..... 9

D2. Do you consider yourself to be Hispanic or Latino?
[INTERVIEWER READ IF PARTICIPANT IS UNSURE OF DEFINITION OF HISPANIC OR LATINO: Where do your ancestors come from? Puerto Rico, Cuba, Dominican Republic, Mexico, Central or South America or another Latin American country?]
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

D3. Were you born in the United States?
Yes..... 1 [GO TO QUESTION D4]
No 2
DON'T KNOW..... 8
REFUSED..... 9

D3a. What country were you born in?
_____[FREE TEXT FIELD]
DON'T KNOW 8
REFUSED 9

D3b. How old were you when you came to the United States?
I_I_I AGE
DON'T KNOW 88
REFUSED 99

D4. What race do you consider yourself to be? Please select one or more of these categories:
[NOTE TO INTERVIEWER: READ CHOICES 1-5, PROBE AND RECORD OTHER IF NECESSARY, SELECT ALL THAT APPLY]
American Indian
or Alaskan Native.....1
Asian.....2
Black or African American.....3
Native Hawaiian
or Pacific Islander 4
White.....5

OTHER ..... 6 D4.1. Specify_____
DON'T KNOW..... 8 [GO TO QUESTION D4a]
REFUSED..... 9 [GO TO QUESTION D4a]

D4a. Where was your biological mother born?

In the United States……1 - ENTER NAME OF STATE [_____]
Outside the United States..2 - ENTER U.S. TERRITORY (E.G. PUERTO RICO, U.S. VIRGIN ISLANDS, GUAM] OR NAME OF FOREIGN COUNTRY, ETC. [_____]
DON'T KNOW 8
REFUSED 9

D4b. Where was your biological father born?

In the United States……1 - PRINT NAME OF STATE [_____]
Outside the United States..2 - ENTER U.S. TERRITORY (E.G. PUERTO RICO, U.S. VIRGIN ISLANDS, GUAM] OR NAME OF FOREIGN COUNTRY, ETC. [_____]
DON'T KNOW 8
REFUSED 9

[IF D4=2 (Asian), ELSE SKIP TO D5]

D4c. Are you Vietnamese, Chinese, Laotian, Thai, Cambodian, or something else?

VIETNAM 1
CAMBODIA 2
LAOS 3
SAMOA 4
PACIFIC ISLANDS..... 5 D4c.1 Specify_____
CHINA 6
PHILIPPINES 7
JAPAN..... 8
KOREA..... 9
OTHER..... 10 D4c.2 Specify_____
DON'T KNOW 88
REFUSED 99

D5. What is the **highest** grade or level of school you have **completed** or the **highest degree** you have **received**? [INTERVIEWER: PROBE AS NECESSARY, BUT DO NOT READ LIST]
NEVER ATTENDED/KINDERGARTEN ONLY 0
1ST GRADE 1

2ND GRADE..... 2
3RD GRADE..... 3
4TH GRADE..... 4
5TH GRADE..... 5
6TH GRADE..... 6
7TH GRADE..... 7
8TH GRADE..... 8
9TH GRADE..... 9
10TH GRADE..... 10
11TH GRADE..... 11
12TH GRADE, NO DIPLOMA 12
HIGH SCHOOL GRADUATE..... 13
GED OR EQUIVALENT 14
SOME COLLEGE, NO DEGREE..... 15
ASSOCIATE DEGREE: OCCUPATIONAL, TECHNICAL
OR VOCATIONAL PROGRAM..... 16
ASSOCIATE DEGREE: ACADEMIC PROGRAM..... 17
BACHELOR'S DEGREE (EXAMPLE: BA, AB, BS, BBA) 18
MASTER'S DEGREE (EXAMPLE: MA, MS, MEng, MEd, MBA) 19
PROFESSIONAL SCHOOL
DEGREE (EXAMPLE: MD, DDS, DVM, JD) 20
DOCTORAL DEGREE (EXAMPLE: PhD, EdD)..... 21
DON'T KNOW..... 88
REFUSED..... 99

D6. Are you now married, widowed, divorced, separated, never married, or living with a partner?
MARRIED 1
WIDOWED 2
DIVORCED 3
SEPARATED.....4
NEVER MARRIED 5
LIVING WITH PARTNER.....6
DON'T KNOW 8
REFUSED 9

D7. How many children under 18 years of age usually live in your home?
___ ___ Number of children
NONE 00
DON'T KNOW.....88
REFUSED.....99

SECTION E: Clean-up Related Tasks and Exposures During Clean-up

I now want to ask you about **any** work you may have done that was related to the oil spill clean-up effort. This could include actual clean-up activities or jobs that supported those activities in any way, such as food service or clerical support. This could have been done as a paid employee or as a volunteer.

E1. Not counting any clean-up *training* days, did you work at least one day since April 20, 2010 doing anything related to the oil spill clean-up effort?
YES..... 1 [GO TO E3a]
NO 2
DON'T KNOW..... 8
REFUSED..... 9 [GO TO SECTION L.8]

E1a. Did you do any work around the time of the oil spill clean-up that was needed because of the spill? Remember that this work could include jobs like cooks or food service personnel; fork lift drivers; security personnel; health & safety personnel; foremen; drivers; and so on.
YES..... 1 SPECIFY: _____ [FREE TEXT FIELD]
NO ..... 2 [GO TO E2]
DON'T KNOW..... 8 [GO TO E3a]
REFUSED..... 9 [GO TO SECTION L.8]

E1b. Did you do this for at least one day, not counting any clean-up *training* days?
YES..... 1 [SET E1=1; GO TO E3a]
NO 2
DON'T KNOW..... 8 [GO TO E3a]
REFUSED..... 9 [GO TO SECTION L.8]

E2. We got your name from one of the lists of people who were trained for the clean-up or who worked on the clean-up. Please tell me why you did not work on the clean-up.
DID NOT COMPLETE THE TRAINING 01
WAS NOT HIRED FOR HEALTH REASONS.....02
..... SPECIFY: _____ [FREE TEXT FIELD]
COULD NOT WORK FOR HEALTH REASONS.....03
..... SPECIFY: _____ [FREE TEXT FIELD]
FOUND OTHER WORK FIRST / OTHER WORK OBLIGATIONS 04
WAS NOT CALLED / WAS TOLD ONLY THAT THEY WERE NOT NEEDED
.....05
MOVED AWAY (FOR REASONS OTHER THAN THOSE ABOVE)…06
WAS OBSERVER/VISITOR ONLY (E.G., REPORTER, POLITICIAN); DID NOT INTEND TO WORK ON THE CLEAN-UP.....07
OTHER 08

..... SPECIFY: _____ [FREE TEXT FIELD]
WAS NOT DEPLOYED TO THE CLEAN-UP RESPONSE …… 09

DON'T KNOW.....88
REFUSED.....99

[IF E2 = 01 OR 07, GO TO L9. ELSE GO TO SECTION F]

E3a. Thinking about all of the work you did on the oil spill clean-up, what was the first date you started on the clean up, not counting training?
[INTERVIEWER: IF PARTICIPANT HAS TROUBLE ANSWERING, ASK "CAN YOU TELL ME THE YEAR THAT YOU STARTED?". THEN ASK "CAN YOU TELL ME THE MONTH AND WHETHER YOU STARTED EARLY, MIDDLE, OR LATE IN THE MONTH?"; ENTER DAY AS "EE", "MM", OR "LL" FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY. IF SUBJECT CONTINUES TO HAVE TROUBLE ANSWERING, ASK "CAN YOU TELL ME JUST THE MONTH THAT YOU STARTED?"; ENTER DAY AS 88.]

__/__/__ start date [USE CHAR.-SENSITIVE POP-UP MENU FOR MONTH]
DON'T KNOW……88888888
REFUSED…….. 99999999

E3b. And what was the last date you worked on the clean-up?
[INTERVIEWER: IF PARTICIPANT HAS TROUBLE ANSWERING, ASK "CAN YOU TELL ME THE YEAR THAT YOU STOPPED?". THEN ASK "CAN YOU TELL ME THE MONTH AND WHETHER YOU STOPPED EARLY, MIDDLE, OR LATE IN THE MONTH?"; ENTER DAY AS "EE", "MM", OR "LL" FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY. IF PARTICIPANT CONTINUES TO HAVE TROUBLE ANSWERING, ASK "CAN YOU TELL ME JUST THE MONTH THAT YOU STOPPED?"; ENTER DAY AS 88.]
[PROGRAMMER NOTE: E3b-E3a SHOULD NEVER BE < 0.]

__/__/__ stop date [USE CHAR.-SENSITIVE POP-UP MENU FOR MONTH]
STILL WORKING…….. 77777777
DON'T KNOW……88888888
REFUSED…….. 99999999

if E3a=(DON'T KNOW or REFUSED) or E3b=(DON'T KNOW or REFUSED) or >= 1 of (day, month, year) of E3a is missing (incl. 88 for day) or >= 1 of (day, month, year) of E3b is missing (incl. 88 for day) or E3b-E3a = 0, else E3c
E3b.1. How many days, weeks, or months did you work on the clean-up?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3

DON'T KNOW 8
REFUSED 9

[PROGRAMMER: If E3b.1=0, use yes/no pop-up box with probe "I would like to verify that I have the correct information. Not counting any days that you trained for the clean-up, did you work at least one day since April 20, 2010 doing anything related to the oil spill clean-up effort?" for interviewer to confirm with subject; if answer="no", loop back to E1.]

E3c. Not counting weekends and scheduled time off, were there any periods during this time when you did not work on the clean-up response?
YES..... 1
NO ..... 2 [GO TO E3d]
DON'T KNOW..... 8 [GO TO E3d]
REFUSED..... 9 [GO TO E3d]

E3c1. Not counting weekends and scheduled time off, about how many days, weeks, or months in total did you not work on the clean-up during this time?
|__|__|__| Units
Days..... 1
Weeks..... 2
Months..... 3
DON'T KNOW..... 888
REFUSED..... 999

E3d. About how many days, on average, do/did you work on the clean-up in a typical week or month?
|__|__| per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

[PROGRAMMER: Calculate and retain totalCleanupDuration = (E3b – E3a) [in days] – E3c1 [in days] and totalCleanupDays = totalCleanupDuration / 7 * E3d [per week].

E4. Who do/did you work for? Was it…
[INTERVIEWER: READ LIST; CHECK ALL THAT APPLY]

	YES	NO	DK	RE
E4a. A contractor to BP	1	2	8	9
E4b. BP	1	2	8	9
E4c. A town, city, parish or county, or state	1	2	8	9
E4d. The federal government	1	2	8	9
E4e. Did not get a pay check (volunteer)	1	2	8	9

E4f. Or someone else 1 2 8 9

[IF E4a=1 or 8, else E5]
E4a1. What is/was the name of the company you worked for the longest?

[PROGRAMMER: INCLUDE THE FOLLOWING COMPANIES IN THE DROP DOWN LIST. ALSO INCLUDE DON'T KNOW, REFUSED, AND OTHER, SPECIFY (FREE TEXT) OUTSIDE OF THE DROP DOWN LIST. THE LIST SHOULD NOT SCROLL – ALL OPTIONS NEED TO BE AVAILABLE AT ONCE.]

ABLE BODY LABOR 1
AEROTEK..... 2
AMERICAN POLLUTION CONTROL CORP (AMPOL) 3
AMERI-FORCE..... 4
ASHLAND SERVICES, LLC 5
CENTER FOR TOXICOLOGY AND ENVIRONMENTAL HEALTH (CTEH) 6
COMMAND CENTER 7
CROWDER GULF 10
DANOS & CUROLE..... 11
EMERGENCY RESPONSE GROUP, LLC (ERG) 12
ENVIRONMENTAL LABOR SERVICES 13
GAC CONTRACTORS 14
HEPACO..... 15
MANSFIELD INDUSTRIAL 16
MILLER ENVIRONMENTAL GROUP 17
O'BRIENS..... 18
PARSONS 19
PLANT PERFORMANCE SERVICES (P2S) 20
RELIABLE STAFFING 21
THE DRC GROUP..... 22
THE RESPONSE GROUP (TRG)..... 23
US ENVIRONMENTAL SERVICES, LLC (USES) 24
VESSELS OF OPPORTUNITY (VOO) 25

OTHER, SPECIFY 26
[FREE TEXT FIELD]
DON'T KNOW..... 8
REFUSED..... 9

E5. Were you required by an employer or organization to get a medical exam in order to work on the oil spill response? [PROBE: Some workers were required by their employers or organizations to be examined by a doctor in order to perform certain tasks as part of the oil spill response.]
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E6. [INTENTIONALLY BLANK]

	Yes	No	DK	REF
E6.1a. During the cleanup, did you do any work on the Enterprise, Q4000, DD2, or DD3 rig or platform ships?	1	2	8	9
E6.1b. Did you work on other ships, boats, or barges?	1	2	8	9
E6.1c. Did you work on land ?	1	2	8	9

[if E6.1a = 1, else E6.1e]
E6.1d. How much of your time as a clean-up worker was spent on the Enterprise, Q4000, DD2 or DD3 rig or platform ships?
NONE 1 [PROGRAMMER: USE YES/NO POP-UP BOX FOR INTERVIEWER TO CONFIRM WITH SUBJECT; IF CONFIRMED, SET E6.1a = 2]
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

[if E6.1b = 1, else E6.1f]
E6.1e. How much of your time as a clean-up worker was spent on other ships, boats, or barges?
NONE 1 [PROGRAMMER: USE YES/NO POP-UP BOX FOR INTERVIEWER TO CONFIRM WITH SUBJECT; IF CONFIRMED,SET E6.1b = 2]
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

[if E6.1c = 1, else E7a]
E6.1f. How much of your time as a clean-up worker was spent on land?

NONE	1 [PROGRAMMER: USE YES/NO POP-UP BOX FOR INTERVIEWER TO CONFIRM WITH SUBJECT; IF CONFIRMED, SET E6.1c = 2]
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

[PROGRAMMER: THESE SHOULD SUM TO 75%-125%, ASSUMING THAT "None" = 0%; "Less than half" = 25%; "About half" = 50%; "More than half" = 75%; and "All of it" = 100%. Allow sum < 75% if one or more answers are DK OR REF. Sum must always be <= 125%. "All of it" for any one item precludes choices other than "None", DK, or REF for the other items.]

[PROBE IF ANSWERS DO NOT ADD UP TO ABOUT 100%: Remember that the portions of your time that you spent across these different job locations should add up to about 100 percent of your total oil spill clean-up time.]

RIG
If E6.1a =1, else go to E8j1
E7a. Did you work on the:

	YES	NO	DK	RE
E7a1) Enterprise	1	2	8	9
E7a2) Q4000	1	2	8	9
E7a3) DD2	1	2	8	9
E7a4) DD3	1	2	8	9

[If any of E7a1-E7a4=1, else go to E8j1]

If E6.1b = 1 or E6.1c = 1, else go to E7b4
E7b1. What date did you start working on this/these vessel(s)?
[INTERVIEWER: IF PARTICIPANT HAS TROUBLE ANSWERING, ASK "CAN YOU TELL ME THE YEAR THAT YOU STARTED?". THEN ASK "CAN YOU TELL ME THE MONTH AND WHETHER YOU STARTED EARLY, MIDDLE, OR LATE IN THE MONTH?"; ENTER DAY AS "EE", "MM", OR "LL" FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY. IF PARTICIPANT CONTINUES TO HAVE TROUBLE ANSWERING, ASK "CAN YOU TELL ME JUST THE MONTH THAT YOU STARTED?"; ENTER DAY AS 88.]

__/__/__ start date [USE CHAR.-SENSITIVE POP-UP MENU FOR MONTH]
DON'T KNOW……88888888
REFUSED…….. 99999999

E7b2. What date did you stop working on this/these vessel(s)?
[INTERVIEWER: IF PARTICIPANT HAS TROUBLE ANSWERING, ASK "CAN YOU TELL ME THE YEAR THAT YOU STOPPED?". THEN ASK "CAN YOU TELL ME THE MONTH AND WHETHER YOU STOPPED EARLY, MIDDLE, OR LATE IN THE MONTH?"; ENTER DAY AS "EE", "MM", OR "LL" FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY. IF PARTICIPANT CONTINUES TO HAVE TROUBLE ANSWERING, ASK "CAN YOU TELL ME JUST THE MONTH THAT YOU STOPPED?"; ENTER DAY AS 88.]
[PROGRAMMER NOTE: E7b2- E7b1 SHOULD NEVER BE < 0.]

__/__/__ stop date [USE CHAR.-SENSITIVE POP-UP MENU FOR MONTH]
STILL WORKING…….. 77777777
DON'T KNOW……88888888
REFUSED…….. 99999999

if E7b1=(DON'T KNOW or REFUSED) or E7b2=(DON'T KNOW or REFUSED) or >= 1 of (day, month, year) of E7b1 is missing (incl. 88 for day) or >= 1 of (day, month, year) of E7b2 is missing (incl. 88 for day) or E7b2- E7b1= 0, else E7b2a

E7b2a1. How many days, weeks, or months did you do clean-up work on this / these vessel(s) during the oil spill clean-up effort?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E7b2a. Not counting weekends and scheduled time off, were there any periods during this time when you did not work on this/these vessel(s)?
YES..... 1
NO ..... 2 [GO TO E7b3]
DON'T KNOW..... 8 [GO TO E7b3]
REFUSED..... 9 [GO TO E7b3]

E7b2b. Not counting weekends and scheduled time off, about how many days, weeks, or months in total did you not work on this/these vessel(s) during this time?
|__|__|__| Units
Days..... 1
Weeks..... 2
Months..... 3
DON'T KNOW..... 888
REFUSED..... 999

E7b3. About how many days, on average, do/did you work on this/these vessel(s) in a typical week or month?
|__|__| per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

[NOTE: WE WILL REQUIRE THAT ALL WORKERS WHO REPORT ANY WORK ON THE RIG ANSWER ALL RIG QUESTIONS IN THIS SECTION, REGARDLESS OF AMOUNT OF RIG WORK OR ITS PROPORTION OF TOTAL CLEAN-UP WORK.]
[PROGRAMMER: Set totalRigDaysThresholdReached = TRUE.]

if totalRigDaysThresholdReached = TRUE, else E8j1.

E7b4. When you were working on this/these vessel(s), about how many hours a day, on average, did you work?
__ ___ hours
DON'T KNOW..... 88

REFUSED..... 99

If at least two of E7a1, E7a2, (E7a3 or E7a4)=1, ask E7b5. Else go to E7c1. [Note: DD2 and DD3 did the same thing, so we generally don't care about differentiating the two, so if someone worked on only those two, we are not concerned about how much time they worked on each.]

E7b5. You said that you worked on [VESSEL NAME] and [VESSEL NAME] and [VESSEL NAME]. I would like to know how your time was divided across these vessels. How much of your time did you spend on: [If E7a1=1] the Enterprise

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

[If E7a2=1] the Q4000

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

[If E7a3=1] either the DD2 or [If E7a4=1] the DD3

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

[PROGRAMMER: THESE SHOULD SUM TO 75%-125%, ASSUMING THAT "None" = 0%; "Less than half" = 25%; "About half" = 50%; "More than half" = 75%; and "All of it" = 100%. Allow sum < 75% if one or more answers are DK OR REF. Sum must always be <= 125%. "All of it" for any one item precludes choices other than "None", DK, or REF for the other items.]

[PROBE IF ANSWERS DO NOT ADD UP TO ABOUT 100%: Remember that the portions of your time that you spent on any of these vessels should add up to about 100 percent of your total oil spill clean-up time.]

People who also worked on the Enterprise or other rigs could have worked in the moon pool area, the drilling area, the drilling control room, the immediate flare area, and where gas and oil are separated. How much of your on-duty work time was spent in the:

E7c1. Immediate area of the moon pool?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

~~If E7a3 or E7a4=1, else E7c4~~

E7c2. The drilling area, but **not** including the drilling control room?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E7c3. The drilling control room?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

If E7a1=1 or E7a2=1, else E7c5

E7c4. The immediate area of the flare?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8

REFUSED 9

If E7a1=1, else E7c5a.
E7c5. The area where the gas and oil were separated?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E7c5a. Other *inside* areas of the vessel(s)?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E7c5b. Other *outside* areas of the vessel(s)?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E7c6. [INTENTIONALLY BLANK]

E7c8. INTENTIONALLY BLANK

E7c9. INTENTIONALLY BLANK

E7c10. [INTENTIONALLY BLANK]

[if E7a1=1, else E7d2]
E7d1. What was your primary job title while on the Enterprise?
ABLEBODY SEAMAN / ABS 01
ASSISTANT DRILLER 02
BOSUN 03
CEMENTER 04
CHIEF MATE 05
COMPANY MAN 06

CONTROL ROOM OPERATOR 07
COOK / GALLEY HAND 08
CRANE OPERATOR 09
DERRICK HAND / DERRICK-MAN 10
DRILLER 11
ELECTRICIAN 12
ENGINEER *OTHER THAN* SHIP OR MUD ENGINEER 13
FLOORHAND / CHAINHAND 14
FOREMAN 15
GEOLOGIST 16
GINSEL 17
HOUSEKEEPING 18
LAUNDRY 19
MECHANIC OR MAINTENANCE *OTHER THAN* ELECTRICIAN 20
MOTORMAN / MOTORHAND 21
MUD ENGINEER 22
ORDINARY SEAMAN / OS 23
PUMP HANGER 24
PUMP OPERATOR / PUMP HAND 25
RANGER 26
ROUGHNECK 27
ROUSTABOUT / LEASEHAND 28
ROV SUPERVISOR 29
ROV TECH 30
SCAFFOLDER 31
SERVICE TECHNICIAN / SERVICE TECH 32
SHIP ENGINEER 33
SUPERVISOR 34
TECHNICIAN 35
TOOLPUSHER 36
UTILITY HAND 37
WELDER 38
WELDER HELPER 39
OTHER, SPECIFY 70 [FREE TEXT FIELD]
DON'T KNOW 88
REFUSED 99

[if E7a2=1, else E7d3]
E7d2. What was your primary job title while on the Q4000?
(Use same list as for E7d1)

[if E7a3=1 or E7a4=1, else E8j1]
E7d3. [if E7a3=1 and E7a4=1] What was your primary job title while on the DD2 and DD3?
[else if E7a3=1] What was your primary job title while on the DD2?
[else] What was your primary job title while on the DD3?

[INTERVIEWER PROBE: IF SUBJECT INDICATES THAT HE/SHE HAD DIFFERENT JOB TITLES ON THE DD2 AND DD3: What was the job title you held the longest while working on these two ships?]
(Use same list as for E7d1)

E8a. [INTENTIONALLY BLANK]

E8b1a. [INTENTIONALLY BLANK]

E8b1b. [INTENTIONALLY BLANK]
E8b2. [INTENTIONALLY BLANK]
E8b3. [INTENTIONALLY BLANK]
E8c1. [INTENTIONALLY BLANK]
E8c1a. [INTENTIONALLY BLANK]

E8c2a. [INTENTIONALLY BLANK]

E8c2b. [INTENTIONALLY BLANK]

E8c3. [INTENTIONALLY BLANK]

E8c4. [INTENTIONALLY BLANK]

E8c5. [INTENTIONALLY BLANK]

E8d1. [INTENTIONALLY BLANK]

E8d1a. [INTENTIONALLY BLANK]

E8d1b. [INTENTIONALLY BLANK]
E8d1c. [INTENTIONALLY BLANK]
E8d1d. [INTENTIONALLY BLANK]
E8d1e. [INTENTIONALLY BLANK]
E8e1. [INTENTIONALLY BLANK]

E8e2a. [INTENTIONALLY BLANK]

E8e2b. [INTENTIONALLY BLANK]

E8e3. [INTENTIONALLY BLANK]

E8e4. [INTENTIONALLY BLANK]

E8e5. [INTENTIONALLY BLANK]
E8e6. [INTENTIONALLY BLANK]
E8f1. [INTENTIONALLY BLANK]
E8f2a. [INTENTIONALLY BLANK]

E8f2b. [INTENTIONALLY BLANK]

E8f3. [INTENTIONALLY BLANK]

E8f4. [INTENTIONALLY BLANK]

E8f5. [INTENTIONALLY BLANK]
E8f6. [INTENTIONALLY BLANK]

E8g1. [INTENTIONALLY BLANK]
E8g2. [INTENTIONALLY BLANK]
E8g3. [INTENTIONALLY BLANK]
E8g4. [INTENTIONALLY BLANK]

E8g5. [INTENTIONALLY BLANK]
E8g6. [INTENTIONALLY BLANK]
E8g7. [INTENTIONALLY BLANK]
E8h1. [INTENTIONALLY BLANK]
E8hx. [INTENTIONALLY BLANK]
E8h2a. [INTENTIONALLY BLANK]

E8h2b. [INTENTIONALLY BLANK]

E8h3. [INTENTIONALLY BLANK]

E8h4. [INTENTIONALLY BLANK]

E8h4a. [INTENTIONALLY BLANK]
E8h5. [INTENTIONALLY BLANK]
E8h5a. [INTENTIONALLY BLANK]

E8h5b. [INTENTIONALLY BLANK]

E8h6. [INTENTIONALLY BLANK]
E8h6a. [INTENTIONALLY BLANK]

E8h6b. [INTENTIONALLY BLANK]

E8h7. [INTENTIONALLY BLANK]

E8h7a. [INTENTIONALLY BLANK]

E8h8. [INTENTIONALLY BLANK]

E8h9. [INTENTIONALLY BLANK]
E8h9a. [INTENTIONALLY BLANK]
E8h9b. [INTENTIONALLY BLANK]
E8h9c. [INTENTIONALLY BLANK]
E8h9e. [INTENTIONALLY BLANK]
E8h10. INTENTIONALLY BLANK

E8i1. [INTENTIONALLY BLANK]
E8i2a. [INTENTIONALLY BLANK]
E8i2b. [INTENTIONALLY BLANK]
E8i3. [INTENTIONALLY BLANK]
E8i4. [INTENTIONALLY BLANK]
E8i5. [INTENTIONALLY BLANK]
E8i5a. [INTENTIONALLY BLANK]
E8i5b. [INTENTIONALLY BLANK]
E8i5c. [INTENTIONALLY BLANK]
E8i5d. [INTENTIONALLY BLANK]
E8i5e. [INTENTIONALLY BLANK]
E8i5f. [INTENTIONALLY BLANK]
E8i6. [INTENTIONALLY BLANK]

BOAT, SHIP, BARGES AND OTHER VESSEL

[If E6.1b = 1, else go to E11x1]

E8j1. You said that you worked on a vessel other than the Enterprise, Q4000, DD2 or DD3. How much of that time did you work on a barge as part of the oil spill clean-up effort?

None	1
Less than half	2
About half	3
More than half	4

All of it 5
DON'T KNOW 8
REFUSED 9

E8j2. How much of your time did you work on a boat or ship, not including a barge or rig, as part of the oil spill clean-up effort?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

If E6.1a = 1 or E6.1c = 1, else go to E9a4
E9a1. What date did you start working on one of these barges, boats, or ships?
[INTERVIEWER: IF PARTICIPANT HAS TROUBLE ANSWERING, ASK "CAN YOU TELL ME THE YEAR THAT YOU STARTED?". THEN ASK "CAN YOU TELL ME THE MONTH AND WHETHER YOU STARTED EARLY, MIDDLE, OR LATE IN THE MONTH?"; ENTER DAY AS "EE", "MM", OR "LL" FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY. IF PARTICIPANT CONTINUES TO HAVE TROUBLE ANSWERING, ASK "CAN YOU TELL ME JUST THE MONTH THAT YOU STARTED?"; ENTER DAY AS 88.]

__/__/__ start date [USE CHAR.-SENSITIVE POP-UP MENU FOR MONTH]
DON'T KNOW……88888888
REFUSED…….. 99999999

E9a2. What date did you stop?
[INTERVIEWER: IF PARTICIPANT HAS TROUBLE ANSWERING, ASK "CAN YOU TELL ME THE YEAR THAT YOU STOPPED?". THEN ASK "CAN YOU TELL ME THE MONTH AND WHETHER YOU STOPPED EARLY, MIDDLE, OR LATE IN THE MONTH?"; ENTER DAY AS "EE", "MM", OR "LL" FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY. IF PARTICIPANT CONTINUES TO HAVE TROUBLE ANSWERING, ASK "CAN YOU TELL ME JUST THE MONTH THAT YOU STOPPED?"; ENTER DAY AS 88.]
[PROGRAMMER NOTE: E9a2- E9a1 SHOULD NEVER BE < 0.]

__/__/__ stop date
[USE CHAR.-SENSITIVE POP-UP MENU FOR MONTH]
STILL WORKING……..77777777
DON'T KNOW……88888888
REFUSED…….. 99999999

if E9a1=(DON'T KNOW or REFUSED) or E9a2=(DON'T KNOW or REFUSED) or >= 1 of (day, month, year) of E9a1 is missing (incl. 88 for day) or >= 1 of (day, month, year) of E9a2 is missing (incl. 88 for day) or E9a2- E9a1= 0, else E9a2a

E9a2a1. How many days, weeks, or months did you do clean-up work on one of these barges, boats, or ships as part of the oil spill clean-up effort?

_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
DON'T KNOW	8
REFUSED	9

E9a2a. Not counting weekends and scheduled time off, were there any periods during this time when you did not work on one of these vessels?

YES..... 1
NO ..... 2 [GO TO E9a3]
DON'T KNOW..... 8 [GO TO E9a3]
REFUSED..... 9 [GO TO E9a3]

E9a2b. Not counting weekends and scheduled time off, about how many days, weeks, or months in total did you not work on one of these vessels during this time?

|__|__|__| Units
Days..... 1
Weeks..... 2
Months..... 3
DON'T KNOW..... 888
REFUSED..... 999

E9a3. In a typical week or month, how many days did you work on one of these vessels?

|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

[PROGRAMMER: Set totalOtherVesselDays = ((E9a2 – E9a1) [in days] – E9a2b [in days]) / 7 * E9a3 [per week]. Set totalOtherVesselDaysThresholdReached = ((E6.1a <> 1 and E6.1c <> 1) or (totalCleanupDays >= 30 and

totalOtherVesselDays >= 7) or (totalCleanupDays < 30 and totalOtherVesselDays >= 3)).]

if totalOtherVesselDaysThresholdReached = TRUE, else go to E11x1.

E9a4. When you were working on one of these barges, boats, or ships, about how many hours a day, on average, did you work?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9b1. Did you ever work in an area where you could see the individual ships or rigs that were working in the wellhead area?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9b1=1, else E9b5
E9b2a. What month did you start working in an area where you could see the individual ships or rigs in the wellhead area?
__ __ MONTH
DON'T KNOW..... 88
REFUSED..... 99

E9b2b. How many days, weeks, or months did you work in this area?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
DON'T KNOW	8
REFUSED	9

E9b3. In a typical week or month, how many days did you work in this area?
|__|__| per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9b4. About how many hours a day?
___ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9b5. Did you work on vessel that supplied fuel, chemicals, or equipment, or that transferred personnel?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9b5=1, else go to E9c1

	YES	NO	DK	RE
E9b6a. Was it supplying fuel?	1	2	8	9
E9b6a1. Was it supplying chemicals?	1	2	8	9
E9b6b. Was it supplying equipment or personnel?	1	2	8	9

If E9b6b=1 and E8j2=2-5, else E9c1
E9b6c. Did you operate a shallow draft, air or jon boat to transport beach clean-up people?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9b6c=1, else E9c1
E9b6d1. What month and year did you start operating a shallow draft, air or jon boat to transport beach clean-up people?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E9b6d2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E9b6e. In a typical week or month, how many days did you transport beach clean-up people on one of these vessels?
|__|__| per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9b6f. About how many hours a day?

__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9c1. Did you work on a vessel that skimmed or helped in the skimming of the water for oil?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9c1=1, else E9d1
E9c2a. What month did you start working on a vessel that skimmed or helped in the skimming of the water for oil?
__ __ MONTH
DON'T KNOW..... 88
REFUSED..... 99

E9c2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
DON'T KNOW	8
REFUSED	9

E9c3. In a typical week or month, how many days did the vessel skim or help skim the water for oil while you were on it?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9c4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

If E8j2=2-5, else E9f1
E9d1. Did you work on a vessel that burned or helped burn oil on water?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9d1=1, else E9e1
E9d2a. What month did you start working on a vessel that burned or helped burn oil on water?
__ __ MONTH
DON'T KNOW..... 88
REFUSED..... 99

E9d2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E9d3. In a typical week or month, how many days were you on the vessel while it was burning oil on water?
|__|__| per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9d4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9e1. Did you work on a vessel that looked for oil on the water?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9e1=1, else E9f1
E9e2a. What month did you start working on one of these vessels that looked for oil on the water?
__ __ MONTH
DON'T KNOW..... 88
REFUSED..... 99

E9e2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2

Months 3
DON'T KNOW 8
REFUSED 9

E9e3. In a typical week or month, how many days did you work on a vessel looking for oil on the water?
|__|__| per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9e4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9e5. Boats often stayed in the area of the oil once it was found. In a typical week or month, about how many times did your vessel stay in the immediate area of the oil before it was skimmed, burned, or dispersed, or before your vessel left the area?
|__|__| times per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

If E9e5 > 0, else E9f1
E9e6. Once your vessel found the oil, about how many hours did your vessel usually stay in the immediate area before the oil was skimmed, burned, or dispersed, or before your vessel left?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9f1. Did you work on a vessel that carried oil or oily water to a barge, ship or the shore?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9f1=1, else E9g1
E9f2a. What month did you start working on one of these vessels?
__ __ MONTH

DON'T KNOW..... 88
REFUSED..... 99

E9f2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
DON'T KNOW	8
REFUSED	9

E9f3. In a typical week or month, how many days did you work on one of these vessels that was carrying oil or oily water?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9f4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9g1. Dispersant is the chemical used to break up the oil in the water. Did you work on a vessel that handled dispersant?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9g1=1 and E8j2=2-5, else E9i1
E9g1a. Did the vessel you worked on inject or pump dispersant to the wellhead 5000 feet below the water surface?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9g1a=1, else E9g2.
E9g1b. What month did you start working on this type of vessel?
__ __ MONTH
DON'T KNOW..... 88
REFUSED..... 99

E9g1c. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
DON'T KNOW	8
REFUSED	9

E9g1d. In a typical week or month, how many days did you work on a vessel that injected or pumped dispersant 5000 feet below the water surface?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9g1e. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9g2. Did the vessel you worked on inject dispersant just below the water surface?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9g2=1, else E9h1.
E9g3a. What month did you start working on this type of vessel?
__ __ MONTH
DON'T KNOW..... 88
REFUSED..... 99

E9g3b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
DON'T KNOW	8
REFUSED	9

E9g4. In a typical week or month, how many days did you work on a vessel when it was injecting dispersant just below the water surface?
|__|__| days per unit
Week..... 1

Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9g5. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9h1. Did you work on a vessel that sprayed dispersant on the surface of the water?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9h1=1, else E9i1
E9h2a. What month did you start working on this type of vessel?
__ __ MONTH
DON'T KNOW..... 88
REFUSED..... 99

E9h2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
DON'T KNOW	8
REFUSED	9

E9h3. In a typical week or month, how many days did you work on a vessel when it was spraying dispersant on the surface of the water?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9h4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9i1. Booms were used to contain or absorb oil and oil products floating on the surface of the water. They include hard, spaghetti, sausage, or pompom booms.

Did you work on a vessel that put out, inspected, moved, or collected booms or absorbent materials such as rags or mats from the water?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9i1=1, else E9k1.
E9i2a. What month did you start working on one of these vessels?
__ __ MONTH
DON'T KNOW..... 88
REFUSED..... 99

E9i2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E9i3. In a typical week or month, how many days did you work on a vessel when booms or absorbent material were being handled?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9i4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9i5. Did the vessel you were on <u>collect</u> oily booms onto the vessel?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9i5=1, else E9o1
E9i6a. What month did you start working on one of these vessels?
__ __ MONTH
DON'T KNOW..... 88
REFUSED..... 99

E9i6b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E9i7. In a typical week or month, how many days did you work on a vessel that was collecting oily booms?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9i8. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9j. INTENTIONALLY BLANK

E9o1. When on the vessel, did you soak up oil or oily material in the water <u>by hand</u> with absorbent booms or other absorbent materials?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9o1=1, else E9k1

E9o2a. What month and year did you start this work?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E9o2b.
E14h2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

STILL WORKING….7

E9o3. In a typical week or month, how many days did you soak up oil or oily material by hand with absorbent materials?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9o4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9k1. Did you work on a vessel that deconned other vessels?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9k1=1, else E9l1
E9k2a. What month and year did you start working on one of these vessels?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E9k2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E9k3. In a typical week or month, how many days did you work on a vessel that was deconning other vessels?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9k4. About how many hours a day?

__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9l1. Were you ever outside on a vessel while it was being deconned?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9l1=1, else E9m1
E9l2a. What was the first month and year you were outside on a vessel while it was being deconned?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E9l2b. What was the last month and year this happened?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW 88 8888
REFUSED 99 9999

E9l3. In a typical week or month how many days were you outside on a vessel while it was being deconned?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9l4. About how many hours a day did this happen?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

If E8j2=2-5, else E10a1
E9m1. For most of the time that you were on a vessel, could you see the shoreline?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9m1=1, else E10a1
E9m2. Did you work on a vessel that patrolled the beaches or marshes for oil, oily water, tar balls, tar mats, or animals?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9m2=1, else E9n1
E9m3a. What month and year did you start working on one of these vessels?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E9m3b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
STILL WORKING 7
DON'T KNOW 8
REFUSED 9

E9m4. In a typical week or month, how many days were you on a vessel doing this type of patrolling?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9m5. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9n1. Did you work on a vessel that spent most of the day near beaches or marshes being cleaned?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9n1=1, else E9p1
E9n2a. What month and year did you start working on one of these vessels?

__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E9n2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
STILL WORKING 7
DON'T KNOW 8
REFUSED 9

E9n3. In a typical week or month, how many days did you work on a vessel that spent most of the day near beaches or marshes being cleaned?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9n4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E9p1. Did you work on a vessel that cleaned rock jetties or other shoreline structures?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E9p1=1, else E10a1
E9p2a. What month and year did you start working on one of these vessels?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E9p2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3

DON'T KNOW 8
REFUSED 9
STILL WORKING….7

E9p3. In a typical week or month, how many days were you on a vessel that was cleaning rock jetties or other shoreline structures?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E9p4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

SHIP, BOAT AND BARGE TASKS

If E9k1=1, else E10c1
E10a1. You said you worked on a vessel that deconned other vessels. Were you personally involved in the deconning?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10a1=1, else E10c1
E10a2a. What month and year did you start this work?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10a2b.How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E10a3. In a typical week or month, how many days did you decon other vessels?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10a4. About how many hours a day did you do it?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

Decon may have involved a variety of cleaning methods. Thinking about your experience deconning other vessels while on a vessel…

E10a5. Did you or a person you were directly helping use dry ice pellets to remove oil?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E10a6. Did you or a person you were directly helping use low pressure sprays? These used a garden-like hose or a sprayer with a handheld wand and a small tank.
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E10a7. Did you or a person you were directly helping use high pressure sprays, which used compressed air?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10a7=1, else E10a10
E10a8. Of the total time you were involved in deconning, how much of the time was a high pressure spray used?
[PROGRAMMER NOTE: Only persons who said yes to E10a7 should get to this question, so NONE is not a valid choice here. If the participant answers NONE here, the interviewer needs to go back to E10a7, clarify with the participant and change the answer there if necessary..]

None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10a9. INTENTIONALLY MISSING

If E10a6=1 or E10a7=1, else go to E10a11
E10a10. How much of the time that you deconned was hot water used for spraying?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10a11. Of the total time you were involved in deconning, how much of the time did you use cloths, sponges, or brushes?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

If E9c1=1, else E10d2

E10c1. You said you worked on a vessel that skimmed or helped skim oil from the water. Did you <u>personally</u> skim oil or directly help another person skim oil?

Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10c1=1, else E10d2

E10c2a. What month and year did you start this work?

__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10c2b. How many days, weeks, or months did you do this?

_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
DON'T KNOW	8
REFUSED	9

E10c3. In a typical week or month, how many days did you skim oil or directly help another person skim oil?

|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10c4. About how many hours a day?

__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E10d1. [INTENTIONALLY BLANK]

If E9g1a=1 or E9g2=1 or E9h1=1, else E10f1
E10d2. You said you worked on a vessel that applied dispersant to the water. Did you personally prepare the dispersant by mixing it with water or other chemicals?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10d2=1, else E10d10
E10d3a. What month did you start this work?
__ __ MONTH
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10d3b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E10d4. In a typical week or month, how many days did you prepare the dispersant?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10d5. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E10d6. INTENTIONALLY BLANK

E10d7. INTENTIONALLY BLANK

E10d8. INTENTIONALLY BLANK

E10d9. INTENTIONALLY BLANK

If E9g2=1, else E10d14
E10d10. Did you personally inject or pump dispersant just below the water surface?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10d10=1, else E10d14

E10d11a. What month did you start this work?
__ __ MONTH
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10d11b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E10d12. In a typical week or month, how many days did you inject or pump dispersant just below the water surface?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10d13. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

If E9h1=1, else E10f1
E10d14. Did you personally spray dispersant or directly help another person spray dispersant onto the water from a vessel?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10d14=1, else E10e1
E10d15a. What month did you start this work?
__ __ MONTH
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10d15b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E10d16. In a typical week or month, how many days did you spray dispersant onto the water from a vessel?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10d17. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E10e1. Did you work outside, for example on a deck, while dispersant was being sprayed by someone on the vessel?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10e1=1, else E10f1
E10e2a. What month did this first happen?
__ __ MONTH
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10e2b. What month did this last happen?
__ __ MONTH
DON'T KNOW 88 8888
REFUSED 99 9999

E10e3. In a typical week or month, how many days did you work outside while dispersant was being sprayed by someone on the vessel?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10e4. About how many hours a day did it happen?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E10f1. When you were outside on a vessel, did you ever see a plane spraying a chemical in the immediate area of your vessel?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10f1=1, else E10j1
E10f2a. In what month did this first happen?
__ __ MONTH
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10f2b. In what month did this last happen?
__ __ MONTH
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10f3. In a typical week or month, about how many days did this happen?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10f4. About how many hours a day did this happen?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E10j1. Did you take a sample of oil or oily water from a cargo tank?
Yes..... 1
No 2

DON'T KNOW..... 8
REFUSED..... 9

If E10j1=1, else E10k1
E10j2a. What month and year did you first do this?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10j2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
DON'T KNOW	8
REFUSED	9

E10j3. In a typical week or month, how many days did you take a sample of oil or oily water from the cargo tank?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10j4. About how many times a day?
__ ___ times
DON'T KNOW..... 88
REFUSED..... 99

E10j5. Did you take the sample through:
E10j5a. A hatch or manhole?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E10j5b. Or by opening a valve or spigot?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E10k1. While on a vessel, did you clean up pools of oil or remove oily plastic used to protect surfaces on the vessel?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10k1=1, else E10l1
E10k2a. What month and year did you first do this?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10k2b. How many days, weeks, or months did you do this job?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E10k3. In a typical week or month, how many days did you clean up pools of oil or remove oily plastic?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10k4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

If E9i5=1, else E10m1
E10l1. You said you worked on a vessel that collected oily booms. Did you <u>personally</u> handle oily booms by moving them or bringing them onto the vessel from the water?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10l1=1, else E10m1

E10l2a. What month and year did you first do this?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10l2b. How many days, weeks, or months did you do this job?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E10l3. In a typical week or month, how many days did you <u>personally</u> handle oily booms by moving them or bringing them onto the vessel?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10l4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E10l5. What kinds of booms did you handle? Were they: hard, snare, pompoms, spaghetti, sausage, or something else? [SELECT ALL THAT APPLY]

	YES	NO	DK	RE
HARD BOOMS	1	2	8	9
SNARE BOOMS	1	2	8	9
POMPOMS	1	2	8	9
SPAGHETTI	1	2	8	9
SAUSAGE	1	2	8	9
OTHER SPECIFY: _____	1	2	8	9

If E9d1=1, else E10n1
E10m1. You said you worked on a vessel that burned or helped burn oil on the water. Were you <u>personally</u> involved in the burning?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10m1=1, else E10n1
E10m2a. What month did you start this work?
__ __ MONTH
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10m2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E10m3. In a typical week or month, how many days did you <u>personally</u> help burn oil?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10m4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

If E9p1=1, else, E10o1
E10n1. You said you worked on a vessel that cleaned rock jetties or other shoreline structures. Did you <u>personally</u> pressure spray them?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10n1=1, else E10o1
E10n2a. What month and year did you start this work?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10n2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1

Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E10n3. In a typical week or month, how many days did you personally pressure spray rock jetties or other shoreline structures from a vessel?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10n4. About how many hours a day did you spray?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E10o1. Please describe any other tasks you did while on a boat, ship, or barge during the clean-up effort that I did not ask you about. These could include things like providing security, monitoring worker safety, supervision, hazard evaluation, or other clean-up related tasks we have not asked you about.
E10o1.a_____ [FREE TEXT FIELD]
E10o1.b_____ [FREE TEXT FIELD]
E10o1.c_____ [FREE TEXT FIELD]
E10o1.d_____ [FREE TEXT FIELD]
E10o1.e_____ [FREE TEXT FIELD]
NONE / NA 7
DON'T KNOW.....8
REFUSED.....9

LAND

If E6.1c=1, else E10g1

If E6.1a = 1 or E6.1b = 1, else go to E11x3
E11x1. You said that some of your clean-up work was on land. What date did you start doing this work?
[INTERVIEWER: IF PARTICIPANT HAS TROUBLE ANSWERING, ASK "CAN YOU TELL ME THE YEAR THAT YOU STARTED?". THEN ASK "CAN YOU TELL ME THE MONTH AND WHETHER YOU STARTED EARLY, MIDDLE, OR LATE IN THE MONTH?"; ENTER DAY AS "EE", "MM", OR "LL" FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY. IF PARTICIPANT CONTINUES TO HAVE TROUBLE ANSWERING, ASK "CAN YOU TELL ME JUST THE MONTH THAT YOU STARTED?"; ENTER DAY AS 88.]

__/__/__ start date [USE CHAR.-SENSITIVE POP-UP MENU FOR MONTH]
DON'T KNOW……88888888
REFUSED…….. 99999999

E11x2. What date did you stop?
[INTERVIEWER: IF PARTICIPANT HAS TROUBLE ANSWERING, ASK "CAN YOU TELL ME THE YEAR THAT YOU STOPPED?". THEN ASK "CAN YOU TELL ME THE MONTH AND WHETHER YOU STOPPED EARLY, MIDDLE, OR LATE IN THE MONTH?"; ENTER DAY AS "EE", "MM", OR "LL" FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY. IF PARTICIPANT CONTINUES TO HAVE TROUBLE ANSWERING, ASK "CAN YOU TELL ME JUST THE MONTH THAT YOU STOPPED?"; ENTER DAY AS 88.]
[PROGRAMMER NOTE: E11x2- E11x1 SHOULD NEVER BE < 0.]

__/__/__ stop date [USE CHAR.-SENSITIVE POP-UP MENU FOR MONTH]
STILL WORKING…….. 77777777
DON'T KNOW……88888888
REFUSED…….. 99999999

if E11x1=(DON'T KNOW or REFUSED) or E11x2=(DON'T KNOW or REFUSED) or >= 1 of (day, month, year) of E11x1 is missing (incl. 88 for day) or >= 1 of (day, month, year) of E11x2 is missing (incl. 88 for day) or E11x2- E11x1= 0, else E11x2a
E11x2a1. How many days, weeks, or months did you do clean-up work on land?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
DON'T KNOW	8
REFUSED	9

E11x2a. Not counting weekends and scheduled time off, were there any periods during this time when you did not work on the clean-up on land?
YES..... 1
NO ..... 2 [GO TO E11x3]
DON'T KNOW..... 8 [GO TO E11x3]
REFUSED..... 9 [GO TO E11x3]

E11x2b. Not counting weekends and scheduled time off, about how many days, weeks, or months in total did you not work on the clean-up on land during this time?
|__|__|__| Units
Days..... 1
Weeks..... 2
Months..... 3
DON'T KNOW..... 888
REFUSED..... 999

E11x3. Did/Do you spend time in an office on land as part of the clean-up response?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E11x3=1, else E15a
E12. Of your land-based oil spill clean-up work, how much of your time did/do you spend in an office?
None 1 [SKIP TO E13]
Less than half 2
About half 3 [SKIP TO E13]
More than half 4 [SKIP TO E13]
All or almost all of it 5 [SKIP TO E13]
DON'T KNOW 8 [SKIP TO E13]
REFUSED 9 [SKIP TO E13]

E12a. Do/did you spend [if totalCleanupDays >= 30: "1 week"; if totalCleanupDays < 30: "3 days"] or more in an office?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E12=1 or E12a=2, go to E15a; else if E12=5, go to E53.
E13. Did/do you spend any time…

E13a. On the beaches?
Yes..... 1
No 2
DON'T KNOW 8
REFUSED 9

E13b. In an area where workers were/are deconning vessels or equipment?
Yes..... 1
No 2
DON'T KNOW 8
REFUSED 9

E13c. In any other place where oil, oily materials, or chemicals were/are being used?
Yes..... 1
No 2
DON'T KNOW 8
REFUSED 9

If E13a AND E13b AND E13c all =2, 8 or 9, else E14a
E13d. Where did/do you spend most of your work time when not in the office?
_____ [FREE TEXT FIELD]

If E13a=1, else E14c
E14a. How much of the time did/do you spend on the beaches?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E14b. What did/do you do there? _____ [FREE TEXT FIELD]

If E13b=1, else E14e
E14c. How much of your time did/do you spend in a deconning area?

None	1
Less than half	2
About half	3
More than half	4
All of it	5

DON'T KNOW 8
REFUSED 9

E14d. What did/do you do there? _____ [FREE TEXT FIELD]

If E13c=1, else go to MATRIX
E14e. How much of your time did/do you spend in an area where oil or oily material, chemicals, or materials were/are present?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E14f. What chemicals or materials were/are present?_____ [FREE TEXT FIELD]

E14g. What did/do you do there?_____ [FREE TEXT FIELD]

E14h1. What month and year did you start this job?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E14h2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
STILL WORKING 7
DON'T KNOW 8
REFUSED 9

E14i. In a typical week or month, how many days do/did you do this job?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E14j. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

GO TO MATRIX

BEACH/SHALLOW WATER CLEAN-UP

E15a. Were you involved in the cleanup of the beach, marsh or shoreline including rock jetties?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E15a=1, else E24
E15b1. What month and year did you start working on cleanup of the beach, marsh or shoreline?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E15b2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E15c. In a typical week or month, how many days do/did you help in the cleanup of beaches, marshes, or shoreline?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E15d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88

REFUSED..... 99

E16. Did/do you clean up…

E16a. Beaches?....
Yes..... 1
No 2
DON'T KNOW 8
REFUSED 9

E16b. Marshes? ....
Yes..... 1
No 2
DON'T KNOW 8
REFUSED 9

E16c. Rock jetties and other shoreline structures?
Yes..... 1
No 2
DON'T KNOW 8
REFUSED 9

If E16a=1 or E16b=1, else E23a
E19a. While on the beach, did you operate or work within 20 feet of trucks, front end loaders, bobcats, portable skimmers or sifters, or sand shakers or washers, UTVs or ATVs?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E19a=1, else E20a
E19b1. What month and year did you start operating or working within 20 feet of this equipment?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E19b2. How many days, weeks, or months did you do this job?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E19c. In a typical week or month, how many days do/did you operate this equipment or work within 20 feet of it?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E19d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

I'm now going to ask about cleaning the shoreline of tar balls, patties or mats; [PAUSE] oily plants and garbage; [PAUSE] oil and oily sand; [PAUSE] and rocks. First,

E20a. Did you remove tar balls, patties, or mats using shovels, rakes, buckets, or other hand tools from the beach or marshes?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E20a=1, else E21a.
E20b1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E20b2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E20c. In a typical week or month, how many days do/did you remove tar balls, patties, or mats using these hand tools?
|__|__| days per unit

Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E20d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E21a. Did you cut, collect, or put oily plants, sargassum weed or grass, or garbage into bags or containers for disposal?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E21a=1, else E22a
E21b1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E21b2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E21c. In a typical week or month, how many days do/did you cut, collect, or dispose of this type of material?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E21d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E22a. Did you remove oil or oily sand from the beach or marshes with shovels, rakes, wheelbarrows, or other hand tools?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E22a=1, else E22e
E22b1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E22b2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E22c. In a typical week or month, how many days do/did you remove oil or oily sand with hand tools?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E22d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E22e. Did you soak up the oil or oily material from the beach or marshes with pompoms, absorbent booms, diaper-like material, or any other absorbent material?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E22e=1, else E17a

E22f1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E22f2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E22g. In a typical week or month, how many days do/did you soak up the oil or oily material with absorbent materials?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E22h. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

if not (E20a=1 or E21a=1 or E22a=1 or E22e=1), else E22i
E17a. Did/Do you patrol the beaches or marshes on foot to search for oil, tar or oily animals?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E17a=1, else E22i.
E17b1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E17b2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days 1
Weeks 2
Months 3
STILL WORKING 7
DON'T KNOW 8
REFUSED 9

E17c. In a typical week or month, how many days do/did you patrol the beaches or marshes on foot?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E17d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E18a. Did you use an auger or other hand tool to search for oil or tar under the sand or water?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E18a=1, else E22i
E18b1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E18b2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
STILL WORKING 7
DON'T KNOW 8
REFUSED 9

E18c. In a typical week or month, how many days do/did you use one of these tools to search for oil or tar?

|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E18d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E22i. Did you burn or help burn oily grass in marshy areas?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E22i=1, else E22m1
E22j1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E22j2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E22k. In a typical week or month, how many days do/did you burn or help burn oily grass in marshy areas?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E22l. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E22m. [INTENTIONALLY BLANK]

If E16a AND E16b=1, else E23a
E22m1. How much of the time when you were working on the beaches or marshes were you on the beaches?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E22m2. How much of it was on the marshes?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

If E16c=1, else E24
E23a. When you cleaned rocks, jetties, or other shoreline structures, did you use high pressure spray?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E23a=1, else E23e
E23b1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E23b2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E23c. In a typical week or month, how many days do/did you clean rocks or shoreline structures with high pressure spray?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E23d. About how many hours a day did you spray?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E23e. Did you clean rocks or structures by scraping them with hand tools or by wiping them with pompoms, absorbent booms, diaper-like material, or other absorbent material?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E23e=1, else E24
E23f1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E23f2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E23g. In a typical week or month, how many days do/did you clean rocks by scraping or wiping them?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E23h. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E24. Did you handle booms either on land or while standing in shallow water?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E24=1, else E28a
E25a. Did you put out, move, or inspect booms while standing in oily water?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E25a=1, else E26a
E25b1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E25b2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E25c. In a typical week or month, how many days do/did you put out, move, or inspect booms while standing in oily water?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E25d. About how many hours a day did you stand in oily water?
__ ___ hours

DON'T KNOW..... 88
REFUSED..... 99

E26a. Did you bring in oily booms while standing in water?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E26a=1, else E27a
E26b1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E26b2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E26c. In a typical week or month, how many days do/did you bring in oily booms while standing in water?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E26d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E27a. Did you repair oily booms?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E27a=1, else E28a

E27b1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E27b2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E27c. In a typical week or month, how many days do/did you repair oily booms?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E27d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

DECONTAMINATION

E28a. Did you clean or decon or help to clean or decon vessels, equipment or personnel?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E28a=1, else go to E31a
Did you clean or decon...

E28b. Boats, ships, barges or other vessels?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E28c. Equipment or structures from the vessels, such as wood deck boards?
Yes..... 1

No 2
DON'T KNOW 8
REFUSED 9

E28d. Mobile land equipment, such as trucks, tractors, sifters, bobcats, UTVs, ATVs, and other moving equipment?
Yes 1
No 2
DON'T KNOW 8
REFUSED 9

Did you clean or decon…
E28e. Booms?
Yes 1
No 2
DON'T KNOW 8
REFUSED 9

E28f. Small equipment such as rakes, hoses, and tools?
Yes 1
No 2
DON'T KNOW 8
REFUSED 9

E28g. Other workers?
Yes 1
No 2
DON'T KNOW 8
REFUSED 9

E28h1. What month and year did you start cleaning or deconning?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW 88 8888
REFUSED 99 9999

E28h2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
DON'T KNOW	8
REFUSED	9

E28i. In a typical week or month, how many days do/did you clean or decon?
|__|__| days per unit

Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E28j. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

If E28b, E28c, E28d, E28e, or E28f=1, else E31a

For the following questions, I want you to think about your experience deconning while on land. Decon may have involved a variety of cleaning methods.

E29a. Did you or a person you were directly helping use dry ice pellets to remove oil?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E29b. Did you or a person you were directly helping use low pressure sprays? These used a garden-like hose or a sprayer with a handheld wand and a small tank?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E29c. Did you or a person you were directly helping use high pressure sprays, which used compressed air?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E29c=1, else go to E29e
E29d. Of the total time you were involved in deconning, how much of the time was a high pressure spray used?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8

REFUSED 9

If E29b=1 or E29c=1, else go to E29g
E29e. How much of the time that you deconned was the water hot?

None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E29g. Of the total time you were involved in deconning, how much of the time did you use cloths, sponges, or brushes?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E31a. Dispersants are chemicals used to break up the oil on the water. Did you ever handle dispersants on land or apply them by plane?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E31a=1, else E33a.
E31b1. What month did you start doing this?
__ __ MONTH
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E31b2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E31c. In a typical week or month, how many days did you handle dispersants on land or apply them by plane?

|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E31d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E32. Did you …

E32a. [INTENTIONALLY BLANK]

E32b. Prepare dispersant by mixing it with water or other chemicals?
Yes 1
No.....2
DON'T KNOW 8
REFUSED 9

E32c. Spray dispersants from a plane?
Yes 1
No.....2
DON'T KNOW 8
REFUSED 9

E32d. Did you do anything else with dispersants?
Yes .....1 SPECIFY:_____
[FREE TEXT]
No.....2
DON'T KNOW 8
REFUSED 9

WILDLIFE REHABILITATION

E33a. Did you handle any wildlife, whether alive or dead, during the cleanup? [PROBE: By "wildlife," we mean birds and other animals such as turtles, dolphins, and manatees that live in the Gulf.]
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E33a=1, else go to E34a
E33b1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E33b2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E33c. In a typical week or month, how many days did you handle any wildlife, whether alive or dead, during the cleanup?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E33d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E33e. How much of the time was the wildlife that you handled <u>oily</u>?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

If E33e=2-5, else go to E34a
E33f. Of the time you handled wildlife, how much of that time did you clean them with a cloth, sponge, or brush?

None	1
Less than half	2
About half	3
More than half	4
All of it	5

DON'T KNOW 8
REFUSED 9

E33g. Did you usually apply detergents or soaps to clean wildlife?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E33h. How much of the time that you handled wildlife did you bag or retrieve dead wildlife?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

ADDITIONAL LAND TASKS

The next questions are about moving oil or oily material to another site.

E34a. Did you pick up or transport bags that contained oily material?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E34b. INTENTIONALLY BLANK

If E34a=1, else E34f
E34c1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E34c2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
STILL WORKING 7
DON'T KNOW 8

REFUSED 9

E34d. In a typical week or month, how many days do/did you pick up or transport bags that contained oily material?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E34e. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E34f. Were you involved in transporting liquid oil or oily water off site by truck?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E34f=1, else E34j
E34g1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E34g2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
STILL WORKING 7
DON'T KNOW 8
REFUSED 9

E34h. In a typical week or month, how many days do/did you transport liquid oil or oily water off site by truck?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E34i. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E34j. Were you involved in recycling oil or oily material?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E34j=1, else E34n
E34k1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E34k2. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E34l. In a typical week or month, how many days do/did you recycle oil or oily material?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E34m. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E34n. Were you involved in disposing of oil or oily material somewhere offsite of the spill operation?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E34n=1, else E35a
E34o1. What month and year did you start doing this?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E34o2 How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
STILL WORKING 7
DON'T KNOW 8
REFUSED 9

E34p. In a typical week or month, how many days do/did you dispose of oil or oily material offsite?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E34q. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E35a. Did you fuel vessels or equipment with gasoline or diesel fuel as part of the clean-up operation?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E35a=1, else E10g1
E35b1. What month and year did you start fueling vessels or equipment as part of the oil spill response?
__ __ MONTH
__ __ __ __ YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E35b2. How many days, weeks, or months did you do this job?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
STILL WORKING	7
DON'T KNOW	8
REFUSED	9

E35c. In a typical week or month, how many days do/did you fuel vessels or equipment as part of the oil spill response?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E35d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E35e. How much of the time that you fueled vessels or equipment as part of the oil spill response did you pump gasoline vs. diesel fuel?

E35e1. Gasoline?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E35e2. Diesel fuel?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

OTHER TASKS

E10g1. Did you maintain or work on pumps or tanks that held dispersant, fuel, oil or oily water or something else?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10g1=1, else E10h1
E10g2a. What month and year did you first do this?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10g2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E10g3. In a typical week or month, how many days did you maintain or work on these pumps or tanks?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10g4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E10g5. The pumps or tanks that you worked on or maintained may have contained dispersant, gasoline, diesel fuel, oil or oily water, or something else. How much of the time did the pumps or tanks hold…

E10g5a. Dispersant?
None 1
Less than half 2
About half 3
More than half 4
All of it 5

DON'T KNOW 8
REFUSED 9

E10g5c. Gasoline?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10g5d. Diesel fuel?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10g5e. Oil or oily water?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10g5f. Something else? _____ (SPECIFY)
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10h1. Did you handle or pump dispersant, fuel, oil or oily water, or something else?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10h1=1, else E10i1
E10h2a. What month and year did you first do this?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10h2b How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E10h3. How many days did you handle or pump these materials in a typical week or month?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10h4. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

E10h5. How much of the time that you handled or pumped these materials was it…

E10h5a. Dispersant?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10h5c. Gasoline?
None 1
Less than half 2
About half 3
More than half 4

All of it 5
DON'T KNOW 8
REFUSED 9

E10h5d. Diesel fuel?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10h5e. Oil or oily water?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10h5f. Something else? _____ (SPECIFY)
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10i1. Did you connect or disconnect hoses or lines used to transfer dispersant, gasoline, diesel fuel, oil or oily water, or something else?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10i1=1, else E10b1
E10i2a. What month and year did you first do this?
__ __ ……MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10i2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS

Days	1
Weeks	2
Months	3
DON'T KNOW	8
REFUSED	9

E10i3. How many days did you do this in a typical week or month?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10i4. About how many times a day?
[NOTE TO PROGRAMMER: This question departs from convention by asking about TIMES per day rather than HOURS per day.]
[NOTE TO INTERVIEWER: This question departs from convention by asking about TIMES per day rather than HOURS per day.]

__ ___ times
DON'T KNOW..... 88
REFUSED..... 99

E10i5. The transfer lines you connected or disconnected may have held dispersant, gasoline, diesel fuel, oil or oily water, or something else. How much of the time did the transfer lines hold …

E10i5a. Dispersant?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E10i5c. Gasoline?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E10i5d. Diesel fuel?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E10i5e. Oil or oily water?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E10i5f. Something else? _____ (SPECIFY)

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

If more than 1 of (E6.1a=1; E6.1b=1; E6.1c=1), else E10b1
E10i6. How much of the time that you connected or disconnected hoses or lines was it:
If E6.1a=1, else E10i6b
E10i6a. On a rig?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

If E6.1b=1, else E10i6c
E10i6b. On a boat or barge?

None	1
Less than half	2
About half	3

More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

If E6.1c=1, else E10b1
E10i6c. On land?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10b1. Did you personally enter tanks or containers that had contained gasoline, diesel fuel, oil or oily water, or something else?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E10bx. Did you personally clean or inspect <u>from the outside</u> tanks or containers that held or <u>had</u> held gasoline, diesel fuel, oil or oily water, or something else?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10b1=1 or E10bx=1, else E37
E10b2a. What month and year did you start cleaning or inspecting these tanks or containers, whether from the inside or outside?
__ __ MONTH
__ __ __ __ ..... YEAR
DON'T KNOW..... 88 8888
REFUSED..... 99 9999

E10b2b. How many days, weeks, or months did you do this?
_I_I_I_ UNITS
Days 1
Weeks 2
Months 3
DON'T KNOW 8
REFUSED 9

E10b2c. In a typical week or month, how many days did you clean or inspect them, whether from the inside or outside?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10b2d. About how many hours a day?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

If E10b1=1, else E10b3c

Did you enter these tanks or containers to:

E10b3a. Inspect them?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E10b3b. Clean them?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If E10bx=1, else E10b4

Did you work on the outside of these tanks or containers to:
E10b3c. Inspect them?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E10b3d. Clean them?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

If (E10b3a=1 or E10b3b=1) and E10bx=1, else E10b6
E10b4. In a typical week or month, how many days did you enter them?
|__|__| days per unit
Week..... 1
Month..... 2
DON'T KNOW..... 88
REFUSED..... 99

E10b5. About how many hours a day were you in a tank or container?
__ ___ hours
DON'T KNOW..... 88
REFUSED..... 99

If E10b3a=1 or E10b3b=1, else E37
E10b6. The tanks or containers you entered may have contained gasoline, diesel fuel, oil or oily water, or something else. When you entered tanks, how much of the time had they just held…

E10b6a. Gasoline?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10b6b. Diesel fuel?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10b6c. Oil or oily water?
None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E10b6e. Something else? (SPECIFY) _____

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

If E6.1c=1 and (E11x3, E15a, E24, E28a, E31a, E33a, E34a, E34f, E34j, E34n, E35a, E10g1, E10h1, E10i1, E10b1, E10bx all=2, 8 or 9), else E38a

E37. The cleanup operation required a lot of workers who were not on boats, beaches, or decon areas, and were not handling oil or oily materials. These workers include cooks; fork lift drivers; security; health & safety personnel; foremen; drivers; and many others. What kind of work did you do?
_____ [FREE TEXT FIELD]
DON'T KNOW.....8
REFUSED.....9

GO TO MATRIX

E38a. Did you do any other tasks related to the oil spill response that we did not ask you about already?
Yes..... 1
No ..... 2 [GO TO MATRIX]
DON'T KNOW..... 8 [GO TO MATRIX]
REFUSED..... 9 [GO TO MATRIX]

E38b. What other tasks did you do? _____ [FREE TEXT FIELD]
DON'T KNOW 8
REFUSED 9

$$ [BEGIN MATRIX FOR JOB BY EXPOSURE]

[PROGRAMMER: FOR EACH QUESTION WITHIN THE MATRIX THAT REQUIRES A CHECKLIST, DISPLAY A CHECKLIST OF ANSWERS CONSISTING OF ALL FILL-IN TERMS FROM THE JOB MATRIX WHOSE CONDITIONS ARE MET FOR THE SUBJECT. ANY ADDITIONAL CONDITIONS ARE INDICATED AS NEEDED BELOW. DISPLAY "[SELECT ALL THAT APPLY]" BEFORE EACH ANSWERS CHECKLIST. IF THERE IS ONLY ONE ENTRY IN THE MATRX WHOSE CONDITIONS ARE MET (I.E., IF THE CHECKLIST OF ANSWERS WOULD CONTAIN ONLY ONE ITEM), THEN SKIP THAT QUESTION (SINCE WE ALREADY KNOW WHAT THE ANSWER MUST BE). INCLUDE THE RESPONSE OPTION "ANOTHER JOB NOT LISTED ABOVE" IN ALL CHECKLISTS.

Except where otherwise noted, if the subject's response to the question(s) identified under "Condition" = 1, then the condition is met. For example, if the condition is "E9b1", then the condition is met if the subject has a value of E9b1=1. If the condition is "E7c1=2-5", then the condition is met if the subject has a value of E7c1 between 2 and 5 (inclusive). Note that the logic of this table is that if a participant worked in a given location, such as on a rig or platform ship, we include within the answer checklists either 1) each rig-specific task/exposure that is listed in the table and that was reported by that participant (e.g., [WORKED IN THE MOON POOL AREA]) or else, if there are no such rig-specific task(s)/exposure(s) for that participant, then 2) working on a rig or platform ship generally (i.e., [WORKED ON A RIG OR PLATFORM SHIP]). Thus, the *condition* for including a given fill-in term for the more general [WORKED ON A RIG OR PLATFORM SHIP] is constructed to be false if any of the more specific rig/platform-ship related *conditions* are true. Also note that a construct such as "E10c1<>1" is true if E10c1 is 2, 8, 9, or missing. Similarly, a construct such as "E7c1<> 2-5" is true if E7c1 is < 2 or is 8, 9, or missing.

The "non-rig water-based", "dispersant-related", and "decon-related" columns provide flags used within this section to determine whether to ask certain questions and whether to include fill-in terms in a given checklist.]

Condition	**Fill-in term within job matrix**	**Rig-based**	**Non-rig water-based**	**Dispersant-related**	**Decon-related**
E7c1=2-5	Worked in the moon pool area	X			
E7c2=2-5	Worked in the drilling area outside the control room	X			
E7c4=2-5	Worked in the flare area	X			
E7c5=2-5	Worked in the area where oil and gas were separated	X			

E7c5b=2-5	Worked out of doors on the rig	X			
(any of E7a1, E7a2, E7a3, OR E7a4=1) AND not (any of E7c1, E7c2, E7c4, E7c5, OR E7c5b=2-5)	Worked on a rig or platform ship	X			
E9b1 = 1	Worked on a vessel near the wellhead		X		
E9b6c = 1	Operated a shallow draft boat for transporting people		X		
E9c1=1 and E10c1<>1	Worked on a vessel that skimmed for oil		X		
E9d1=1 and E10m1<>1	Worked on a vessel that burned oil		X		
E9f1=1 and E10j1<>1	Worked on a vessel that carried oil or oily water		X		
E9g2=1 and not (E10d2=1 OR E10d10=1)	Worked on a vessel that injected dispersant		X	X	
E9h1=1 and not (E10d2=1 OR E10d14=1 OR E10e1=1)	Worked on a vessel that sprayed dispersant		X	X	
E9i1=1 and E10l1<>1	Worked on a vessel that handled booms		X		
E9i5=1 and E10l1<>1	Worked on a vessel that collected oily booms		X		
E9k1=1 and not (E10a1=1 or E10a7=1 or E10a11=2-5)	Worked on a vessel that deconned other vessels		X		X
E9l1	Were outside on a vessel being deconned		X		X
E9m2	Worked on a vessel that looked for oily materials or animals near or on shore		X		
E9n1	Worked on a vessel that spent the day near shore cleanup operations		X		

E9o1	Worked on a vessel where absorbent materials were used to soak up oil by hand		X		
E9p1=1 and E10n1<>1	Worked on a vessel that cleaned jetties and other structures		X		
E10a1	Were involved in deconning other vessels while on a vessel		X		X
E10a7	Used or helped with high pressure spraying while deconning on a vessel		X		X
E10a11=2-5	Used cloths, sponges, or brushes to decon while on a vessel		X		X
E10c1	Were involved in skimming oil		X		
E10d2	Prepared dispersant		X	X	
E10d10	Pumped dispersant just below the water surface		X	X	
E10d14	Were involved in spraying dispersant		X	X	
E10e1	Worked outside on a vessel while dispersant was being sprayed		X	X	
E10j1	Took oil or oily water samples from a cargo tank		X		
E10k1	Cleaned pools of oil or removed plastic coverings		X		
E10l1	Handled oily booms while on a vessel		X		
E10m1	Were involved in burning oil		X		
E10n1	Pressure sprayed jetties and other structures		X		
(E6.1b=1 AND totalOtherVesselDaysThresholdReached=TRUE) AND not (any of E9b1, E9b6c, E9c1, E10c1, E9d1, E10m1, E9f1, E10j1, E9g2, E10d2, E10d10, E9h1, E10d14, E10e1, E9i1, E10l1,	Worked on a vessel		X		

E9i5, E9k1, E10a1, E10a7, E9l1, E9m2, E9n1, E9o1, E9p1, E10n1, OR E10k1=1 or E10a11=2-5) AND not ((any of E10g1, E10h1, E10i1, E10b1, OR E10bx=1) AND E6.1a<> 1 AND E6.1c<> 1)					
E17a	Patrolled beaches or marshes on foot				
E18a	Searched for oil or tar under sand or water				
E20a	Removed tar balls, patties, or mats				
E21a	Cut, collected or disposed of oily plants				
E22a	Removed oil or oily sand from the shore				
E22e	Used absorbent material to soak up the oil on the beach				
E22i	Were involved in burning grass				
E23a	Cleaned rocks or jetties with high pressure spraying				
E23e	Cleaned rocks with hand tools or absorbent material				
E25a=1 or E26a=1	Moved or brought in booms while standing in oily water				
E27a	Repaired oily booms				
E28a	Deconned vessels, equipment, or personnel while on land				X
E29c	Used or helped with high pressure spraying while deconning on land				X

E29g=2-5	Used cloths, sponges, or brushes to decon while on land				X
E32b	Prepared dispersant			X	
E33a	Handled wildlife				
E34a	Picked up or transported bags containing oily material				
E34j	Recycled oil				
E34n	Disposed of oily material				
E35a	Fueled vessels or equipment				
E10g1	Maintained or worked on pumps or tanks	X	X	X	
E10h1	Handled or pumped chemicals, fuel, oil or oily water	X	X	X	
E10i1	Connected or disconnected transfer lines	X	X	X	
E10b1=1 or E10bx=1	Entered, cleaned, or inspected tanks or containers	X	X		
E37<>missing, DK, or REF	PROGRAMMER: USE WORDS IN TEXT FIELD IN E37	X	X	X	X
E38a<>missing, DK, or REF	PROGRAMMER: USE WORDS IN TEXT FIELD IN E38b	X	X	X	X

[INTERVIEWER: FOR QUESTIONS IN THE MATRIX THAT PROVIDE A CHECKLIST OF JOBS OR TASKS FOR THE PARTICIPANT TO CHOOSE FROM, READ THE CHECKLIST TO THE PARTICIPANT ABOUT EVERY 4 TIMES THAT SUCH A QUESTION OCCURS OR IF THE LIST CHANGES FROM THE PREVIOUS QUESTION, OR MORE OFTEN IF NECESSARY.]

If E6.1b=1 AND totalOtherVesselDaysThresholdReached = TRUE AND (“non-rig water-based”=“X” for any selected matrix entries), else go to E40a

E39. What was the name of each boat, ship, barge, or vessel that you worked on as part of the clean-up?
1. _____
2. _____
3. _____
4. _____
NO NAME 1
DON’T KNOW 8 [GO TO E40a]
REFUSED 9 [GO TO E40a]

E39a. [For each vessel in E39 except NO NAME (i.e., loop through them)] Were you on the [VESSEL NAME] when you…

DISPLAY CHECKLIST; ADDITIONAL CONDITION: "non-rig water-based"="X"

E40a. Did you wear leather gloves for any of your clean-up work?

YES	1
NO	2 [GO TO E40b]
DON'T KNOW	8 [GO TO E40b]
REFUSED	9 [GO TO E40b]

E40a1. For which of your jobs did you usually wear them?

DISPLAY CHECKLIST

E40b. Did you wear cotton gloves for any of your clean-up work?

YES	1
NO	2 [GO TO E40c]
DON'T KNOW	8 [GO TO E40c]
REFUSED	9 [GO TO E40c]

E40b1. For which of your jobs did you usually wear them?

DISPLAY CHECKLIST

E40c. Did you wear rubber or synthetic gloves for any of your clean-up work?

YES	1
NO	2 [GO TO E40d]
DON'T KNOW	8 [GO TO E40d]
REFUSED	9 [GO TO E40d]

E40c1. For which of your jobs did you usually wear them?

DISPLAY CHECKLIST

E40d. Did you wear boots or rubber slip-ons, booties, or chicken feet for any of your clean-up work?

YES	1
NO	2 [GO TO E40f]
DON'T KNOW	8 [GO TO E40f]
REFUSED	9 [GO TO E40f]

E40d1. For which of your jobs did you usually wear them?

DISPLAY CHECKLIST

E40f. Did you wear protective coveralls such as Tyvek for any of your clean-up work?

YES	1
NO	2 [GO TO E40e]
DON'T KNOW	8 [GO TO E40e]
REFUSED	9 [GO TO E40e]

E40f1. For which of your jobs did you usually wear them?

DISPLAY CHECKLIST

Go to E40x (i.e., skip to E40e if E40f=1)

E40e. Did you wear long sleeved shirts, jackets, or coveralls for any of your clean-up work?

YES	1
NO	2 [GO TO E40x]
DON'T KNOW	8 [GO TO E40x]
REFUSED	9 [GO TO E40x]

E40e1. For which of your jobs did you usually wear them?

DISPLAY CHECKLIST

E40x. Did you wear a respirator for any of your clean-up work?

YES	1
NO	2 [GO TO E40y]
DON'T KNOW	8 [GO TO E40y]
REFUSED	9 [GO TO E40y]

E40x1. For which of your jobs did you usually wear it?

DISPLAY CHECKLIST

E40y. Did you wear a face mask for any of your clean-up work?

YES	1
NO	2 [GO TO E41a]
DON'T KNOW	8 [GO TO E41a]
REFUSED	9 [GO TO E41a]

E40y1. For which of your jobs did you usually wear it?

DISPLAY CHECKLIST

If all of E40a-c=2, else E41b

E41a. Why didn't you wear gloves?
[SELECT ALL THAT APPLY FROM CODE BLOCK E41]

If E40d=2, else E41c

E41b. Why didn't you wear boots?
[SELECT ALL THAT APPLY FROM CODE BLOCK E41]

If all of E40e-f=2, else E42b

E41c. Why didn't you wear protective clothing such as Tyvek suits?
[SELECT ALL THAT APPLY FROM CODE BLOCK E41]

E41c1. Why didn't you wear long sleeved shirts, jackets, or coveralls when you worked on the clean-up?
[SELECT ALL THAT APPLY FROM CODE BLOCK E41]

BEGIN CODE BLOCK E41
NOT RECOMMENDED
NONE PROVIDED BY EMPLOYER/ORGANIZATION
NONE AVAILABLE IN MY SIZE
IT WAS BROKEN OR DID NOT WORK
WAS TOO HOT
WAS UNCOMFORTABLE (FOR REASONS OTHER THAN HEAT)
IMPEDED WORK
USE WAS DISCOURAGED BY EMPLOYER OR SUPERVISOR
USE WAS DISCOURAGED BY COLLEAGUES
DID NOT THINK IT WAS NECESSARY
DON'T KNOW.....88
REFUSED.....99
END CODE BLOCK E41

E42b. Did your skin or clothing come in contact with a solid or gooey oily residue or tar during any of your oil spill clean-up work?

YES	1
NO	2 [GO TO E42a]
DON'T KNOW	8 [GO TO E42a]
REFUSED	9 [GO TO E42a]

E42b1. In which of your jobs did this happen?

DISPLAY CHECKLIST

E42b2. On an average work day, how much of the time was your skin or clothing in contact with this oily residue or tar?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E42b3. Did you get any of this oily residue or tar on the skin of your hands?

YES	1
NO	2 [GO TO E42a]
DON'T KNOW	8 [GO TO E42a]
REFUSED	9 [GO TO E42a]

E42b4. On average, about how many hours a day was this oily residue or tar on your hands before you washed it off?

__ __ HOURS	
__ __ MINUTES	
DON'T KNOW	88 88
REFUSED	99 99

E42a. Did your skin or clothing come in contact with oil or oily water during any of your oil spill clean-up work?

YES	1
NO	2 [GO TO E42c]
DON'T KNOW	8 [GO TO E42c]
REFUSED	9 [GO TO E42c]

E42a1. In which of your jobs did this happen?

DISPLAY CHECKLIST

E42a2. On an average work day, how much of the time was your skin or clothing in contact with oil or oily water?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E42a3. Did you get any oil or oily water on the skin of your hands?

YES	1
NO	2 [GO TO E42c]
DON'T KNOW	8 [GO TO E42c]
REFUSED	9 [GO TO E42c]

E42a5. On average, about how many hours a day was this oil or oily water on your hands before you washed it off?

__ __ HOURS	
__ __ MINUTES	
DON'T KNOW	88 88
REFUSED	99 99

If "dispersant-related"="X" for any selected matrix entries, else go to E42d

E42c. Did your skin or clothing come in contact with dispersant during any of your oil spill clean-up work?

YES	1
NO	2 [GO TO E42d]
DON'T KNOW	8 [GO TO E42d]
REFUSED	9 [GO TO E42d]

E42c1. In which of your jobs did this happen?

DISPLAY CHECKLIST; ADDITIONAL CONDITION: "dispersant-related"="X"

E42c2. On an average work day, how much of the time was your skin or clothing in contact with dispersant?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E42c3. Did you get any dispersant on the skin of your hands?

YES	1
NO	2 [GO TO E42d]
DON'T KNOW	8 [GO TO E42d]
REFUSED	9 [GO TO E42d]

E42c5. On average, about how many hours a day was dispersant on your hands before you washed it off?

__ __ HOURS
__ __ MINUTES
DON'T KNOW 88
REFUSED 99

If "decon-related"="X" for any selected matrix entries, else go to E42e

E42d. Did your skin or clothing come in contact with chemicals used to clean or decon vessels or equipment during any of your oil spill clean-up work?

YES 1
NO 2 [GO TO E42e]
DON'T KNOW 8 [GO TO E42e]
REFUSED 9 [GO TO E42e]

E42d1. In which of your jobs did this happen?

DISPLAY CHECKLIST; ADDITIONAL CONDITION: "decon-related"="X"

E42d2. On an average work day, how much of the time was your skin or clothing in contact with these cleaning chemicals?

None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E42d3. Did you get any of the cleaning solutions on the skin of your hands?

YES 1
NO 2 [GO TO E42e]
DON'T KNOW 8 [GO TO E42e]
REFUSED 9 [GO TO E42e]

E42d4. [INTENTIONALLY BLANK]

E42d5. On average, about how many hours a day did you have cleaning solution on your hands before you washed it off?

__ __ HOURS
__ __ MINUTES
DON'T KNOW 88 88
REFUSED 99 99

E42e. Did your skin or clothing come in contact with water during any of your oil spill clean-up work?

YES	1
NO	2 [GO TO E43]
DON'T KNOW	8 [GO TO E43]
REFUSED	9 [GO TO E43]

E42e1. In which of your jobs did this happen?

DISPLAY CHECKLIST

E42e2. On an average work day, how much of the time was your skin or clothing in contact with water?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E43. Did you get oil or other chemicals inside your gloves, shoes, clothing, or respirators during any of your oil spill clean-up work?

YES	1
NO	2 [GO TO E44]
DON'T KNOW	8 [GO TO E44]
REFUSED	9 [GO TO E44]

E43a. In which of your jobs did this happen?

DISPLAY CHECKLIST

E43b. On average, how often did you have oil or other chemicals inside your gloves, shoes, clothing or respirators? Would you say it was …

Less than 1 day/month	1
1-4 days/month…..	2
1-5 days/week…..	3
Almost every day….	4
DON'T KNOW	8
REFUSED	9

If E40a, E40b, or E40c = 1, else E46a.
[PROGRAMMER: REPEAT QUESTION E44 FOR EACH TYPE OF GLOVE LISTED FROM QUESTION E40]

E44. When did you usually change your [TYPE(S) OF GLOVES FROM E40] gloves? Was it …

Whenever you took them off within a workshift?	1
At the end of a workshift?	2
Or did you usually go more than one day without changing gloves?	3
DON'T KNOW	8
REFUSED	9

E45. INTENTIONALLY BLANK

E45b. [INTENTIONALLY BLANK]

E45b1. [INTENTIONALLY BLANK]
E45b2. [INTENTIONALLY BLANK]
E45a. [INTENTIONALLY BLANK]
E45a1. [INTENTIONALLY BLANK]
E45a2. [INTENTIONALLY BLANK]

E45c. [INTENTIONALLY BLANK]
E45c1. [INTENTIONALLY BLANK]
E45c2. [INTENTIONALLY BLANK]

E45d. [INTENTIONALLY BLANK]
E45c1. [INTENTIONALLY BLANK]
E45c2. [INTENTIONALLY BLANK]

E46a. When you did clean-up work, did you have any jobs in which you were <u>not</u> able to regularly wash your hands before you ate?

YES	1
NO	2 [GO TO E47]
DON'T KNOW	8 [GO TO E47]
REFUSED	9 [GO TO E47]

E46a1. In which of your jobs did this happen?

DISPLAY CHECKLIST

E46a2. On average, how much of the time were you <u>able</u> to wash your hands before you ate?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

If ((E6.1a=1 AND totalRigDaysThresholdReached = TRUE) OR (E6.1b=1 AND totalOtherVesselDaysThresholdReached = TRUE)) and ("rig-based"="X" or "non-rig water-based"="X" for any selected matrix entries), else E46b

E47. Did you breathe smoke from burning oil during any of your oil spill clean-up work?

YES	1
NO	2 [GO TO E46b]
DON'T KNOW	8 [GO TO E46b]
REFUSED	9 [GO TO E46b]

E47a1. In which of your jobs did this happen?

DISPLAY CHECKLIST; ADDITIONAL CONDITION: "rig-based"="X" or "non-rig water-based"="X"

E47a2. On average, about how many hours a day did you breathe smoke from burning oil?

__ __ HOURS	
__ __ MINUTES	
DON'T KNOW	88 88
REFUSED	99 99

$$[END MATRIX FOR JOB BY EXPOSURE]

Now I'm going to ask you some general questions about your time doing cleanup work.

E46b. On most days, how soon after your work shift did you shower?
__ __ HOURS
__ __ MINUTES
DON'T KNOW..... 88 88
REFUSED..... 99 99

E48. On the days that you worked, how much of the time, on average, did you put sunscreen on your skin?

None	1
Less than half	2
About half	3
More than half	4
All of it	5
DON'T KNOW	8
REFUSED	9

E49. On the days that you worked, how much of the time, on average, did you put insect repellent on your skin?

None 1
Less than half 2
About half 3
More than half 4
All of it 5
DON'T KNOW 8
REFUSED 9

E50. Not counting scheduled work breaks, did you ever have to stop working because you were too hot?
Yes 1
No 2 [GO TO E51]
DON'T KNOW 8 [GO TO E51]
REFUSED 9 [GO TO E51]

E50a. About how many different days did this happen?
[PROBE: What we want to know is on how many different days you had to stop working because you were too hot. Please do not include times when you stopped for regular work breaks.]
__ ___ days
DON'T KNOW..... 888
REFUSED..... 999

E51. Did you smoke while on the job?
Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

E53. While working on the spill response, do/did you sleep …
E53a. In a flotel .... ?
Yes..... 1
No 2
DON'T KNOW 8
REFUSED 9

E53b. On a quarters barge?
Yes..... 1
No 2
DON'T KNOW 8
REFUSED 9

IF (E6.1a=1 AND totalRigDaysThresholdReached = TRUE) OR (E6.1b=1 AND totalOtherVesselDaysThresholdReached = TRUE), else E54
E53c. On a boat, ship, or rig?
Yes..... 1

No 2
DON'T KNOW 8
REFUSED 9

If E53a, E53b, and E53c all=2, else E56

E54. What was the name of the town, parish, or county where you slept? [PROGRAMMER: Same list of towns/states as identified in C3 and C4a, plus drop down menu that adds as new locations are entered]

_____
DON'T KNOW..... 8
REFUSED……..9

If E53c=1, else E57

E56. What was the name of each vessel that you slept on?
a. _____ [FREE TEXT FIELD]
b. _____ [FREE TEXT FIELD]
c. _____ [FREE TEXT FIELD]
d. _____ [FREE TEXT FIELD]
e. _____ [FREE TEXT FIELD]

If E53a, E53b, or E53c=1, else F1

E57. When you were working on oil spill clean-up, about how many nights a month, on average, did you sleep on a [FILL ALL = 1 FROM E53 --- FLOTEL/BARGE/VESSEL]?
NIGHTS __ __
DON'T KNOW……..88
REFUSED…… 99

E58. While you did clean-up work, did you sleep at least 1 night in an area of the Gulf where, during the day, you could see the ships or rigs that were working in the area of the wellhead?
Yes 1
No 2 [Go to E60]
DON'T KNOW 8 [Go to E60]
REFUSED 9 [Go to E60]

E59. About how many nights, did you sleep there?
NIGHTS __ __
DON'T KNOW……..88
REFUSED…… 99

E60. While you did clean-up work, did you sleep at least 1 night on a [FLOTEL/BARGE/VESSEL FROM E53] on water that visibly contained oil or had a sheen to it?

Yes	1
No	2 [Go to E62]
DON'T KNOW	8 [Go to E62]
REFUSED	9 [Go to E62]

E61. About how many nights, did this happen?

NIGHTS __ __
DON'T KNOW……..88
REFUSED…… 99

If E53b=1 or E53c=1, else F1

E62. While you did clean-up work, did you sleep at least 1 night on a [BARGE/VESSEL FROM E53] near burning oil?

Yes	1
No	2 [Go to F1]
DON'T KNOW	8 [Go to F1]
REFUSED	9 [Go to F1]

E63. About how many nights, did this happen?

NIGHTS __ __
DON'T KNOW……..88
REFUSED…… 99

SECTION F: Health

This next section will focus on your health. First, I need your height and weight.

F1. How tall are you?
|___| feet |___|___| inches [OR]
I___I___I___I cm
DON'T KNOW.. 8' 88"
REFUSED..... 9' 99"

F2. How much do you weigh?
|___|___|___| lbs [OR]
|___|___|___| kg
DON'T KNOW.. 888
REFUSED..... 999

F3. How would you rate your physical health?
Excellent 1
Very good 2
Good..... 3
Fair..... 4
Poor 5
DON'T KNOW..... 8
REFUSED..... 9

[PROGRAMMER NOTE: FOR F4, NUMBER OF YEARS WILL CHANGE BASED ON DATE OF INTERVIEW. IF DATE OF INTERVIEW ≤ OCTOBER 1, 2011 USE "two years" FOR [YEAR FILL]; IF DATE OF INTERVIEW IS BETWEEN OCTOBER 2, 2011 AND OCTOBER 1, 2012 USE "three years"; IF DATE OF INTERVIEW ≥ OCTOBER 2, 2012 USE "four years"]

F4. Compared to [YEAR FILL] ago, would you say your health is now better, worse, or about the same?
Better 1
Worse 2
About the same..... 3
DON'T KNOW..... 8
REFUSED..... 9

Health Symptoms while Working on the Oil Spill

[PROGRAMMER NOTE: If E1=2, 8, or 9, display "Now I'm going to ask you how often you had specific symptoms around the time of the oil spill. Please answer *All the time, Most of the time, Sometimes, Rarely, or Never*."]

[PROGRAMMER NOTE: If E1=1, display "Now I'm going to ask you how often you had specific symptoms while you were working on the oil spill. Please answer *All the time, Most of the time, Sometimes, Rarely, or Never*."]

F5. How often did you have a cough?
All the time 1
Most of the time 2
Sometimes 3
Rarely 4
Never 5
DON'T KNOW 8
REFUSED 9

F6. How often did you have wheezing or whistling in your chest?
All the time 1
Most of the time 2
Sometimes 3
Rarely 4
Never 5
DON'T KNOW 8
REFUSED 9

F7. How often did you have tightness in your chest?
All the time 1
Most of the time 2
Sometimes 3
Rarely 4
Never 5
DON'T KNOW 8
REFUSED 9

F8. How often were you short of breath?
All the time 1
Most of the time 2
Sometimes 3
Rarely 4
Never 5
DON'T KNOW 8
REFUSED 9

F9. How often did you have a stuffy, itchy or runny nose? [INTERVIEWER: READ ANSWER OPTIONS]
All the time 1
Most of the time 2
Sometimes 3

Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F10. How often did you have watery or itchy eyes?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F11. How often did you have burning eyes?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F12. How often did you have burning in your nose, throat or lungs?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F13. How often did you have a sore throat? [INTERVIEWER: READ ANSWER OPTIONS]
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F14. How often did you have a severe headache or migraine?
All the time 1
Most of the time 2
Sometimes..... 3

Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F15. How often did you feel dizzy or lightheaded?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F16. How often were you nauseated?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F16a. How often did you experience vomiting?
Every day..... 1
Several times a week 2
Once a week..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F16b. How often did you experience nose bleeds?
Every day..... 1
Several times a week 2
Once a week..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F16c. How often did you experience episodes of excessive or unusual hair loss?
Every day..... 1
Several times a week 2
Once a week..... 3
Rarely 4

Never 5
DON'T KNOW..... 8
REFUSED..... 9

F16d. How often did you experience seizures?
Every day..... 1
Several times a week 2
Once a week..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F16e. How often did you have insomnia?
Every day..... 1
Several times a week 2
Once a week..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F17. How often did you have blurred or distorted vision? [INTERVIEWER: READ ANSWER OPTIONS]
All the time..... 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F17a. How often did you have tingling or a "pins and needles" feeling in your hands, arms, feet, or legs?
All the time 1
Most of the time..... 2
Sometimes 3
Rarely..... 4
Never 5
DON'T KNOW 8
REFUSED 9

F17b. How often did you have numbness in your hands, arms, feet, or legs, where parts of your body "went to sleep" for no apparent reason?
All the time 1

Most of the time..... 2
Sometimes 3
Rarely..... 4
Never 5
DON'T KNOW 8
REFUSED 9

F17c. How often did you stumble while walking?
All the time 1
Most of the time..... 2
Sometimes 3
Rarely..... 4
Never 5
DON'T KNOW 8
REFUSED 9

F17d. How often did you experience heart palpitations or heart pounding or racing while at rest?
All the time 1
Most of the time..... 2
Sometimes 3
Rarely..... 4
Never 5
DON'T KNOW 8
REFUSED 9

F17e. How often did you sweat heavily for no reason?
All the time 1
Most of the time..... 2
Sometimes 3
Rarely..... 4
Never 5
DON'T KNOW 8
REFUSED 9

F17f. How often did you experience problems with urination such as taking a long time to urinate or having to strain to start the urine flow?
All the time 1
Most of the time..... 2
Sometimes 3
Rarely..... 4
Never 5
DON'T KNOW 8
REFUSED 9

F18. How often did you have lower back pain?

All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F19. How often did you have excessive fatigue or extreme tiredness?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F20. How often did you have diarrhea or frequent bowel movements?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F21. How often were you constipated? [INTERVIEWER: READ ANSWER OPTIONS]
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F21a. How often did you have any burning or redness on skin that came in direct contact with oil or chemical dispersant?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never had any burning or redness..... 5
[N/A] Never came into contact with oil or dispersants …….6
DON'T KNOW..... 8
REFUSED..... 9

F22. Did you have any dermatitis, eczema, other red, inflamed skin rashes, or sores or blisters that lasted two or more days?
Yes..... 1
No ..... 2 [GO TO QUESTION F23]
DON'T KNOW..... 8 [GO TO QUESTION F23]
REFUSED..... 9 [GO TO QUESTION F23]

F22a. Did you get this on a part of your body that touched or came into contact with oil or chemical dispersant?
Yes..... 1
No 2
DON'T KNOW 8
REFUSED 9

F23. [ONLY ASK IF ANY OF F5 – F22 = 1-4 OR YES] [If E1=2 go to F23-alt] Did you seek medical help for any of these symptoms or illnesses that occurred during your work on the oil spill response, whether or not this happened during work hours?
Yes..... 1
No ..... 2 [GO TO QUESTION F24]
DON'T KNOW..... 8 [GO TO QUESTION F24]
REFUSED..... 9 [GO TO QUESTION F24]

F23-alt. [ONLY ASK IF ANY OF F5 – F22 = 1-4 OR YES][If E1=2] Did you seek medical help for any of these symptoms or illnesses that occurred around the time of the oil spill response? [INTERVIEWER NOTE: THE OIL SPILL RESPONSE IS FROM APRIL 2010 THROUGH MARCH 2011]
Yes..... 1
No ..... 2 [GO TO QUESTION F24]
DON'T KNOW..... 8 [GO TO QUESTION F24]
REFUSED..... 9 [GO TO QUESTION F24]

F23a. Were you hospitalized for any of these symptom(s) or illness(es) where hospitalized means admitted at least overnight?
Yes..... 1
No ..... 2 [GO TO QUESTION F24]
DON'T KNOW ..... 8 [GO TO QUESTION F24]
REFUSED ..... 9 [GO TO QUESTION F24]

F23b. Why were you hospitalized?
[FREE TEXT FIELD]
DON'T KNOW 8
REFUSED 9

F23c. When were you hospitalized the first time?

[INTERVIEWER: IF PARTICIPANT HAS TROUBLE ANSWERING, ASK "CAN YOU TELL ME THE YEAR THAT YOU WERE HOSPITALIZED?". THEN ASK "CAN YOU TELL ME THE MONTH AND WHETHER YOU WERE HOSPITALIZED EARLY, MIDDLE, OR LATE IN THE MONTH?"; ENTER DAY AS "EE", "MM", OR "LL" FOR EARLY, MIDDLE, OR LATE, RESPECTIVELY. IF PARTICIPANT CONTINUES TO HAVE TROUBLE ANSWERING, ASK "CAN YOU TELL ME JUST THE MONTH THAT YOU WERE HOSPITALIZED?"; ENTER DAY AS 88.]
__/__/__ MM/DD/YYYY [ENTER ALL OR PARTIAL DATE]
DON'T KNOW 88888888
REFUSED 99999999

F24. [PROGRAMMER NOTE: IF E3b=777777 GO TO QUESTION F25; IF E1=2 (DIDN'T WORK ON THE OIL SPILL RESPONSE) GO TO F24-alt]: Did you seek medical help since you **stopped** working on the oil spill response for any of the symptoms or illnesses that you just reported?
Yes..... 1
No ..... 2 [GO TO QUESTION F25]
DON'T KNOW..... 8 [GO TO QUESTION F25]
REFUSED..... 9 [GO TO QUESTION F25]

F24-alt. [IF E1=2] (DIDN'T WORK ON THE OIL SPILL RESPONSE]: Did you seek medical help since the oil spill response **ended** for any of the symptoms or illnesses that you just reported?
Yes..... 1
No ..... 2 [GO TO QUESTION F25]
DON'T KNOW..... 8 [GO TO QUESTION F25]
REFUSED..... 9 [GO TO QUESTION F25]

F24a. Were you hospitalized for any of these symptom(s) or illness(es) where hospitalized means admitted at least overnight?
Yes..... 1
No ..... 2 [GO TO QUESTION F25]
DON'T KNOW ..... 8 [GO TO QUESTION F25]
REFUSED ..... 9 [GO TO QUESTION F25]

F24b. Why were you hospitalized?
[FREE TEXT FIELD]
DON'T KNOW 8
REFUSED 9

F24c. [If E1=2 (DIDN'T WORK ON THE OIL SPILL RESPONSE), go to F24c-alt] When were you hospitalized the first time after you stopped working on the oil spill?
MM/DD/YYYY [ENTER ALL OR PARTIAL DATE] [GO TO QUESTION F25]

DON'T KNOW ..... 8 [GO TO QUESTION F25]
REFUSED ..... 9 [GO TO QUESTION F25]

F24c-alt. [If E1=2] When were you hospitalized the first time since the oil spill response?
MM/DD/YYYY [ENTER ALL OR PARTIAL DATE]
DON'T KNOW 8
REFUSED 9

Now I would like to ask you some questions about your health history.

[PROGRAMMER NOTE: NUMBER OF YEARS WILL CHANGE BASED ON DATE OF INTERVIEW. IF DATE OF INTERVIEW ≤ OCTOBER 1, 2011 USE "year" for [YEAR FILL]; IF DATE OF INTERVIEW IS BETWEEN OCTOBER 2, 2011 AND OCTOBER 1, 2012 USE "two years"; IF DATE OF INTERVIEW ≥ OCTOBER 2, 2012 USE "three years"].

F25. Has a doctor ever told you that you have asthma?
Yes..... 1
No ..... 2 [GO TO QUESTION F26]
DON'T KNOW..... 8 [GO TO QUESTION F26]
REFUSED..... 9 [GO TO QUESTION F26]

F25a. What month and year were you <u>first</u> told that you have asthma?
__ __ / __ __ __ __ [MM/YYYY] [IF DATE ≥ APRIL 2010 GO TO QUESTION F26; IF DATE < APRIL 2010 GO TO QUESTION F25b]
DON'T KNOW 88/8888
REFUSED 99/9999

F25a.1. At what age were you <u>first</u> told that you have asthma?
_____ [AGE] [IF AGE ≥ AGE AT APRIL 2010 GO TO QUESTION F26; IF AGE < AGE AT APRIL 2010 GO TO QUESTION F25b]
DON'T KNOW 88
REFUSED 99

F25b. Have you had any asthma attacks in the past [YEAR FILL]?
Yes 1
No 2
DON'T KNOW 8
REFUSED 9

F26. Has a doctor ever told you that you have emphysema?
Yes..... 1
No ..... 2 [GO TO QUESTION F27]

DON'T KNOW..... 8 [GO TO QUESTION F27]
REFUSED..... 9 [GO TO QUESTION F27]

F26a. What month and year were you first told you have emphysema?
__ __ / __ __ __ __ [MM/YYYY] [GO TO QUESTION F27]
DON'T KNOW..... 88/8888
REFUSED..... 99/9999

F26a1. At what age were you first told you have emphysema?
_____ [AGE]
DON'T KNOW 88
REFUSED 99

F27. Has a doctor ever told you that you have chronic bronchitis?
Yes..... 1
No ..... 2 [GO TO QUESTION F28]
DON'T KNOW..... 8 [GO TO QUESTION F28]
REFUSED..... 9 [GO TO QUESTION F28]

F27a. What month and year were you first told you have chronic bronchitis?
__ __ / __ __ __ __ [MM/YYYY] [GO TO QUESTION F28]
DON'T KNOW..... 88/8888
REFUSED..... 99/9999

F27a.1. At what age were you first told you have chronic bronchitis?
_____ [AGE]
DON'T KNOW 88
REFUSED 99

F28. Has a doctor ever told you that you have high blood pressure?
Yes..... 1
No ..... 2 [GO TO QUESTION F29]
DON'T KNOW..... 8 [GO TO QUESTION F29]
REFUSED..... 9 [GO TO QUESTION F29]

F28a. What month and year were you first told you have high blood pressure?
__ __ / __ __ __ __ [MM/YYYY] [IF DATE ≥ APRIL 2010 GO TO QUESTION F29; IF DATE < APRIL 2010 GO TO QUESTION F28b]
DON'T KNOW..... 88/8888
REFUSED..... 99/9999

F28a.1. At what age were you first told you have high blood pressure?

_____ [AGE] [IF AGE ≥ AGE AT APRIL 2010 GO TO QUESTION F29; IF AGE < AGE AT APRIL 2010 GO TO QUESTION F28b]
DON'T KNOW 88
REFUSED 99

F28b. Has a doctor told you within the past [YEAR FILL] that you have high blood pressure?
Yes 1
No 2
DON'T KNOW 8
REFUSED 9

F29. Has a doctor ever told you that you have angina, also called angina pectoris?
Yes..... 1
No ..... 2 [GO TO QUESTION F30]
DON'T KNOW..... 8 [GO TO QUESTION F30]
REFUSED..... 9 [GO TO QUESTION F30]

F29a. What month and year were you first told you have angina?
__ __ / __ __ __ __ [MM/YYYY] [IF DATE ≥ APRIL 2010 GO TO QUESTION F30; IF DATE < APRIL 2010 GO TO QUESTION F29b]
DON'T KNOW 88/8888
REFUSED 99/9999

F29a.1. At what age were you first told you have angina?
_____ [AGE] [IF AGE ≥ AGE AT APRIL 2010 GO TO QUESTION F30; IF AGE < AGE AT APRIL 2010 GO TO QUESTION F29b]
DON'T KNOW 88
REFUSED 99

F29b. Has a doctor told you within the past [YEAR FILL] that you have angina?
Yes 1
No 2
DON'T KNOW 8
REFUSED 9

F30. Has a doctor ever told you that you have coronary heart disease?
Yes..... 1
No ..... 2 [GO TO QUESTION F31]
DON'T KNOW..... 8 [GO TO QUESTION F31]
REFUSED..... 9 [GO TO QUESTION F31]

F30a. What month and year were you first told you have coronary heart disease?
__ __ / __ __ __ __ [MM/YYYY] [GO TO QUESTION F31]
DON'T KNOW 88/8888
REFUSED 99/9999

F30a.1. At what age were you first told you have coronary heart disease?
_____ [AGE]
DON'T KNOW 88
REFUSED 99

F31. Has a doctor ever told you that you had a heart attack, also called a myocardial infarction or "MI"?
Yes..... 1
No ..... 2 [GO TO QUESTION F131]
DON'T KNOW..... 8 [GO TO QUESTION F131]
REFUSED..... 9 [GO TO QUESTION F131]

F31a. What month and year were you first told you had a heart attack?
__ __ / __ __ __ __ [MM/YYYY] [IF DATE ≥ APRIL 2010 GO TO QUESTION F32; IF DATE < APRIL 2010 GO TO QUESTION F31b]
DON'T KNOW 88/8888
REFUSED 99/9999

F31a.1. At what age were you first told you had a heart attack?
_____ [AGE] [IF AGE ≥ AGE AT APRIL 2010 GO TO QUESTION F131; IF AGE < AGE AT APRIL 2010 GO TO QUESTION F31b]
DON'T KNOW 88
REFUSED 99

F31b. Has a doctor told you that you had a heart attack within the past [YEAR FILL]?
Yes..... 1
No 2
DON'T KNOW 8
REFUSED 9

F131. Have you ever had a heart procedure, for example, coronary bypass surgery, balloon angioplasty, or placement of stents?
YES.....1
NO .....2 [GO TO QUESTION F32]
DON'T KNOW.....8 [GO TO QUESTION F32]
REFUSED.....9 [GO TO QUESTION F32]

F131a. At what age did you first have such a procedure?
_____ [AGE]
DON'T KNOW 88
REFUSED 99

F32. Has a doctor ever told you that you have congestive heart failure?
Yes..... 1
No ..... 2 [GO TO QUESTION F33]
DON'T KNOW..... 8 [GO TO QUESTION F33]
REFUSED..... 9 [GO TO QUESTION F33]

F32a. What month and year were you first told you have congestive heart failure?
__ __ / __ __ __ __ [MM/YYYY] [GO TO QUESTION F33]
DON'T KNOW 88/8888
REFUSED 99/9999

F32a.1. At what age were you first told you have congestive heart failure?
_____ [AGE]
DON'T KNOW 88
REFUSED 99

F33. Has a doctor ever told you that you had a stroke or a cerebral hemorrhage?
Yes..... 1
No ..... 2 [GO TO QUESTION F34]
DON'T KNOW..... 8 [GO TO QUESTION F34]
REFUSED..... 9 [GO TO QUESTION F34]

F33a. What month and year were you first told you had a stroke?
__ __ / __ __ __ __ [MM/YYYY] [IF DATE ≥ APRIL 2010 GO TO QUESTION F34; IF DATE < APRIL 2010 GO TO QUESTION F33b]
DON'T KNOW 88/8888
REFUSED 99/9999

F33a.1. At what age were you first told you had a stroke?
_____ [AGE] [IF AGE ≥ AGE AT APRIL 2010 GO TO QUESTION F34; IF AGE < AGE AT APRIL 2010 GO TO QUESTION F33b]
DON'T KNOW 88
REFUSED 99

F33b. Has a doctor told you that you had a stroke within the past [YEAR FILL]?

Yes..... 1
No 2
DON'T KNOW..... 8
REFUSED..... 9

F34. Has a doctor ever told you that you have cirrhosis of the liver?
Yes 1
No 2 [GO TO QUESTION F35]
DON'T KNOW 8 [GO TO QUESTION F35]
REFUSED 9 [GO TO QUESTION F35]

F34a. What month and year were you first told you have cirrhosis of the liver?
__ __ / __ __ __ __ [MM/YYYY] [GO TO QUESTION F35]
DON'T KNOW 88/8888
REFUSED99/9999

F34a.1. At what age were you first told you have cirrhosis of the liver?
_____ [AGE]
DON'T KNOW 88
REFUSED 99

F35. Has a doctor ever told you that you have fatty liver disease?
Yes 1
No 2 [GO TO QUESTION F36]
DON'T KNOW 8 [GO TO QUESTION F36]
REFUSED 9 [GO TO QUESTION F36]

F35a. What month and year were you first told you have fatty liver disease?
__ __ / __ __ __ __ [MM/YYYY] [GO TO QUESTION F36]
DON'T KNOW 88/8888
REFUSED99/9999

F35a.1. At what age were you first told you have fatty liver disease?
_____ [AGE]
DON'T KNOW 88
REFUSED 99

F36. Has a doctor ever told you that you have hepatitis?
Yes 1
No 2 [GO TO QUESTION F37]
DON'T KNOW 8 [GO TO QUESTION F37]
REFUSED 9 [GO TO QUESTION F37]

F36a. What month and year were you first told you have hepatitis?

__ __ / __ __ __ __ [MM/YYYY] [GO TO QUESTION F37]
DON'T KNOW 88/8888
REFUSED99/9999

F36a.1. At what age were you first told you have hepatitis?
_____ [AGE]
DON'T KNOW 88
REFUSED 99

F37. Has a doctor ever told you that you have weak kidneys or chronic kidney disease? [INTERVIEWER: PROBE AS NECESSARY. DO NOT INCLUDE KIDNEY STONES, BLADDER INFECTIONS, OR INCONTINENCE]
Yes..... 1
No ..... 2 [GO TO QUESTION F39]
DON'T KNOW..... 8 [GO TO QUESTION F39]
REFUSED..... 9 [GO TO QUESTION F39]

F37a. What month and year were you first told you have weak kidneys or chronic kidney disease?
__ __ / __ __ __ __ [MM/YYYY] [GO TO QUESTION F39]
DON'T KNOW 88/8888
REFUSED 99/9999

F37a.1. At what age were you first told you have weak kidneys or chronic kidney disease?
_____ [AGE]
DON'T KNOW 88
REFUSED 99

F38. INTENTIONALLY BLANK

F39. Has a doctor ever told you that you have diabetes or sugar diabetes?
Yes..... 1
No ..... 2 [GO TO QUESTION F40]
DON'T KNOW..... 8 [GO TO QUESTION F40]
REFUSED..... 9 [GO TO QUESTION F40]

F39a. What month and year were you first told you have diabetes or sugar diabetes?
__ __ / __ __ __ __ [MM/YYYY] [GO TO QUESTION F39b]
DON'T KNOW 88/8888
REFUSED 99/9999

F39a.1. At what age were you first told you have diabetes or sugar diabetes?
_____ [AGE]

DON'T KNOW 88
REFUSED 99

[IF PARTICIPANT IS FEMALE ONLY]
F39b. Did you have diabetes only while you were pregnant?
YES …… 1
NO ……. 2
DON'T KNOW ….. 8
REFUSED ……. 9

F40. [INTENTIONALLY BLANK]

F41. [INTENTIONALLY BLANK]

F42. [INTENTIONALLY BLANK]

F43. [INTENTIONALLY BLANK]

F44. [INTENTIONALLY BLANK]

F45. [INTENTIONALLY BLANK]

F46. [INTENTIONALLY BLANK]

F47. Has a doctor ever told you that you have cancer?
Yes..... 1
No ..... 2 [GO TO SECTION F48]
DON'T KNOW..... 8 [GO TO SECTION F48]
REFUSED..... 9 [GO TO SECTION F48]

CANCER OPTIONS

BLADDER..... 10	LIVER.....22	SKIN (NON-MELANOMA)32
		SKIN (MELANOMA) 25
BLOOD ..... .11	LUNG 23	SKIN (DON'T KNOW; NOT SPECIFIED).....33
BONE 12	LYMPHOMA (NON HODGKIN'S) 40	SOFT TISSUE (MUSCLE/ FAT).....34
	LYMPHOMA (HODGKIN'S DISEASE).....24	
BRAIN..... 13	LYMPHOMA (DON'T KNOW; NOT SPECIFIED) 42	STOMACH 35
BREAST 14	MULTIPLE MYELOMA..41	TESTIS (TESTICULAR) 36
CERVIX (CERVICAL) . 15		THYROID.....37
COLON..... 16	MOUTH/TONGUE/LIP...26	UTERUS (UTERINE) 38

ESOPHAGUS (ESOPHAGEAL)..... 17	NERVOUS SYSTEM.....27	OTHER (SPECIFY).....39
GALLBLADDER..... 18	OVARY (OVARIAN) 28	
KIDNEY 19	PANCREAS (PANCREATIC) 29	DON'T KNOW.....77
LARYNX/WINDPIPE ... 20	PROSTATE.....30	REFUSED.....99
LEUKEMIA..... 21	RECTUM (RECTAL) 31	

F47a. What kind of cancer was it?
Type 1: [SELECT FROM CANCER OPTIONS]

F47a.1. What month and year were you first told you have [FIRST TYPE OF CANCER]?
__ __ / __ __ __ __ [MM/YYYY] [GO TO QUESTION F47a.2]
DON'T KNOW 88/8888
REFUSED 99/9999

F47a.1.a. At what age were you first told you have [FIRST TYPE OF CANCER]?
_____ [AGE]
DON'T KNOW.....88
REFUSED.....99

F47a.2. Has a doctor ever told that you have any other types of cancer?
Yes 1
No.....2 [GO TO QUESTION F48]
DON'T KNOW .....8 [GO TO QUESTION F48]
REFUSED ..... 9 [GO TO QUESTION F48]

F47b. What kind of cancer was it?
Type 2: [SELECT FROM CANCER OPTIONS]

F47b.1. What month and year were you first told you have [SECOND TYPE OF CANCER]?
__ __ / __ __ __ __ [MM/YYYY] [GO TO QUESTION F47b.2]
DON'T KNOW 88/8888
REFUSED 99/9999

F47b.1.a. At what age were you first told you have [SECOND TYPE OF CANCER]?
_____ [AGE]
DON'T KNOW.....88
REFUSED.....99

F47b.2. Has a doctor ever told you that you have any other types of cancer?
Yes 1
No.....2 [GO TO QUESTION F48]
DON'T KNOW .....8 [GO TO QUESTION F48]
REFUSED .....9 [GO TO QUESTION F48]

F47c. What kind of cancer was it?
Type 3: [SELECT FROM CANCER OPTIONS]

F47c.1. What month and year were you first told you have [THIRD TYPE OF CANCER]?
__ __ / __ __ __ __ [MM/YYYY] [GO TO QUESTION F48]
DON'T KNOW 88/8888
REFUSED 99/9999

F47c.1.a. At what age were you first told you have [THIRD TYPE OF CANCER]?
_____ [AGE]
DON'T KNOW.....88
REFUSED.....99

Health Symptoms
Now I'm going to ask you about your health during the **past thirtydays**. Please answer *All the time, Most of the time, Sometimes, Rarely, or Never*.

F48. How often have you had a cough?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F49. How often have you had wheezing or whistling in your chest?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F50. How often have you had tightness in your chest?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F51. In the past thirty days, how often have you been short of breath?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F52. How often have you had a stuffy, itchy or runny nose? [INTERVIEWER: READ ANSWER OPTIONS]
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F53. How often have you had watery or itchy eyes?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F54. How often have you had burning eyes?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F55. In the past thirty days, how often have you had burning in your nose, throat or lungs?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F56. How often have you had a sore throat? [INTERVIEWER: READ ANSWER OPTIONS]
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F57. How often have you had a severe headache or migraine?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F58. How often have you felt dizzy or lightheaded?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F59. In the past thirty days, how often have you been nauseated?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F59a. How often have you experience vomiting?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F59b. How often have you experienced nose bleeds?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F59c. In the past thirty days, how often have you experienced episodes of excessive or unusual hair loss?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F59d. How often have you experienced seizures?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F59e. How often did you have insomnia?
All of the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F60. How often have you had blurred or distorted vision? [INTERVIEWER: READ ANSWER OPTIONS]
All the time 1
Most of the time 2
Sometimes 3
Rarely 4
Never 5
DON'T KNOW 8
REFUSED 9

F60a. In the past thirty days, how often did you have tingling or a "pins and needles" feeling in your hands, arms, feet, or legs?
All the time 1
Most of the time 2
Sometimes 3
Rarely 4
Never 5
DON'T KNOW 8
REFUSED 9

F60b. How often did you have numbness (parts of your body "go to sleep" for no apparent reason) in your hands, arms, feet, or legs?
All the time 1
Most of the time 2
Sometimes 3
Rarely 4
Never 5
DON'T KNOW 8
REFUSED 9

F60c. How often did you stumble while walking?
All the time 1
Most of the time 2
Sometimes 3
Rarely 4
Never 5
DON'T KNOW 8
REFUSED 9

F60d. How often did you experience heart palpitations (heart pounding or racing) at rest?
All the time 1
Most of the time 2
Sometimes 3

Rarely..... 4
Never 5
DON'T KNOW 8
REFUSED 9

F60e. In the past thirty days, how often did you sweat heavily for no reason?
All the time 1
Most of the time..... 2
Sometimes 3
Rarely..... 4
Never 5
DON'T KNOW 8
REFUSED 9

F60f. How often did you experience problems with urination such as taking a long time to urinate or having to strain to start the urine flow?
All the time 1
Most of the time..... 2
Sometimes 3
Rarely..... 4
Never 5
DON'T KNOW 8
REFUSED 9

F61. How often have you had lower back pain?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F62. How often have you had excessive fatigue or extreme tiredness?
All the time 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F63. In the past thirty days, how often have you had diarrhea or frequent bowel movements?
All the time 1

Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F64. How often have you been constipated? [INTERVIEWER: READ ANSWER OPTIONS]
All the time..... 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never 5
DON'T KNOW..... 8
REFUSED..... 9

F65. In the past thirty days, how often have you had any dermatitis, eczema, other red, inflamed skin rashes, or sores or blisters?
All the time..... 1
Most of the time 2
Sometimes..... 3
Rarely 4
Never ..... 5 [GO TO F66]
DON'T KNOW..... 8 [GO TO F66]
REFUSED..... 9 [GO TO F66]

F65a. Have any of these lasted <u>two or more days</u>?
Yes..... 1
No ..... 2 [GO TO QUESTION F66]
DON'T KNOW 8 [GO TO QUESTION F66]
REFUSED... 9 [GO TO QUESTION F66]

F65b. Where did you have the dermatitis, eczema, rashes, sores or blisters? Was it on your …
[SELECT ALL THAT APPLY]
Hands..... 01
Arms..... 02
Head 03
Neck..... 04
Chest..... 05
Stomach..... 06

Back 07
Groin 08
Rear end 09
Legs 10
Feet..... 11
DON'T KNOW 88
REFUSED ... 99

F65c. What did it look like? Was it…
[SELECT ALL THAT APPLY]
Dermatitis 1
Eczema 2
Rashes 3
Sores..... 4
Blisters 5
Something else 6 Please explain _____ [FREE TEXT]
DON'T KNOW 8
REFUSED ... 9

F65d. For how long in total have you had the [dermatitis, eczema, rashes, sores, or blisters: FILL IN BASED ON RESPONSE(S) TO F65c]?
|___|___|___| Units
Days 1
Weeks 2
Months 3
Years..... 4
DON'T KNOW 888
REFUSED ... 999

[F65e IS ASKED ONLY FOR THOSE WHO INDICATED THAT THEY WORKED ON THE OIL SPILL RESPONSE (E1 = 1)]

F65e. Were any of these on a part of your body that touched or came into contact with oil or chemical dispersant during your work on the oil spill response?
Yes 1
No 2
DON'T KNOW 8
REFUSED ... 9

F66. [IF F24 IS ANSWERED, GO TO SECTION G; ELSE ASK ONLY IF ANY OF F48 – F65 = 1-4 OR YES] Have you sought medical help for <u>any</u> of the symptoms or illnesses that I just asked you about since the spring or summer of 2010?
Yes..... 1
No ..... 2 [GO TO SECTION G]
DON'T KNOW..... 8 [GO TO SECTION G]
REFUSED..... 9 [GO TO SECTION G]

F66a. Were you hospitalized for any of these symptom(s) or illness(es), where hospitalized means admitted at least overnight?
Yes..... 1
No ..... 2 [GO TO SECTION G]
DON'T KNOW ..... 8 [GO TO SECTION G]
REFUSED ..... 9 [GO TO SECTION G]

F66b. Why were you hospitalized?
[FREE TEXT FIELD]
DON'T KNOW 8
REFUSED 9

F66c. When were you hospitalized the first time?
MM/DD/YYYY [ENTER ALL OR PARTIAL DATE]
DON'T KNOW 8
REFUSED 9

SECTION G: Mental Health

Now I am going to ask you some questions about stress and mental health.

SOCIAL CONTEXT

[PROGRAMMER NOTE: FOR QUESTIONS G1, G2, AND G3, NUMBER OF YEARS WILL CHANGE BASED ON DATE OF INTERVIEW. IF DATE OF INTERVIEW ≤ OCTOBER 1, 2011 USE "year" FOR [YEAR FILL]; IF DATE OF INTERVIEW IS BETWEEN OCTOBER 2, 2011 AND OCTOBER 1, 2012 USE "two years"; IF DATE OF INTERVIEW ≥ OCTOBER 2, 2012 USE "three years"]

G1. In the past [YEAR FILL], how often have you been worried or stressed about having enough money to pay your rent or mortgage? Have you been worried or stressed…
Always 1
Usually 2
Sometimes 3
Rarely 4
Never 5
DON'T KNOW ..... 8 [GO TO QUESTION G2]
REFUSED ..... 9 [GO TO QUESTION G2]

[PROGRAMMER NOTE: FOR QUESTIONS G1a, G2a, AND G3a, NUMBER OF YEARS WILL CHANGE BASED ON DATE OF INTERVIEW. IF DATE OF INTERVIEW ≤ OCTOBER 1, 2011 USE "two years" FOR [YEAR FILL]; IF DATE OF INTERVIEW IS BETWEEN OCTOBER 2, 2011 AND OCTOBER 1, 2012 USE "three years"; IF DATE OF INTERVIEW ≥ OCTOBER 2, 2012 USE "four years"]

G1a. How does this compare to [YEAR FILL] ago? Are you more worried and stressed about having enough money to pay your rent or mortgage, less worried and stressed, or is it about the same?
More worried 1
Less worried 2
About the same 3
DON'T KNOW 8
REFUSED 9

G2. In the past [YEAR FILL], how often would you say you were worried or stressed about having enough money to buy food? Would you say you were worried or stressed….
Always 1
Usually 2
Sometimes 3

Rarely 4
Never 5
DON'T KNOW..... 8 [GO TO QUESTION G3]
REFUSED..... 9 [GO TO QUESTION G3]

G2a. How does this compare to [YEAR FILL] ago? Are you more worried and stressed about having enough money to buy food, less worried and stressed, or is it about the same?
More worried 1
Less worried..... 2
About the same 3
DON'T KNOW 8
REFUSED 9

G3. In the past [YEAR FILL], how much have you worried about your future physical health? Would you say…
A lot..... 1
Some 2
A little, or..... 3
Not at all..... 4
DON'T KNOW..... 8 [GO TO QUESTION G4]
REFUSED..... 9 [GO TO QUESTION G4]

G3a. How does this compare to [YEAR FILL] ago? Are you more worried about your future physical health, less worried, or is it about the same?
More worried 1
Less worried..... 2
About the same 3
DON'T KNOW 8
REFUSED 9

G4. Has a doctor ever told you that you have…
G4a. …acute stress disorder?
Yes..... 1
No ..... 2 [GO TO QUESTION G4b]
DON'T KNOW..... 8 [GO TO QUESTION G4b]
REFUSED..... 9 [GO TO QUESTION G4b]

G4a.1. When were you first told?
__ __ / __ __ __ __ [MM/YYYY] [IF DATE IS 04/2010 OR LATER GO TO QUESTION G4b]
DON'T KNOW 88 8888
REFUSED 99 9999

[PROGRAMMER NOTE: FOR QUESTIONS G4a.2, G4b.2, G4c.2, G4d.2, G4e.2, G4f.3, G5b, NUMBER OF YEARS WILL CHANGE BASED ON

DATE OF INTERVIEW. IF DATE OF INTERVIEW ≤ OCTOBER 1, 2011 USE “year” FOR [YEAR FILL]; IF DATE OF INTERVIEW IS BETWEEN OCTOBER 2, 2011 AND OCTOBER 1, 2012 USE “two years”; IF DATE OF INTERVIEW ≥ OCTOBER 2, 2012 USE “three years”]

G4a.2. Have you seen a doctor or been treated for this in the past [YEAR FILL]?
Yes 1
No 2
DON’T KNOW 8
REFUSED 9

G4b. Has a doctor ever told you that you have anxiety or an anxiety disorder?
Yes..... 1
No ..... 2 [GO TO QUESTION G4d]
DON’T KNOW..... 8 [GO TO QUESTION G4d]
REFUSED..... 9 [GO TO QUESTION G4d]

G4b.1. When were you first told?
__ __ / __ __ __ __ [MM/YYYY] [IF DATE IS 04/2010 OR LATER GO TO QUESTION G4d]
DON’T KNOW..... 88 8888
REFUSED..... 99 9999

G4b.2. Have you seen a doctor or been treated for this in the past [YEAR FILL]?
Yes 1
No 2
DON’T KNOW 8
REFUSED 9

G4d. Has a doctor ever told you that you have panic disorder?
Yes..... 1
No ..... 2 [GO TO QUESTION G4e]
DON’T KNOW..... 8 [GO TO QUESTION G4e]
REFUSED..... 9 [GO TO QUESTION G4e]

G4d.1. When were you first told?
__ __ / __ __ __ __ [MM/YYYY] [IF DATE IS 04/2010 OR LATER GO TO QUESTION G4e]
DON’T KNOW..... 88 8888
REFUSED..... 99 9999

G4d.2. Have you seen a doctor or been treated for this in the past [YEAR FILL]?
Yes 1

No 2
DON'T KNOW 8
REFUSED 9

G4e. Has a doctor ever told you that you have post-traumatic stress disorder?
Yes..... 1
No ..... 2 [GO TO QUESTION G5]
DON'T KNOW..... 8 [GO TO QUESTION G5]
REFUSED..... 9 [GO TO QUESTION G5]

G4e.1. When were you first told?
__ __ / __ __ __ __ [MM/YYYY] [IF DATE IS 04/2010 OR LATER GO TO QUESTION G5]
DON'T KNOW 88 8888
REFUSED 99 9999

G4e.2. Have you seen a doctor or been treated for this in the past [YEAR FILL]?
Yes 1
No 2
DON'T KNOW 8
REFUSED 9

G5. Has a doctor ever told you that you have depression?
Yes..... 1
No ..... 2 [GO TO QUESTION G6]
DON'T KNOW..... 8 [GO TO QUESTION G6]
REFUSED..... 9 [GO TO QUESTION G6]

G5a. When were you first told?
__ __ / __ __ __ __ [MM/YYYY] [IF DATE IS 04/2010 OR LATER GO TO QUESTION G6]
DON'T KNOW 88 8888
REFUSED 99 9999

G5b. Have you seen a doctor or been treated for this in the past [YEAR FILL]?
Yes 1
No 2
DON'T KNOW 8
REFUSED 9

PERCEIVED STRESS SCALE

G6. In the last month, how often have you felt that you were unable to control the important things in your life?
[INTERVIEWER READ ANSWERS]
Never 1
Almost Never 2
Sometimes..... 3
Fairly Often 4
Very Often..... 5
DON'T KNOW..... 8
REFUSED..... 9

G7. In the last month, how often have you felt confident about your ability to handle your personal problems?
Never 1
Almost Never 2
Sometimes..... 3
Fairly Often 4
Very Often..... 5
DON'T KNOW..... 8
REFUSED..... 9

G8. In the last month, how often have you felt that things were going your way?
Never 1
Almost Never 2
Sometimes..... 3
Fairly Often 4
Very Often..... 5
DON'T KNOW..... 8
REFUSED..... 9

G9. In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?
Never 1
Almost Never 2
Sometimes..... 3
Fairly Often 4
Very Often..... 5
DON'T KNOW..... 8
REFUSED..... 9

SECTION H: Reproductive History and Menopausal Status
Females Only

[INTERVIEWER: ASK QUESTIONS H1 – H4 OF FEMALES ONLY. READ THE FOLLOWING PROMPT BEFORE ASKING THESE QUESTIONS. IF MALE, GO TO SECTION I]

I'm now going to ask you some questions about your reproductive history.

H1. How old were you when you had your first menstrual period?
___ ___ Age in years
DON'T KNOW..... 88
REFUSED..... 99

H2. Are you currently pregnant?
Yes..... 1
No ..... 2 [GO TO QUESTION H3]
DON'T KNOW..... 8 [GO TO QUESTION H3]
REFUSED..... 9 [GO TO QUESTION H3]

H2a. When is your due date?
___ ___ / ___ ___ / ___ ___ ___ ___ [MM/DD/YYYY]
DON'T KNOW ...88 88 8888
REFUSED 99 99 9999

H2b. How much did you weigh when you became pregnant?
|___|___|___| lbs. OR
|___|___|___| kgs.
DON'T KNOW .. 888
REFUSED 999

H3. How many births have you had, including live births and stillbirths?
___ ___ Number of births [IF 0 GO TO QUESTION H4]
DON'T KNOW.... 88 [GO TO QUESTION H4]
REFUSED..... 99 [GO TO QUESTION H4]

H3a. What was the date of your first live or stillbirth?
___ ___ / ___ ___ / ___ ___ ___ ___[MM/DD/YYYY]
DON'T KNOW ...88 88 8888
REFUSED 99 99 9999

H3b. What was the date of your most recent live or stillbirth?
___ ___ / ___ ___ / ___ ___ ___ ___[MM/DD/YYYY]
DON'T KNOW ...88 88 8888
REFUSED 99 99 9999

H4. Have your menstrual periods stopped permanently?
YES..... 1
NO ..... 3 [GO TO SECTION I]
DON'T KNOW..... 8 [GO TO SECTION I]
REFUSED..... 9 [GO TO SECTION I]

H4a. Did your periods stop naturally, due to surgery, or due to chemotherapy?
[INTERVIEWER NOTE: MEDICAL TREATMENT DOES NOT INCLUDE HORMONES, BIRTH CONTROL PILLS OR OTHER TEMPORARY MEASURES. THIS ONLY INCLUDES CHEMOTHERAPY]

Naturally..... 1
Surgery..... 2
Chemotherapy (Medical Treatment) 3
OTHER..... 4 Specify _____
DON'T KNOW 8
REFUSED 9

H4a1. [IF H4a = 2] Did you have…

Only your uterus removed?	1	
Your uterus plus 1 ovary removed?	2	
Your uterus plus 2 ovaries removed?	3	
Some other surgery?	4	Specify: _____
DON'T KNOW	8	
REFUSED	9	

H4b. How old were you when your periods stopped?
___ ___ Age in years
DON'T KNOW 88
REFUSED 99

SECTION I: Lifestyle - Alcohol

These next questions are about drinking alcohol. This includes wine coolers, beer, wine, champagne, liquor such as whiskey, rum, gin, vodka, scotch, or liqueurs, and also any other type of alcohol.

I1. In your entire life, have you had at least 1 drink of any kind of alcohol, not counting small tastes or sips?
Yes 1
No..... 2 [GO TO SECTION J]
DON'T KNOW ..... 8 [GO TO SECTION J]
REFUSED ..... 9 [GO TO SECTION J]

[INTERVIEWER NOTE: Definition of a standard drink: 1 12oz bottle of beer, 1 4oz glass of non-fortified wine, 1 mixed drink with 1oz liquor.]

I2. About how old were you when you first started drinking, not counting small tastes or sips?
[_] [_] Age in years ..... [GO TO QUESTION I3]
DON'T KNOW 88
REFUSED .....99 [GO TO QUESTION I3]

I2a. When do you first remember drinking an alcoholic beverage? Was it…
before 20 01
in your 20s 02
in your 30s 03
in your 40s 04
in your 50s 05
in your 60s 06
in your 70s 07
DON'T KNOW 88
REFUSED 99

I3. Have you had an alcoholic beverage in the past 12 months?
YES .....1 [GO TO QUESTION I4]
NO.....2
DON'T KNOW 8
REFUSED 9

I3a. How old were you when you last drank alcohol?
|_| |_| AGE
DON'T KNOW 88
REFUSED ... . 99 [GO TO QUESTION I9]

I3b. When you were drinking alcohol, how many days per week, per month, or per year would you have an alcoholic beverage in a typical year?

|_| |_| # DAYS
PER WEEK 1
PER MONTH.....2
PER YEAR 3
DON'T KNOW 8
REFUSED 9

I3c. When you were drinking alcohol, about how many drinks would you have on the days that you drank?
|_| |_| # DRINKS / DAY
DON'T KNOW 88
REFUSED 99

I3d. When you were drinking alcohol, did you ever drink four or more alcoholic beverages in a row, in one sitting?
Yes 1
No.....2 [GO TO QUESTION I9]
DON'T KNOW .....8 [GO TO QUESTION I9]
REFUSED .....9 [GO TO QUESTION I9]

I3d.1. How many times would this happen in a typical year?
|_| |_| # TIMES
PER WEEK .....1 [GO TO QUESTION I9]
PER MONTH .....2 [GO TO QUESTION I9]
TOTAL FOR 12 MONTHS ...3 [GO TO QUESTION I9]
DON'T KNOW.....88 8
REFUSED.....99 9

I4. During the past 12 months, about how many days per week, per month, or in total have you had alcoholic beverages?
|_| |_| # DAYS
PER WEEK 1
PER MONTH.....2
TOTAL FOR PAST 12 MONTHS .3
DON'T KNOW 88 8
REFUSED 99 9

I5. During the past 12 months, about how many drinks would you have on the days that you drank? [INTERVIEWER NOTE: Definition of a standard drink: 1 12oz bottle of beer, 1 4oz glass of non-fortified wine, 1 mixed drink with 1oz liquor.]
|_| |_| # DRINKS / DAY
DON'T KNOW 88
REFUSED 99

<FILL "During the past 12 months," IF I5 < 4>

I6. [During the past 12 months,] did you ever drink four or more alcoholic beverages in a row, in one sitting?
Yes 1
No..... 2 [GO TO QUESTION I7]
DON'T KNOW ..... 8 [GO TO QUESTION I7]
REFUSED ..... 9 [GO TO QUESTION I7]

I6a. How many times has this happened in the past 12 months?
|_| |_| # TIMES
PER WEEK 1
PER MONTH 2
TOTAL FOR 12 MONTHS..... 3
DON'T KNOW .....……88 8
REFUSED .....……99 9

I7. Think specifically about the past 30 days, from [DATEFILL*]. During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?
OF DAYS: __ __ [RANGE: 0 - 30] [IF 0 GO TO QUESTION I9]
DON'T KNOW ..... 88 [GO TO QUESTION I9]
REFUSED ..... 99 [GO TO QUESTION I9]

I8. On the days that you drank during the past 30 days, how many **drinks** did you **usually** have each day?

[INTERVIEWER NOTE: Count as a drink a can or bottle of beer; a wine cooler or a glass of wine, champagne, or sherry; a shot of liquor or a mixed drink or cocktail.]

OF DRINKS: __ __ [RANGE: 1 - 90]
DON'T KNOW 88
REFUSED.....99

I9. In your lifetime, what is the largest number of drinks that you ever drank in a 24-hour period (including all types of alcohol)?
|_| |_| # DRINKS
DON'T KNOW 88
REFUSED.....99

I10. Was there ever a period in your life when a doctor or a health professional told you that your drinking was hurting your health?
YES..... 1
NO..... 2
DON'T KNOW 8
REFUSED 9

SECTION J: Lifestyle - Tobacco

Now I would like to ask you some questions about your tobacco use.

J1. Have you smoked at least 100 cigarettes in your entire life? Do not include cigars or marijuana. [NOTE TO INTERVIEWER: 100 CIGARETTES = APPROXIMATELY 5 PACKS]
Yes 1
No..... 2 [GO TO QUESTION J10]
DON'T KNOW ..... 8 [GO TO QUESTION J10]
REFUSED ..... 9 [GO TO QUESTION J10]

J2. How old were you when you first started to smoke cigarettes fairly regularly?
__ | __ | __ AGE IN YEARS
NEVER SMOKED CIGARETTES REGULARLY 777
DON'T KNOW 888
REFUSED 999

J3. Do you now smoke cigarettes?
Every day ..... 1 [GO TO QUESTION J9]
Some days 2
Not at all ..... 3 [GO TO QUESTION J6]
DON'T KNOW ..... 8 [GO TO QUESTION J9]
REFUSED ..... 9 [GO TO QUESTION J10]

SOME DAYS SMOKER COLLECTION

J4. Have you ***ever*** smoked cigarettes every day for at least six months?
Yes 1
No.....2
DON'T KNOW 8
REFUSED 9

J5. On how many of the past 30 days did you smoke cigarettes?
| __ | __ | # DAYS [RANGE: 0 - 30]
DON'T KNOW 88
REFUSED .....99 [GO TO QUESTION J10]

J5a. On the average, on those [# DAYS] days, how many cigarettes did you usually smoke each day?
| __ | __ | # CIGARETTES PER DAY [RANGE: 0 - 97] [GO TO J10]
DON'T KNOW .....88 [GO TO J10]
REFUSED .....99 [GO TO J10]

FORMER SMOKER COLLECTION

J6. Have you ***ever*** smoked cigarettes ***every day*** for at least six months?
Yes.....1
No.....2 [SKIP TO J7]
DON'T KNOW .....8 [SKIP TO J7]
REFUSED .....9 [SKIP TO J7]

J6a. When you last smoked every day, on average how many cigarettes did you smoke each day?
| __ | __ | # CIGARETTES PER DAY [RANGE: 1 - 97]
DON'T KNOW 88
REFUSED 99

J7. About how long has it been since you ***completely*** quit smoking cigarettes?
|_|_| Units
Days 1
Weeks 2
Months 3
Years..... 4
DON'T KNOW 88
REFUSED 99

[IF J6 = 1, THEN SKIP TO J10]

J8. When you last smoked fairly regularly, on average how many cigarettes did you smoke each day?
| __ | __ | # CIGARETTES PER DAY [RANGE: 1 - 97] [GO TO J10]
DON'T KNOW .....88 [GO TO J10]
REFUSED .....99 [GO TO J10]

EVERYDAY SMOKER COLLECTION

J9. On the average, about how many cigarettes do you now smoke each day?
| __ | __ | # CIGARETTES PER DAY [RANGE: 1 - 97]
DON'T KNOW 88
REFUSED 99

Other Tobacco Use

J10. In your ***entire life***, have you ever. . .
J10a. …smoked at least 50 cigars?
Yes 1
No.....2
DON'T KNOW 8
REFUSED 9

J10b. …smoked a pipe at least 50 times?
Yes 1
No.....2
DON'T KNOW 8
REFUSED 9

J10c. …used snuff, such as Skoal®, Skoal Bandit® or Copenhagen® at least 20 times?
Yes 1
No.....2
DON'T KNOW 8
REFUSED 9

J10d. …used chewing tobacco, such as Redman®, Levi Garrett® or Beechnut® at least 20 times?
Yes 1
No.....2
DON'T KNOW 8
REFUSED 9

Environmental tobacco smoke

J11. Over the past two years, on average, how many regular smokers have you lived with? Do not count yourself if you smoke.
None.....1
1 2
2 3
3-4 4
5 or more 5
DON'T KNOW 8
REFUSED 9

J12. How many regular smokers do you currently live with? Do not count yourself if you smoke. [INTERVIEWER: If subject indicates that they currently live in more than one place, ask "How many regular smokers, not counting yourself, are now living in the home where you currently spend the most time?".]
None.....1
1 2
2 3
3-4 4
5 or more 5
DON'T KNOW 8
REFUSED 9

J13. About how many hours or minutes per day are you exposed to other people's tobacco smoke? Include all locations, such as home, work, and all other places you spend time where others might smoke.

None.....1
Less than 30 minutes 2
30-59 minutes.....3
1-2 hours 4
3-4 hours 5
5-6 hours 6
7-8 hours 7
More than 8 hours 10
DON'T KNOW 8
REFUSED 9

SECTION K: Socioeconomic Factors

K1. What was your total household income in 2010 before taxes, including income from all sources such as wages, salaries, Social Security or retirement benefits, help from relatives and so forth?

PROBE: Income is important in analyzing the health information we collect. For example, this information helps us to learn whether persons in one income group use certain types of medical services or have certain conditions more or less often than those in another group. Please include all sources of income including wages, salary, commissions, bonuses, tips from all jobs, self-employment income, annuities, interest, dividends, net rental income, royalties, income from estates and trusts, Social Security or Railroad retirement, Supplemental Security Income (SSI), any public assistance or welfare payments, pensions (including retirement, survivor or disability), Veteran's (VA) payments, unemployment compensation, child support or alimony payments.

$ |___|___|___|___|___|___|___|___|___| [GO TO K2]
REFUSED 8888888888
DON'T KNOW 9999999999

K1a. You may not be able to give us an exact figure for your total household income, but can you tell me if this income in 2010 was . . .
Less than $10,000.....1
$10,001 to $20,000.....2
$20,001 to $30,000.....3
$30,001 to $40,000.....4
$40,001 to $50,000.....5
$50,001 to $60,000.....6
$60,001 to $70,000.....7
$70,001 to $80,000.....8
$80,001 to $90,000.....9
$90,001 to $100,000.....10
$100,001 to $150,000…… 11
$150,001 to $200,000 ……12
More than $200,001 13
DON'T KNOW 88
REFUSED 99

K2. How many people, including yourself, were supported by this income?
[VERIFY THAT PARTICIPANT HAS INCLUDED HIMSELF/HERSELF IN THE TOTAL NUMBER.]

|__|__| # PEOPLE

<ASK ONLY IF K2 >1, ELSE GO TO K3>
K2a. How many of these people were under 18 years old?

|__|__| # PEOPLE

K2b. How many were 65 or older?
|__|__| # PEOPLE

K3. Would you say that your total combined family income from all sources before taxes for 2010 was higher, lower, or the same as 2009?
Higher..... 1
Lower 2
Same..... 3
DON'T KNOW 8
REFUSED 9

JOB

[IF E3b=777777**; ELSE GO TO K8]**

IF CURRENTLY WORKING ON THE OIL SPILL

K4. Between January 2010 and April 2010, were you working for pay, including self-employment?
Yes 1
No..... 2 [GO TO QUESTION K6]
DON'T KNOW ..... 8 [GO TO QUESTION K6]
REFUSED ..... 9 [GO TO QUESTION K6]

K4a. What kind of business or industry did you work in?
FREE TEXT FIELD] TYPE OF BUSINESS
DON'T KNOW 8
REFUSED 9

K4b. What was your job title or what kind of work did you do?
[FREE TEXT FIELD] TYPE OF WORK
DON'T KNOW 8
REFUSED 9

K4c. What were your most important activities on that job?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9

K4d. About how long did you work for that company in that job?
|___|___|___| Units
Days 1
Weeks 2

Months.....3
Years 4
DON'T KNOW 888
REFUSED 999

K4e. Did you work in this job during the oil spill?
Yes 1
No.....2
DON'T KNOW 8
REFUSED 9

K4f. Are you still working in this job?
Yes 1
No.....2
DON'T KNOW 8
REFUSED 9

K5. Was this your longest held job?
Yes.....1 [GO TO QUESTION K6]
No.....2
DON'T KNOW 8
REFUSED 9

K5a. Thinking of all the paid jobs you have ever had, what was your job title or what kind of work have you done the longest?
[FREE TEXT FIELD] OCCUPATION
NEVER WORKED .....7 [GO TO QUESTION K6]
DON'T KNOW .....8 [GO TO QUESTION K6]
REFUSED .....9 [GO TO QUESTION K6]

K5b. What kind of business or industry did you work in for the longest period of time as a [LONGEST OCCUPATION]?
[FREE TEXT FIELD] BUSINESS/INDUSTRY
DON'T KNOW 8
REFUSED 9

K5c. What were your most important activities on this job in this business?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9

K5d. About how long did you work at that job in this business?
|___|___|___| Units
Days 1
Weeks 2
Months.....3

Years 4
DON'T KNOW 888
REFUSED 999

K6. Did you have another job at the same time that you were working on the oil spill response?
Yes 1
No.....2 [GO TO QUESTION K7]
DON'T KNOW .....8 [GO TO QUESTION K7]
REFUSED .....9 [GO TO QUESTION K7]

K6a. What kind of business or industry did you work in?
SAME AS REPORTED IN K4a [PIPE IN RESPONSE FROM K4a] [GO TO QUESTION K6d]
SAME AS REPORTED IN K5b [PIPE IN RESPONSE FROM K5b] [GO TO QUESTION K6d]
[FREE TEXT FIELD] TYPE OF BUSINESS
DON'T KNOW 8
REFUSED 9

K6b. What was your job title or what kind of work did you do?
[FREE TEXT FIELD] TYPE OF WORK
DON'T KNOW 8
REFUSED 9

K6c. What were your most important activities on that job?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9

K6d. About how long did you work for that company in that job?
|___|___|___| Units
Days 1
Weeks 2
Months.....3
Years 4
DON'T KNOW 888
REFUSED 999

K7. [ONLY ASKED IF K4 = 2, 8,OR 9] Thinking of all the paid jobs you have ever had, what was your job title or what kind of work have you done the longest?
SAME AS REPORTED IN K6a [PIPE IN RESPONSE FROM K6a] [GO TO QUESTION K7c]
[FREE TEXT FIELD] OCCUPATION
NEVER WORKED.....7 [GO TO QUESTION K23]
DON'T KNOW .....8 [GO TO QUESTION K23]

REFUSED .....9 [GO TO QUESTION K23]

K7a. What kind of business or industry did you work in for the longest period of time as a [LONGEST OCCUPATION]?
[FREE TEXT FIELD] BUSINESS/INDUSTRY
DON'T KNOW 8
REFUSED 9

K7b. What were your most important activities on this job in this business?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9

K7c. About how long did you work at that job in this business?
|___|___|___| Units
Days 1
Weeks 2
Months.....3
Years 4
DON'T KNOW 888
REFUSED 999

[GO TO EMPLOYMENT IN THE OIL INDUSTRY (QUESTION K23)]

[IF E1=1; ELSE GO TO K17]

IF PREVIOUSLY WORKED ON THE OIL SPILL (E1=1)

K8. Between January 2010 and April 2010, were you working for pay?
Yes 1
No..... 2 [GO TO QUESTION K10]
DON'T KNOW ..... 8 [GO TO QUESTION K10]
REFUSED ..... 9 [GO TO QUESTION K10]

K8a. What kind of business or industry did you work in?
FREE TEXT FIELD] TYPE OF BUSINESS
DON'T KNOW 88
REFUSED 99

K8b. What was your job title or what kind of work did you do?
[FREE TEXT FIELD] TYPE OF WORK
DON'T KNOW 8
REFUSED 9

K8c. What were your most important activities on that job?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9

K8d. About how long did you work for that company in that job?
|___|___|___| Units
Days 1
Weeks 2
Months.....3
Years 4
DON'T KNOW 888
REFUSED 999

K8e. Did you work in that job during the oil spill?
Yes 1
No.....2
DON'T KNOW 8
REFUSED 9

K8f. Are you still working in that job?
Yes 1
No.....2
DON'T KNOW 8
REFUSED 9

K9. Was this your longest held job?
Yes.....1 [GO TO QUESTION K10]
No.....2
DON'T KNOW 8
REFUSED 9

K9a. Thinking of all the paid jobs you have ever had, what was your job title or what kind of work have you done the longest?
[FREE TEXT FIELD] OCCUPATION
NEVER WORKED .....7 [GO TO QUESTION K10]
DON'T KNOW .....8 [GO TO QUESTION K10]
REFUSED .....9 [GO TO QUESTION K10]

K9b. What kind of business or industry did you work in for the longest period of time as a [LONGEST OCCUPATION]?

[FREE TEXT FIELD] TYPE OF BUSINESS
DON'T KNOW 88
REFUSED 99

K9c. What were your most important activities on this job in this business?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9

K9d. About how long did you work at that job in this business?
|___|___|___| Units
Days 1
Weeks 2
Months.....3
Years 4
DON'T KNOW 888
REFUSED 999

K10. Did you have another job at the same time that you were working on the oil spill response?
Yes 1
No.....2 [GO TO QUESTION K11]
DON'T KNOW .....8 [GO TO QUESTION K11]
REFUSED .....9 [GO TO QUESTION K11]

K10a. What kind of business or industry did you work in?
SAME AS REPORTED IN K8a [PIPE IN RESPONSE FROM K8a] [GO TO QUESTION K10d]
SAME AS REPORTED IN K9b [PIPE IN RESPONSE FROM K9b] [GO TO QUESTION K10d]
[FREE TEXT FIELD] TYPE OF BUSINESS
DON'T KNOW 8
REFUSED 9

K10b. What was your job title or what kind of work did you do?
[FREE TEXT FIELD] TYPE OF WORK
DON'T KNOW 8
REFUSED 9

K10c. What were your most important activities on that job?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9

K10d. About how long did you work for that company in that job?
|___|___|___| Units
Days 1
Weeks 2

Months.....3
Years 4
DON'T KNOW 888
REFUSED 999

K11. [ONLY ASKED IF K8 = 2, 8, OR 9] Thinking of all the paid jobs you have ever had, what was your job title or what kind of work have you done the longest?
SAME AS REPORTED IN K10b [PIPE IN RESPONSE FROM K10b] [GO TO QUESTION K11c]
[FREE TEXT FIELD] OCCUPATION
NEVER WORKED.....7 [GO TO QUESTION K12]
DON'T KNOW .....8 [GO TO QUESTION K12]
REFUSED .....9 [GO TO QUESTION K12]

K11a. What kind of business or industry did you work in for the longest period of time as a [LONGEST OCCUPATION]?
[FREE TEXT FIELD] TYPE OF BUSINESS
DON'T KNOW 88
REFUSED 99

K11b. What were your most important activities on this job in this business?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9

K11c. About how long did you work at that job in this business?
|___|___|___| Units
Days 1
Weeks 2
Months.....3
Years 4
DON'T KNOW 888
REFUSED 999

[IF K8f = 1 GO TO QUESTION K17]

K12. What is your current work status? Are you working now, temporarily laid off, on sick leave or maternity leave, looking for work, retired, disabled, keeping house, a student, or something else?

WORKING NOW.....1
ONLY TEMPORARILY LAID OFF, SICK LEAVE OR MATERNITY LEAVE.....2
LOOKING FOR WORK OR UNEMPLOYED.....3 [GO TO K23]
RETIRED .....4 [GO TO K23]
DISABLED, PERMANENTLY OR TEMPORARILY .....5 [GO TO K23]

KEEPING HOUSE .....6 [GO TO K23]
STUDENT .....7 [GO TO K23]
OTHER.....8 K12a. Specify: _____
DON'T KNOW .....88 [GO TO K23]
REFUSED .....99 [GO TO K23]

K13. What kind of business or industry do you work in?
SAME AS REPORTED IN K8a [PIPE IN RESPONSE FROM K8a] [GO TO QUESTION K16]
SAME AS REPORTED IN K9b [PIPE IN RESPONSE FROM K9b] [GO TO QUESTION K16]
[FREE TEXT FIELD] TYPE OF BUSINESS
DON'T KNOW……8
REFUSED 9

K14. What is your job title or what kind of work do you do?
[FREE TEXT FIELD] TYPE OF WORK
DON'T KNOW 8
REFUSED 9

K15. What are your most important activities on this job?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9

K16. About how long have you worked for this company in this job?
|___|___|___| Units
Days 1
Weeks 2
Months 3
Years..... 4
DON'T KNOW 888
REFUSED 999

[GO TO EMPLOYMENT IN THE OIL INDUSTRY (QUESTION K23)]

[IF E1=2, 8 OR 9; ELSE GO TO K23]

IF NEVER WORKED ON THE OIL SPILL (E1=2, 8 or 9)

K17. What is your current work status? Are you working now, temporarily laid off, on sick leave or maternity leave, looking for work, retired, disabled, keeping house, a student, or something else?
WORKING NOW.....1
ONLY TEMPORARILY LAID OFF, SICK LEAVE OR
MATERNITY LEAVE.....2

LOOKING FOR WORK OR UNEMPLOYED.....3 [GO TO K22a]
RETIRED .....4 [GO TO K22a]
DISABLED, PERMANENTLY OR TEMPORARILY .....5 [GO TO K22a]
KEEPING HOUSE .....6 [GO TO K22a]
STUDENT .....7 [GO TO K22a]
OTHER.....8 K17a. Specify: _____
DON'T KNOW .....88 [GO TO K22a]
REFUSED .....99 [GO TO K22a]

K18. What kind of business or industry do you work in?
[FREE TEXT FIELD] TYPE OF BUSINESS
DON'T KNOW 88
REFUSED 99

K19. What is your job title or what kind of work do you do?
[FREE TEXT FIELD] TYPE OF WORK
DON'T KNOW 8
REFUSED 9

K20. What are your most important activities on this job?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9

K21. About how long have you worked for this company in this job?
|___|___|___| Units
Days 1
Weeks 2
Months 3
Years..... 4
DON'T KNOW 888
REFUSED 999

K22. Is this your longest held job?
Yes..... 1 [GO TO QUESTION K23]
No..... 2
DON'T KNOW 8
REFUSED 9

K22a. Thinking of all the paid jobs you have ever had, what was your job title or what kind of work have you done the longest?
[FREE TEXT FIELD] OCCUPATION
NEVER WORKED .....7 [GO TO QUESTION K23]
DON'T KNOW .....8 [GO TO QUESTION K23]
REFUSED .....9 [GO TO QUESTION K23]

K22b. What kind of business or industry did you work in for the longest period of time as a [LONGEST OCCUPATION]?

[FREE TEXT FIELD] TYPE OF BUSINESS
DON'T KNOW 88
REFUSED 99

K22c. What were your most important activities on this job in this business?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9

K22d. About how long did you work at that job in this business?
|___|___|___| Units
Days 1
Weeks 2
Months.....3
Years 4
DON'T KNOW 888
REFUSED 999

Employment in Oil Industry

K23. Have you done oil spill clean-up other than for the Deepwater Horizon Disaster?
Yes 1
No..... 2
DON'T KNOW 8
REFUSED 9

K24. Other than any jobs that you have already told me about, did you ever work in the oil industry, such as in exploration, drilling, refining, transportation, or other jobs?
Yes 1
No.....2 [GO TO K25]
DON'T KNOW .....8 [GO TO K25]
REFUSED .....9 [GO TO K25]

K24a. Thinking about the job you held the longest in the oil industry, what kind of work did you do?
[FREE TEXT FIELD] TYPE OF WORK
DON'T KNOW 8
REFUSED 9

K24b. What were your most important activities on this job?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9

K24c. About how long did you work at this job?
|___|___|___| Units
Days 1
Weeks 2
Months.....3
Years 4
DON'T KNOW 888
REFUSED 999

Advanced Occupational Training

K25. Have you received HAZWOPER training?
Yes 1
No..... 2 [GO TO QUESTION K27]
DON'T KNOW ..... 8 [GO TO QUESTION K27]
REFUSED ..... 9 [GO TO QUESTION K27]

K25c. What year did you first receive this training?
_ _ _ _ [YYYY, IF YYYY=2010, THEN GO TO K25d. ELSE GO TO K27.]
DON'T KNOW 8 [GO TO K27]
REFUSED 9 [GO TO K27]

K25d. What month in 2010 did you receive this training?
_ _ [MM]
DON'T KNOW 8 [GO TO K27]
REFUSED 9 [GO TO K27]

Military Service

K27. Have you ever served on <u>active duty</u> in the U.S. Armed Forces, military Reserves, or National Guard?
[PROBE: Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War (Iraq I or II), and Afghanistan.]

Yes, now on active duty 1
Yes, on active duty during the last 12 months, but not now …… 2
Yes, on active duty in the past, but not during the last 12 months ……. 3
No, training for Reserves or National Guard only ……4 [GO TO K28]
No, never served in the military…… 5 [GO TO K28]
DON'T KNOW .....8 [GO TO K28]
REFUSED .....9 [GO TO K28]

K27a. What branch of the service did you serve in?
Army 1
Navy 2
Marines.....3
Air Force.....4
Coast Guard 5
Military Reserves ……6
National Guard ……7
Other, please specify.....0 Specify_____
DON'T KNOW 8
REFUSED 9

[if K27a=7, else K27b]
K27a1. Did you work on the Deepwater Horizon clean-up response as part of a National Guard deployment?
Yes 1
No.....2
DON'T KNOW 8
REFUSED 9

K27b. When did you serve on active duty in the U.S. Armed Forces? Give the earliest and latest date if your service was not continuous.

[NOTE TO INTERVIEWER: PROBE IF NECESSARY. THE FOLLOWING ARE MILESTONE DATES:

SEPTEMBER 2001 OR LATER (INCLUDING IRAQ AND AFGHANISTAN)
AUGUST 1990 TO AUGUST 2001 (INCLUDING PERSIAN GULF WAR, AND BOSNIA)
SEPTEMBER 1980 TO JULY 1990
MAY 1975 TO AUGUST 1980
VIETNAM ERA (AUGUST 1964 TO APRIL 1975)
MARCH 1961 TO JULY 1964
KOREAN WAR (JULY 1950 TO JANUARY 1955)
WORLD WAR II (DECEMBER 1941 TO DECEMBER 1946)
FEBRUARY 1955 TO FEBRUARY 1961
JANUARY 1947 TO JUNE 1950
NOVEMBER 1941 OR EARLIER]

Earliest: __/__/__/__ [YYYY]
Latest: __/__/__/_ _ [YYYY]
DON'T KNOW 8
REFUSED 9

K27c. Have you ever received hazardous duty incentive pay? [INTERVIEWER: Probe if the participant asks. The following duties are eligible for this payment: Parachute Duty; Flight Deck Duty; Demolition Duty; Experimental Stress Duty; Toxic Fuels (or Propellants) Duty; Toxic Pesticides Duty; Dangerous Viruses (or Bacteria) Lab Duty; Chemical Munitions]
Yes 1
No.....2 [GO TO K27e]
DON'T KNOW .....8 [GO TO K27e]
REFUSED .....9 [GO TO K27e]

K27d. What did you receive hazardous duty incentive pay for?
CHEMICAL MUNITIONS...1
DANGEROUS VIRUSES (OR BACTERIA) LAB DUTY 2
DEMOLITION DUTY 3
EXPERIMENTAL STRESS DUTY..... 4
FLIGHT DECK DUTY.....5
PARACHUTE DUTY…….. 6
TOXIC FUELS (OR PROPELLANTS) DUTY..... 7
TOXIC PESTICIDES DUTY..... 10
OTHER, SPECIFY .....11 [FREE TEXT FIELD]
DON'T KNOW 88
REFUSED 99

K27d1. When did you receive hazardous duty incentive pay?
Earliest: __/__/__/__ [YYYY]
Latest: __/__/__/_ _ [YYYY]
DON'T KNOW.....8
REFUSED.....9

K27e. Have you ever received combat pay (hostile fire and imminent danger pay)? [INTERVIEWER: Probe if the participant asks. The participant is eligible to receive combat pay if they were subject to hostile fire or explosion of hostile mines; on duty in a foreign area in which he/she was subject to the threat of physical harm or imminent danger on the basis of civil insurrection, civil war, terrorism, or wartime conditions.]
Yes 1
No.....2 [GO TO K28]
DON'T KNOW .....8 [GO TO K28]
REFUSED .....9 [GO TO K28]

K27f. Where did you serve to receive combat pay? [INTERVIEWER: probe for military conflicts such as Iraq (Gulf War II), Afghanistan, Gulf War I, Vietnam, Korea, etc.] [SELECT ALL THAT APPLY]
AFGHANISTAN.....1
GULF WAR / PERSIAN GULF WAR / DESERT STORM 2
IRAQ.....3

VIETNAM 4
OTHER, SPECIFY.....5 [FREE TEXT FIELD]

K27f1. When did you receive combat pay?
Earliest: __/__/__/__ [YYYY]
Latest: __/__/__/_ _ [YYYY]
DON'T KNOW.....8
REFUSED.....9

Occupational Exposure

K28. On any of your jobs, did you work with or near any of the following materials at least 30 minutes a week:

		YES	NO	DK	RE
K28a.	[INTENTIONALLY BLANK]	1	2	8	9
K28b.	[INTENTIONALLY BLANK]	1	2	8	9
K28c.	Insulation	1	2	8	9
K28d.	Brake shoes	1	2	8	9
K28e.	Corrosive materials, such as acids	1	2	8	9
K28f.	Coal or stone dust	1	2	8	9
K28g.	Metal machining oils	1	2	8	9
K28h.	Paints, varnishes, stains, or strippers	1	2	8	9
K28i.	Degreasers or chemicals used to clean metal parts	1	2	8	9
K28j.	Other chemicals used to clean floors, walls and other surfaces	1	2	8	9
K28k.	Asphalt, tar or other tar-like materials	1	2	8	9
K28l.	Diesel engine exhaust	1	2	8	9
K28m.	Gasoline engine exhaust	1	2	8	9
K28n.	Pesticides, insecticides, herbicides, or fungicides	1	2	8	9
K28o.	Welding fumes	1	2	8	9
K28p.	Wood dust	1	2	8	9
K28q.	Metal dust from grinding or other tasks	1	2	8	9
K28q1.	Lead				
K28q2.	Other metals such as cadmium, copper, nickel	1	2	8	9
K28q3.	Asbestos	1	2	8	9
K28r.	Radioactive Materials	1	2	8	9
K28s.	[INTENTIONALLY BLANK]				
K28t.	[INTENTIONALLY BLANK]				

SECTION X: Hurricane Isaac

Now I would like to ask you some questions regarding your recent experiences with Hurricane Isaac.

X2. Were you forced to leave your residence because of Hurricane Isaac?
YES 1
NO ..... 2 [GO TO QUESTION X7]
DON'T KNOW 8
REFUSED ..... 9 [GO TO QUESTION X7]

X3. Have you returned to your prior residence or are you in a different residence?
Prior residence 1
Different residence ..... 2 [GO TO QUESTION X5]
DON'T KNOW 8
REFUSED .... 9 [GO TO QUESTION X7]

X3a1. For how many days, weeks, or months were you unable to return?
__I__I UNITS
DAYS 1
WEEKS 2
MONTHS 3
DON'T KNOW 88
REFUSED 99

[GO TO QUESTION X7]

X5. Do you expect to return to your prior residence, to stay where you are now, or to move somewhere else?
Return to prior residence .. 1
Stay in current residence .. 2 [GO TO QUESTION X5b1]
Move to new residence .... 3 [GO TO QUESTION X5c1]
DON'T KNOW 8
REFUSED .... 9 [GO TO QUESTION X7]

X5a3. What has prevented you from moving back already?
Not allowed 1
House damaged 2
Need money 3
No way to get there 4
Other ..... 5 Reason _____ [FREE-TEXT FIELD]
DON'T KNOW 8
REFUSED 9

[GO TO QUESTION X7]

X5b1. Is your current residence in the same city or town and neighborhood?
Same city or town, same neighborhood 1
Same city or town, different neighborhood 2
Different city or town 3
DON'T KNOW 8
REFUSED .....9 [GO TO QUESTION X7]

[GO TO QUESTION X7]

X5c1. Do you know if your new residence will be in the same city or town and neighborhood?
Same city or town, same neighborhood 1
Same city or town, different neighborhood 2
Different city or town 3
DON'T KNOW .....8 [GO TO QUESTION X7]
REFUSED .....9 [GO TO QUESTION X7]

X7. Did you experience significant property damage or financial hardship as a result of Hurricane Isaac?
YES 1
NO..... 2
DON'T KNOW..... 8
REFUSED..... 9

X8. Did you experience the loss of a loved one or a serious injury to you or a loved one during the Hurricane?
YES..... 1
NO..... 2
DON'T KNOW..... 8
REFUSED..... 9

Part 3: Scripts – Post-Telephone Enrollment Questionnaire (Estimated Burden: 2 minutes)

SECTION L: Wrap-up and Scheduling

SECTION L.0: Address during the spill

L0.1. Did you live at your current address while you were working on the oil spill?
Yes..... 1 [GO TO SECTION L.1]
No…….. 2
DON'T KNOW ..... 8 [GO TO SECTION L.1]
REFUSED ..... 9 [GO TO SECTION L.1]

L0.1a. What was your address while working on the oil spill?
[PROBE: I would like to know the physical location of this address – not a post-office box or rural route number.]
L0.1b. House number: _____[FREE TEXT FIELD]
L0.1c. Street name: _____[FREE TEXT FIELD]
L0.1d. Apartment number: _____[FREE TEXT FIELD]
L0.1e. City: _____[FREE TEXT FIELD]
L0.1f. State: _____[STATE DROP DOWN BOX]
DON'T KNOW 8
REFUSED 9

SECTION L.1: SSN, Addresses and Transition

L.1.1. What is your social security number? [PROBE: Your social security number will help us keep in touch with you over the years and allow us to link to the correct records about your health. Reporting your social security number is voluntary. We will not share your social security number with others and we will do everything possible to keep it private.]
__/__/__/ - __/__/ - __/__/__/__/ [GO TO SECTION L.1.0]
DON'T HAVE .....HHH HH HHHH [GO TO SECTION L.1.0]
DON'T KNOW .....KKK KK KKKK
REFUSED .....RRR RR RRRR

L.1.2. Would you be willing to tell me the last four digits of your social security number? The last four digits of your Social Security Number are not unique to you. Other people have those same last four digits. However, it will help us do a better job of keeping up with you and your public health records over the years.

Last 4 numbers of SSN - __ __ __ __
DON'T HAVE.....HHHH
DON'T KNOW .....KKKK
REFUSED .....RRRR

L1.4. What is your email address? [INTERVIEWER: READ BACK FOR ACCURACY]
[FREE TEXT FIELD] EMAIL
DON'T HAVE 7
DON'T KNOW 8
REFUSED 9

SECTION L.1.0: Text Messaging Opt-in / Opt-out

L.1.0.1. Would you like to receive periodic text messages on your mobile phone with GuLF STUDY news and updates? Please note that your cell phone service provider may charge for text messages as part of your individual service plan.

Yes ….. 1
No……. .....2 [SKIP TO SECTION L.1.00]
DON'T KNOW…….....8 [SKIP TO SECTION L.1.00]
REFUSED .....9 [SKIP TO SECTION L.1.00]

L.1.0.2. Would you please provide me with a mobile phone number that we should use to send you these text messages?

SAME PHONE NUMBER CALLED TO REACH PARTICIPANT ….. 1
Phone Number I_I_I_I_I_I_I_I_I_I TEN DIGIT #
DON'T KNOW……..……... 8
REFUSED ... ……..... 9

Thank you.

SECTION L.1.0.1 Additional Contact

L.1.0.1.1. May I have contact information for a person who would know how to reach you should we have difficulty contacting you in the future?

L.1.0.1.1. a. What is this person's relationship to you? [DROP DOWN BOX]
DON'T KNOW .....8 [GO TO NEXT SECTION]
REFUSED .....9 [GO TO NEXT SECTION]

L.1.0.1.1. b. Name _____ [FREE TEXT FIELD]
REFUSED ... ……9 [GO TO NEXT SECTION]

L.1.0.1.1. c. Phone Number I_I_I_I_I_I_I_I_I_I TEN DIGIT # [INTERVIEWER: ENTER PHONE NUMBER IN THIS FORMAT: 123-456-7890]
DON'T KNOW 8
REFUSED 9

L.1.0.1.1.c.1 Is this number a cell phone?
Yes.....1
No 2

DON'T KNOW 3
REFUSED....4

L.1.0.1.1. d. Street Address
L.1.0.1.1..d.1. House number: _____[FREE TEXT FIELD]
L.1.0.1.1..d.2. Street name: _____[FREE TEXT FIELD]
L.1.0.1.1..d.3. Apartment number: _____[FREE TEXT FIELD]
L.1.0.1.1..d.4. City: _____[FREE TEXT FIELD]
L.1.0.1.1..d.5. State: _____[STATE DROP DOWN BOX]
L.1.0.1.1..d.6. Zip Code: ___/___/___/___/___/
DON'T KNOW……..8 [GO TO NEXT SECTION]
REFUSED ... ……9 [GO TO NEXT SECTION]

L.1.0.1.1. d.1.a. Is this also their mailing address?
Yes.....……1 [GO TO NEXT SECTION]
No .....……2
DON'T KNOW……..8 [GO TO NEXT SECTION]
REFUSED....……9 [GO TO NEXT SECTION]

L.1.0.1.1. d.2.a. What is their mailing address?
L.1.0.1.1. d.2.a.1. House number: _____[FREE TEXT FIELD]
L.1.0.1.1. d.2.a.2. Street name: _____[FREE TEXT FIELD]
L.1.0.1.1. d.2.a.3. Apartment number: _____[FREE TEXT FIELD]
L.1.0.1.1. d.2.a.4. City: _____[FREE TEXT FIELD]
L.1.0.1.1. d.2.a.5. State: _____[STATE DROP DOWN BOX]
L.1.0.1.1. d.2.a.6. Zip Code: ___/___/___/___/___/
DON'T KNOW……..8 [GO TO NEXT SECTION]
REFUSED....……9 [GO TO NEXT SECTION]

SECTION L.1.00: Spouse Study Notification
[ONLY IF RESPONDENT INDICATES THAT THEY ARE MARRIED OR LIVING WITH A PARTNER (D6=1 or 6):]

L.1.00.1. We would also like to mail some information about a study on the families of oil spill cleanup workers to your spouse or partner. What is your spouse or partner's name?
FIRST NAME _____[FREE TEXT FIELD]
LAST NAME _____[FREE TEXT FIELD]
SUFFIX _____[FREE TEXT FIELD]
DON'T KNOW…….....……... 8
REFUSED ..... ……....9

[PROBE/INTERVIEWER DETAILS IF NECESSARY. THE STUDY IS BEING LED BY OUR COLLEAGUES FROM LOUISIANA STATE UNIVERSITY. THEY ARE INTERESTED IN THE HEALTH OF THE SPOUSES AND CHILDREN OF OIL SPILL CLEAN-UP WORKERS AND IN FINDING OUT MORE ABOUT HOW THE OIL SPILL MAY HAVE AFFECTED FAMILIES.]

L.1.00.2. Should this letter be mailed to the same address that you currently live?
Yes.....1 [SKIP TO SECTION L.1.00.3]
No.....2
DON'T KNOW .....8 [SKIP TO SECTION L.1.00.3]
REFUSED .....9 [SKIP TO SECTION L.1.00.3]

L.1.00.2.a. What is their mailing address?
L.1.00.2.a.1. House number: _____[FREE TEXT FIELD]
L.1.00.2.a.2. Street name: _____[FREE TEXT FIELD]
L.1.00.2.a.3. Apartment number: _____[FREE TEXT FIELD]
L.1.00.2.a.4. City: _____[FREE TEXT FIELD]
L.1.00.2.a.5. State: _____[STATE DROP DOWN BOX]
L.1.00.2.a.6. Zip Code: ___/___/___/___/___/

L.1.00.3 Is your phone number the best number to reach your spouse or partner?
Yes.....1 [SKIP TO SECTION L.1.a]
No.....2
DON'T KNOW .....8 [SKIP TO SECTION L.1.a]
REFUSED .....9 [SKIP TO SECTION L.1.a]

L.1.00.3.a.1 Is this number a cell phone?
Yes.....1
No 2
DON'T KNOW 3
REFUSED....4

L.1.00.3a. What is the best number to reach your spouse or partner?
___ / ___ / ____
DON'T KNOW 8
REFUSED 9

L.1.00.3a.1a. Is this number a cell phone?
Yes.....1
No 2
DON'T KNOW 3
REFUSED....4

SECTION L.1.a.

These are all of the study questions I have for you.

L.1.a.1. Do you have any questions about the study or anything that we have discussed today?
Yes.....1 [RESPOND TO CONCERNS BASED ON INFORMATION FROM THE FAQ]
No.....2
DON'T KNOW 8
REFUSED 9

Before I let you go, I'd like to briefly talk with you about a few more things.

[IF ELIGIBLE FOR ACTIVE SUBCOHORT, GO TO SECTION L.2;
IF ELIGIBLE FOR BIOMEDICAL SUBCOHORT, GO TO SECTION L.2;
IF ELIGIBLE FOR ACTIVE SUBCOHORT BUT LIVES OUT OF STATE, GO TO SECTION L.4;
IF ELIGIBLE FOR PASSIVE SUBCOHORT, GO TO SECTION L.5]

SECTION L.2: Study Requirement for Active Subcohort

We really appreciate your participation and help so far. Based on your experiences during the oil spill, you are eligible to be in the second part of the GuLF STUDY. If you agree to take part, we'll send a member of our staff to your home for a study visit. You'll receive a $50 gift card for completing the home visit [IF ATSDR ELIGIBLE SUBSTITUTE: *You'll receive total of $70.00 dollars in gift cards for completing the home visit and extra survey]*. In addition, your name will be entered into a drawing for a $500.00 gift card. Drawings will be held after every 5,000th participant completes the home visit. Three winners will be selected at each drawing. The odds of winning are about 1 in 1650. There is no cost associated with entering the drawing or accepting this prize. The home visit is voluntary and you can decline to participate at any time.

During the visit, you'll be told more about the study and you'll be asked to:

- have your blood pressure, height, weight, hips, and waist measured
- blow hard into a machine to measure your lung function
- have a blood sample drawn and provide samples of urine, hair, and toenail clippings
- answer additional questions about your health
- allow our staff to collect a dust sample from your home

Also, over the course of the study, we'll ask you to:

- update us each year on any changes to your contact information
- complete a short interview about your health every other year by phone

L.2.1. The visit will take about two and a half hours to complete. Do you have any questions about this next part of the study?

[IF YES, RECORD RESPONSE – FREE TEXT FIELD, RESPOND TO CONCERNS BASED ON INFORMATION FROM THE FAQ, THEN READ SCRIPT BELOW; IF NO, READ SCRIPT BELOW]

Yes ..... 1 SPECIFY _____[FREE TEXT FIELD] [RESPOND TO CONCERNS BASED ON INFORMATION FROM THE FAQ, THEN READ SCRIPT BELOW]
No..... 2 [READ SCRIPT BELOW]
DON'T KNOW ..... 8 [READ SCRIPT BELOW]
REFUSED ..... 9 [READ SCRIPT BELOW]

If you have any other questions about the study, you may call our toll-free number to reach a member of the study staff. That toll-free number is 855 NIH GuLF (855-644 4853). You can also visit the website at www.nihgulfstudy.org.

L.2.2. Are you willing to schedule a home visit for this next phase of the study? [INTERVIEWER: IF YES, PLEASE RECORD ANY IMPORTANT INFORMATION FOR THE HOME VISIT AGENT IN THE TEXT BOX (OPTIONAL); IF NEEDS TIME TO CONSIDER, PLEASE ENTER THE REASON]
Yes ..... 1 [FREE TEXT FIELD FOR OPTIONAL INFORMATION]
No..... 2
NEEDS TIME TO CONSIDER 8 [RECORD REASON: FREE TEXT FIELD]
REFUSED 9

[IF PARTICIPANT AGREES TO SCHEDULE HOME VISIT, GO TO SECTION L.7;
IF PARTICIPANT ASKS FOR TIME TO CONSIDER, GO TO SECTION L.6;
IF NO AND A REASON IS GIVEN; GO TO SECTION L.2.a;
IF NO AND A REASON IS NOT GIVEN; GO TO SECTION L.2.b]

SECTION L.2.a. I understand you said… [RESTATE REASON AND USE TELEPHONE INTERVIEW Q & A BENEFITS TO ATTEMPT A CONVERSION.] If you don't mind, I'd like to make a note of why you are choosing not to participate. This information will help us improve the GuLF STUDY.

L.2.a.1. [RECORD REASON – FREE TEXT FIELD] [IF CONVERSION IS SUCCESSFUL, GO TO SECTION L.7; IF PARTICIPANT ASKS FOR TIME TO CONSIDER, GO TO SECTION L.6]

Thank you for your time.

SECTION L.2.b. May I ask why you don't want to enroll at this time? This information will help us improve the GuLF STUDY.

L.2.b.1. [RECORD REASON – FREE TEXT FIELD]

I understand you said… [RESTATE REASON AND USE TELEPHONE INTERVIEW Q & A BENEFITS TO ATTEMPT A CONVERSION.]

[IF CONVERSION IS SUCCESSFUL, GO TO SECTION L.7; IF PARTICIPANT ASKS FOR TIME TO CONSIDER, GO TO SECTION L.6]

Thank you for your time.

[TERMINATE CALL]

ATSDR SCRIPTS AND QUESTIONS

[PROGRAMMER: THE FOLLOWING SCRIPTS AND THE AMMONIA RELEASE SURVEY MODULE SHOULD DISPLAY FOR PARTICIPANTS WHO ARE NOT ELIGIBLE FOR THE GULF STUDY HOME VISIT, OR DECLINE HOME VISIT PARTICIPATION.]

Our records indicate that you may have worked in Alabama around the time of an ammonia leak. Do you have a few minutes to complete some additional questions? You will receive a $20.00 gift card for your time and effort.
YES
NO

[PROGRAMMER NOTE: IF YES, DISPLAY AMMONIA RELEASE SURVEY MODULE, APPENDIX A]

Thank you for your time.

SECTION L.4: Study Requirement for Active Subcohort Participants Who Live Outside of the Four Gulf States

We really appreciate your participation and help so far. Based on your experiences during the oil spill, you may be eligible to be in the second part of the GuLF STUDY. If you are confirmed to be eligible, we will contact you shortly to tell you more about this part of the study and to see if you are willing to participate. We may also contact you at some point in the future to tell you about additional study opportunities as they arise.

If you have any questions, you can call our toll-free number and a member of the study staff will assist you. That toll-free number is 855 NIH GuLF (855-644 4853). Again, thank you very much for your participation in the GuLF STUDY.

[TERMINATE CALL]

SECTION L.5: Passive Subcohort

Thank you for agreeing to be in the GuLF STUDY and completing this interview.

We really appreciate your participation and help so far. During the study, we will send you a newsletter every year to let you know about study progress and findings. We will also ask you to update your contact information. If you have any questions about the study you may call our toll-free number to reach a member of the study staff. That toll-free number is 855 NIH GuLF (855-644 4853). You can also visit the website at www.nihgulfstudy.org. You may be eligible to be in the second part of the GuLF STUDY. If you are confirmed to be eligible, we will contact you shortly to tell you more about this part of the study and to see if you are willing to participate. We may also contact you in the future to tell you about additional study opportunities as they arise. Also, please tell your family, friends and co-workers about the study and encourage them to join too. They may contact the study hotline center to see if they are eligible and enroll in the study.

L.5.a. Do you have any questions?
Yes..... 1 [RESPOND TO CONCERNS BASED ON INFORMATION FROM THE FAQ, THEN READ SCRIPT BELOW]
No..... 2 [READ SCRIPT BELOW]
DON'T KNOW ..... 8 [READ SCRIPT BELOW]
REFUSED ..... 9 [READ SCRIPT BELOW]

[PARTICIPANT'S NAME], I want to thank you again for taking part in the study. Please don't hesitate to contact us if you have any questions later.

[TERMINATE CALL]

SECTION L.6: Schedule Call to Confirm Participation

We appreciate your willingness to consider taking part in the study. When may we call you back to speak to you about the study again?
[RECORD DATE AND TIME]
L.6.a. Date: __ __ / __ __ / __ __ __ __ [MM/DD/YYYY]
L.6.b. Time: __ __ : __ __ AM/PM
L.6.c.

HARD APPOINTMENT 1
SOFT APPOINTMENT.....2

[INTERVIEWER: IF NO DATE/TIME SUGGESTED BY PARTICIPANT, SUGGEST 1 WEEK LATER AT THE SAME TIME]

Thank you. We'll call you then. In the meantime, if you have any questions or would like to inform us of your decision earlier, you can call our toll-free phone number and a member of the study staff will assist you. That toll-free number is 855 NIH GuLF (855-644 4853). Also, please tell your family, friends and co-workers about the study and encourage them to join too. They may contact the study hotline center to see if they are eligible and enroll in the study.

[TERMINATE CALL]

SECTION L.7: Coordinate Home Visit Scheduling

Thank you very much for agreeing to participate in the study. A study staff member will contact you soon to schedule the home visit. To assist with the scheduling call, please let me know two days of the week and two times of the day that would work best for you to receive a scheduling call.
[RECORD DATES AND TIMES]

L.7.a. DAY OF WEEK 1: [DROP DOWN]
L.7.b. TIME OF DAY 1: __/__/ [AM/PM]

L.7.c. DAY OF WEEK 2: [DROP DOWN]
L.7.d. TIME OF DAY 2: __/__/ [AM/PM

L.7.e. Do you expect to be at your current address for the next 3 months?
Yes..... 1 [GO TO END SCRIPT AT BOTTOM OF THIS SECTION]
No…….. 2
DON'T KNOW 8
REFUSED ..... 9 [GO TO END SCRIPT AT BOTTOM OF THIS SECTION]

L.7.f. What address do you expect to be at 3 months from now?
L.7.f.1. House number: _____[FREE TEXT FIELD]
L.7.f.2. Street name: _____[FREE TEXT FIELD]
L.7.f.3. Apartment number: _____[FREE TEXT FIELD]
L.7.f.4. City: _____[FREE TEXT FIELD]
L.7.f.5. State: _____[STATE DROP DOWN BOX]
L.7.f.6. Zip Code: ___/___/___/___/___/
DON'T KNOW 8
REFUSED 9

[PARTICIPANT'S NAME], I really appreciate your time. If you have any questions or have any trouble scheduling your visit, you can call our toll-free number and a member of the study staff will assist you. That toll-free number is 855 NIH GuLF (855-644 4853). Again, thank you very much for your participation in the GuLF STUDY.

[TERMINATE CALL]

SECTION L.8: Refusal to Participate

[PARTICIPANT'S NAME], I really appreciate your time. If you have any questions or concerns, you can call our toll-free number and a member of the study staff will assist you. That toll-free number is 855 NIH GuLF (855-644 4853).

[TERMINATE CALL]

SECTION L.9: Ineligible

[PARTICIPANT'S NAME], I really appreciate your time. However, based on your responses, you are ineligible to participate in this study. If you have any questions or concerns, you can call our toll-free number and a member of the study staff will assist you. That toll-free number is 855 NIH GuLF (855-644 4853).

[TERMINATE CALL]

APPENDIX A: ATSDR – MILLARD REFRIGERATED SERVICES AMMONIA RELEASE QUESTIONNAIRE

Action	Date
V1.0 Submitted to NIEHS IRB	09/07/12
V1.0 Integrated into Questionnaire	01/25/12

Q1. Were you working at or near the BP Recovery site across the channel from the Millard Refrigerated Services compound on August 23, 2010, the morning that the Millard Refrigerated Services had an ammonia release?

Yes	1
No	2 [GO TO END]
DON'T KNOW	8 [GO TO END]
REFUSED	9 [GO TO END]

Exposure to the Ammonia

Q2a. At the time of the release (9:05 a.m.), where were you working?
[INTERVIEWER: IF PARTICIPANT DOES NOT REPORT ONE OF THE LOCATIONS BELOW EXACTLY, PROMPT THEM WITH THE FOLLOWING [PAUSING BETWEEN EACH SITE}: "Can you tell me if you were working at BP site 1, BP site 2, BP site 3, BP site 4, BP site 5, BP site 6, the Vessel Staging Area, Marine Support Operations, Decon, the Resolve Company, or another location?".]

BP SITE 1	1	[GO TO Q2b]
BP SITE 2	2	[GO TO Q2b]
BP SITE 3	3	[GO TO Q2b]
BP SITE 4	4	[GO TO Q2b]
BP SITE 5	5	[GO TO Q2b]
BP SITE 6	6	[GO TO Q2b]
VESSEL STAGING AREA	7	[GO TO Q2b]
MARINE SUPPORT OPERATIONS	10	[GO TO Q2b]
DECON	11	[GO TO Q2b]
RESOLVE COMPANY	12	[GO TO Q2b]
OTHER	13	
DON'T KNOW	8	
REFUSED	9	[GO TO Q2b]

Q2a.1. Where were you working, at the time of the release, in relation to the main gate or the channel?
[INTERVIEWER: RECORD ANSWER VERBATIM. IF PARTICIPANT SEEMS CONFUSED, ASK "Where were you working in relation to the water?"]
[FREE TEXT]

DON'T KNOW	8
REFUSED	9

Q2b.	Were you indoors or outdoors?	Indoors	Outdoors	DK	R
Q2c.	Did you smell an ammonia odor?	Yes	No	DK	R
Q2d.	Did you shelter in place, meaning go or stay indoors with doors and windows closed and the ventilation system turned off?	Yes	No	DK	R
Q2e.	Did you evacuate?	Yes	No [GO TO Q3]	DK [GO TO	R

		Q3]		
Q2e.1.	Approximately when did you evacuate?	Time: [GO TO Q3]	DK [GO TO Q2e.2]	R
Q2e.2.	IF DO NOT KNOW THE TIME, ASK: About how long was it before you left?		DK	R

Symptoms Experienced after the Ammonia Release

Q3. Now I'm going to ask you if you had specific symptoms within 24 hours of the ammonia release Please answer *yes or no.*

Within 24 hours of the ammonia release, did you have…?	Yes	No	DON'T KNOW	REFUSED	If "Yes", about how long was it before the symptom went away?
a. irritation, pain, or burning of your eyes	Y	N	DK	R	
b. burning of your nose, throat or lungs	Y	N	DK	R	
c. headache	Y	N	DK	R	
d. dizziness or lightheadedness	Y	N	DK	R	
e. loss of consciousness or fainting	Y	N	DK	R	
f. ringing of the ears	Y	N	DK	R	
g. difficulty breathing or feeling out-of-breath	Y	N	DK	R	
h. coughing	Y	N	DK	R	
i. increased congestion or phlegm	Y	N	DK	R	
j. wheezing in chest	Y	N	DK	R	
k. chest tightness or chest pain or angina	Y	N	DK	R	
l. nausea	Y	N	DK	R	
m. vomiting	Y	N	DK	R	
n. irritation, pain, or burning of skin	Y	N	DK	R	
o. skin rash	Y	N	DK	R	

Medical Care for Problems Related to the Ammonia Exposure

Q4. Did you receive medical care for any symptoms or illnesses that you feel are related to the ammonia exposure? [PROBE IF NEEDED: EXAMPLES OF MEDICAL CARE INCLUDE COMPANY DOCTOR, EMT, EMERGENCY DEPARTMENT, ETC.]

Yes	1 [GO TO Q4a]
No	2 [GO TO Q5]
DON'T KNOW	8 [GO TO Q6]
REFUSED	9 [GO TO Q6]

Q4a. Were you treated… [READ LIST AND CIRCLE ALL THAT APPLY, THEN GO TO Q6.]

By a paramedic or EMT?	1
At a hospital emergency department and released?	2
At a hospital emergency department and admitted?	3
At a doctor's office or urgent care clinic?	4
By a company doctor or nurse?	5
By a doctor specializing in occupational health?	6
By a doctor specializing in breathing problems?	7
DON'T KNOW	8
REFUSED	9

Q5. <u>IF ANSWERED YES TO AT LEAST ONE SYMPTOM AND DID NOT RECEIVE MEDICAL CARE (IF ANY OF Q3a-o = "Yes" AND Q4="No," ELSE GO TO Q6):</u> You described that you had symptoms after the ammonia exposure, but did not seek medical care. Why not? [IF NEEDED, PROMPT, BUT DO NOT READ LIST.]

SYMPTOMS WERE NOT BAD ENOUGH	1
DON'T LIKE TO GO TO THE DOCTOR	2
DIDN'T WANT TO TAKE TIME	3
WORRIED ABOUT WHO WOULD PAY FOR THE MEDICAL VISIT	4
WORRIED ABOUT LOSING JOB	5
OTHER	[GO TO Q5a]6
DON'T KNOW	8
REFUSED	9

Q5a. Other reason:

_____

Q6. Is there anything important that we did not cover that you want to tell us related to the ammonia release?

<u>END:</u> Thank you. This completes the ammonia release survey. I would like to sincerely thank you for your time. Your contributions will help efforts to better assist and respond to future chemical releases.