

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

## Telephone Enrollment and Baseline Scripts and Questionnaires Sections B - L

OMB#0925-0626 EXP:04/2017

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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?

1 E S		
NO	[GO TO C	UESTION B1a.6]
DON'T KNOW	GO TO C	UESTION B1a.6
REFUSED	GO TO C	UESTION 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 KNOW88888888 REFUSED99999999
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 <u>YEAR</u> THAT HE/SHE STOPPED?". THEN ASK "CAN YOU TELL ME THE <u>MONTH</u> 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 CONTINUOUS77777777 DON'T KNOW88888888 REFUSED99999999
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 KNOW88 88 8888 REFUSED99 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 KNOW88

REFUSED99	
B1a.8. What was his/her date of birth? [INTERVIEWER: IF RESPONDENT HAS you tell me the month and year when he/sh DETAIL AS PROVIDED, FILLING IN DAY MIDDLE, OR LATE, RESPECTIVELY, OR PROVIDED ON THE TIMING WITHIN THE	e was born?"; ENTER AS MUCH AS "EE", "MM", OR "LL" FOR EARLY, AS 88 IF NO INFORMATION IS
/ / / [MM/l DON'T KNOW	DD/YYYY]
B1a.9. Would you please confirm his/her fu [SPELL FIRST, MI, THEN LAST NAME] B1a.9a.FIRST: [FREE 7 B1a.9b. MI: [FREE 7 B1a.9c. LAST: [FREE 7	FEXT FIELD] EXT FIELD]
B1a.10. What was his/her address at the tir B1a.10a. House number:	[FREE TEXT FIELD]  [FREE TEXT FIEL D]
B1a.11. [ASK ONLY IF B1a.2 = 1; IF B1a.2 he/she live at this address while working or Yes	the oil spill?
B1a.11a. What was his/her address B1a.11a.1. House number:	
FIELD] B1a.11a.2. Street name:	-
FIELD] B1a.11a.3. Apartment number:	
FIELD] B1a 11a 4 City:	[FREE TEXT FIELD]

	_[STATE DROP DOWN BOX] [GO TO
QUESTION B1a.13] DON'T KNOW 8 [GO TO QUE REFUSED 9 [GO TO QUE	
B1a.12. [ASK ONLY IF B1a.2 = 2, 8, OR 9 ne/she live at this address in the spring an Yes	nd summer of 2010?
B1a.12a. Where did he/she live at t B1a.12a.1. House number: FIELD]	
B1a.12a.2. Street name:	[FREE TEXT
FIELD] B1a.12a.3. Apartment number:	[FREE TEXT
FIELD] B1a.12a.4. City: B1a.12a.5. State: DON'T KNOW 8 REFUSED 9	[FREE TEXT FIELD] [STATE DROP DOWN BOX]
B1a.13. Is there any other address that he Yes	N B1a.14] N B1a.14]
B1a.13a. What was it? B1a.13a.1. House number: FIELD] B1a.13a.2. Street name: FIELD]	[FREE TEXT
B1a.13a.3. Apartment number: FIELD]	
B1a.13a.4. City: B1a.13a.5. State: DON'T KNOW 8 REFUSED 9	[FREE TEXT FIELD] [STATE DROP DOWN BOX]

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 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 NAME1 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 guestions 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 IRESPOND 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				
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

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?

1 = 0	I			
NO	2 [GO	TO QUE	STION I	3.2.a.23]
DON'T KNOW	8 [GO	TO QUE	STION I	3.2.a.23
REFUSED	9 [GO	TO QUE	STION I	3.2.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 FIELDS1 MM/DD/YYYY [IF COMPLETE DATE, GO TO B.2.a.22; IF DD IS UNKNOWN, GO TO B.2.a.21al 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] IINTERVIEWER: IF THE RESPONDENT HAS NOT PROVIDED THE REASON OF PARTICIPANT INCAPACITATION]

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PROVIDED BY RESPONDENT]

DON'T KNOW...... 8

What is the cause of [PARTICIPANT'S NAME] incapacitation?

B.2.a.23.b. [FREE TEXT] [RECORD NATURE/CAUSE OF INCAPACITATION

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 KNOW88 88 8888  REFUSED99 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
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:
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
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]
	[FREE TEXT FIELD] [STATE DROP DOWN BOX] [GO
TO QUESTION B.2.a.30]	COTION D. C. CO.
DON'T KNOW 8 [GO TO QUE REFUSED 9 [GO TO QUE	
REFUSED9 [GO TO QUE	23 HON B.2.a.30]
B.2.a.29. [ASK ONLY IF B.2.a.19 = 2, 8, 0 Did he/she live at this address in the sprin Yes1	g and summer of 2010?
No 2	
DON'T KNOW 8 REFUSED 9	
11. COLD	
B.2.a.29a. Where did they live at th	
B.2.a.29a.1. House number: FIELD]	[FREE TEXT
-	[FREE TEXT
FIELD]	-
B.2.a.29a.3. Apartment number: FIELD]	[FREE TEXT
	[FREE TEXT FIELD]
	[FREE TEXT FIELD] [STATE DROP DOWN BOX]
DON'T KNOW 8	
REFUSED9	
B.2.a.30. Is there any other address that the	hey may have given?
Yes1	
No	
DON'T KNOW 8 [GO TO QUESTION REFUSED 9 [GO TO QUESTION	<b>-</b>
1.E. 0025 0 [00 10 Q0201101	<b>V</b> B.2.a.01]
B.2.a.30a. What was it?	
	[FREE TEXT
FIELD] B.2.a.30a.2. Street name:	[FREE TEXT
FIELD]	ı
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:	[FREE TEXT FIELD] [STATE DROP DOWN BOX]
DON'T KNOW 8	-
REFUSED9	

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

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 HHHHH [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 NAME1 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] 

[PROBE: His/Her social security number will help us link to the correct health

B2.a.33.e.5. State: [STATE DROP DOWN BOX] [GO TO

QUESTION B2.a.33.e.6]

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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 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 guestions 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]

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.

DON'T KNOW....... 8 [READ SCRIPT BELOW] REFUSED....... 9 [READ SCRIPT BELOW]

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]

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#### **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
[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:
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

**Gulf Study** 

Victoria
Wharton
Willacy
Not in list above
Other

C4. [INTENTIONALLY BLANK]

C5. [INTENTIONALLY BLANK]

C7. [INTENTIONALLY BLANK]

C8. [INTENTIONALLY BLANK]

## **SECTION D: Demographic Measures**

D1. [ASK ONLY IF UNKNOWN OR UNCERTAIN] Are you male or female?  Male
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
D3. Were you born in the United States? Yes
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
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
Asian2 Black or African American3 Native Hawaiian or Pacific Islander4

OTHER6 D4.1. Specify
DON'T KNOW8 [GO TO QUESTION D4a]
REFUSED9 [GO TO QUESTION D4a]
D4a. Where was your biological mother born?
In the United States1 - ENTER NAME OF STATE []
Outside the United States2 - ENTER U.S. TERRITORY (E.G. PUERTO
RICO, U.S. VIRGIN ISLANDS, GUAM] OR NAME OF FOREIGN
COUNTRY, ETC. []
DON'T KNOW8
REFUSED9
D4b. Where was your biological father born?
In the United States1 - PRINT NAME OF STATE []
Outside the United States2 - ENTER U.S. TERRITORY (E.G. PUERTO
RICO, U.S. VIRGIN ISLANDS, GUAM] OR NAME OF FOREIGN
COUNTRY, ETC. []
DON'T KNOW8
REFUSED9
TIE DA O (A.C.). EL OE OKID TO DEL
[IF D4=2 (Asian), ELSE SKIP TO D5]
D4c. Are you Vietnamese, Chinese, Laotian, Thai, Cambodian, or
something else?
VIETNAM1
CAMBODIA2
LAOS3
SAMOA4
PACIFIC ISLANDS5 D4c.1 Specify
CHINA6
PHILIPPINES7
JAPAN8
KOREA9
OTHER10 D4c.2 Specify
DON'T KNOW88
REFUSED99
KEI 00LD
D5. What is the <b>highest</b> grade or level of school you have <b>completed</b> or the
highest degree you have received? [INTERVIEWER: PROBE AS
NECESSARY, BUT DO NOT READ LIST]
NEVER ATTENDED/KINDERGARTEN ONLY0
1 <sup>ST</sup> GRADE1

### **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 <a href="supported">supported</a> 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 <u>training</u> days, did you work at least one day since April 20, 2010 doing <u>anything</u> related to the oil spill clean-up effort? YES
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
E1b. Did you do this for at least one day, not counting any clean-up training days? YES
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 or the clean-up.  DID NOT COMPLETE THE TRAINING

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 <u>not</u> work on the clean-up response? YES1
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 <u>not</u> work on the clean-up during this time?       Units
Weeks2
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?
<u> </u>
Month2
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	ΚĿ
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	
ASHLAND SERVICES, LLC	
CENTER FOR TOXICOLOGY AND ENVIRONMENTAL HEALTH (CTEH)	6
COMMAND CENTER	7
CROWDER GULF	10
DANOS & CUROLE	
EMERGENCY RESPONSE GROUP, LLC (ERG)	12
ENVIRONMENTAL LABOR SERVICES	
GAC CONTRACTORS	14
HEPACO	15
MANSFIELD INDUSTRIAL	
MILLER ENVIRONMENTAL GROUP	17
O'BRIENS	
PARSONS	
PLANT PERFORMANCE SERVICES (P2S)	
RELIABLE STAFFING	
THE DRC GROUP	
THE RESPONSE GROUP (TRG)	
US ENVIRONMENTAL SERVICES, LLC (USES)	
VESSELS OF OPPORTUNITY (VOO)	25
OTHER, SPECIFY	26
[FREE TEXT FIELD]	_
DON'T KNOW	
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 F6.1b = $21$

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.]

#### National Institute of Environmental Health Sciences (NIEHS) Version 7.0 (07/17/14)

#### **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 CHARSENSITIVE POP-UP MENU FOR MONTI	H]
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 CHARS	SENSITIVE POP-UI	P MENU FOR MONTH]
STILL WORKING	77777777		_
DON'T KNOW	8888888		
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 <u>not</u> work on this/these vessel(s)? YES
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
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
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.]
f 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.]

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[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
```

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REFUSED If E7a1=1, else E7c5a. E7c5. The area where the gas and oil were separated? None 2 Less than half About half 3 More than half 4 5 All of it DON'T KNOW 8 REFUSED 9 E7c5a. Other inside areas of the vessel(s)? None 1 2 Less than half About half 3 More than half 4 5 All of it 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 8 DON'T KNOW 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 80 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 <u>OTHER THAN</u> 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 E8i1] E7d3. [if E7a3=1 and E7a4=1] What was your primary job title while on the DD2

[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?

and DD3?

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[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 <u>longest</u> 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]

E8q6. [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]
E8i5d. [INTENTIONALLY BLANK]
E8i5e. [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 <u>barge</u> 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 <u>boat or ship</u>, <u>not</u> 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 <u>YEAR</u> THAT YOU STARTED?". THEN ASK "CAN YOU TELL ME THE <u>MONTH</u> 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 <u>YEAR</u> THAT YOU STOPPED?". THEN ASK "CAN YOU TELL ME THE <u>MONTH</u> 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.......7777777
DON'T KNOW......8888888
REFUSED.......99999999

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

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

[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

**Gulf Study** 

totalOtherVesselDays >= 7) or (totalCleanupDays < 30 and totalOtherVesselDays >= 3)).1 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 8 DON'T KNOW 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, cher that transferred personnel? Yes	nicals,	or equ	ipment	, or
If E9b5=1, else go to E9c1 E9b6a. Was it supplying fuel?	YES 1	NO 2	DK 8	RE 9
E9b6a1. Was it supplying chemicals? E9b6b. Was it supplying equipment or personnel?	1	2 2	8	9
If E9b6b=1 and E8j2=2-5, else E9c1 E9b6c. Did you operate a shallow draft, air or jon boa up people? Yes	t to tra	nsport	beach	clean
If E9b6c=1, else E9c1 E9b6d1. What month and year did you start operating boat to transport beach clean-up people? MONTH YEAR DON'T KNOW 88 8888 REFUSED 99 9999	g a sha	llow dr	aft, air	or jon
E9b6d2. How many days, weeks, or months did you d _I_I_I_ UNITS Days 1 Weeks 2 Months 3 DON'T KNOW 8 REFUSED 9	lo this?	•		
E9b6e. In a typical week or month, how many days diclean-up people on one of these vessels?      per unit  Week	id you	transpo	ort bead	ch

E9b6f. About how many hours a day?

hours DON'T KNOW 88 REFUSED 99	
E9c1. Did you work of water for oil? Yes	n a vessel that skimmed or helped in the skimming of the
If E9c1=1, else E9d1 E9c2a. What month described with the skimming of the ware and MONTH DON'T KNOW	3
E9c2b. How many da _I_I_I_ UNITS Days Weeks Months DON'T KNOW REFUSED	ys, weeks, or months did you do this?  1 2 3 8 9
E9c3. In a typical weekskim the water for oil vortices when the water for oil vortices where the water for oil vortices was per unit when the water forces was also become a second to the water forces with the water forces was also become a second to the water forces was a second to the water for oil vortices was a second to the water for oil vortices was a second to the water for oil vortices was a second to the water for oil vortices was a second to the water for oil vortices was a second to the water for oil vortices was a second to the water forces was	· 3
E9c4. About how man hours DON'T KNOW 88 REFUSED 99	3
If E8j2=2-5, else E9f1 E9d1. Did you work o Yes1 No2 DON'T KNOW8	n a vessel that burned or helped burn oil on water?

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

E9f2a. What month did you start working on one of these vessels?

MONTH

E9g1c. How many days _I_I_I_ UNITS	s, weeks, or months did you do this?
_i_i_i_ ONITO Days	1
Weeks	2
Months	3
DON'T KNOW REFUSED	8 9
INEL OCED	
• • • • • • • • • • • • • • • • • • • •	k or month, how many days did you work on a vessel that persant 5000 feet below the water surface?
E9g1e. About how man	v hours a day?
hours	,
DON'T KNOW 88	
REFUSED 99	
E9g2. Did the vessel yesurface? Yes 1 No 2 DON'T KNOW 8	ou worked on inject dispersant just below the water
REFUSED 9	
If E0g2_1   olso E0b1	
lf E9g2=1, else E9h1. E9g3a.  What month die	d you start working on this type of vessel?
MONTH	3
DON'T KNOW 88	
REFUSED 99	
E9g3b. How many day _I_I_I_ UNITS	s, weeks, or months did you do this?
Days	1
Weeks	2
Months DON'T KNOW	3 8
REFUSED	9
	or month, how many days did you work on a vessel when ant just below the water surface?

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
If E9i1=1, else E9I1. E9i2a. What month did you start working on one of these vessels?  MONTH DON'T KNOW 88 REFUSED
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
E9i4. About how many hours a day? hours DON'T KNOW 88 REFUSED 99
E9i5. Did the vessel you were on collect oily booms onto the vessel? Yes
If E9i5=1, else E9k1 E9i6a. What month did you start working on one of these vessels?  MONTH DON'T KNOW 88 REFUSED

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
E9i8. About how many hours a day? hours DON'T KNOW 88 REFUSED 99
E9j. INTENTIONALLY BLANK
E9k1. 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
If E9k1=1, else E9l1
E9k2a. What month and year did you start this work? 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
STILL WORKING 7

E9k3. 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
E9k4. About how many hours a day? hours DON'T KNOW 88 REFUSED 99
E9I1. Did you work on a vessel that deconned other vessels? Yes
If E9I1=1, else E9m1 E9I2a. What month and year did you start working on one of these vessels?  MONTH YEAR DON'T KNOW 88 8888 REFUSED 99 9999
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
E9l3. In a typical week or month, how many days did you work on a vessel tha was deconning other vessels?      days per unit  Week
E9l4. About how many hours a day? hours

DON'T KNOW 88 REFUSED 99
E9m1. Were you ever outside on a vessel while it was being deconned? Yes
If E9m1=1, else E9n1 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
E9m2b. What was the last month and year this happened?  MONTH  YEAR  DON'T KNOW 88 8888  REFUSED 99 9999
E9m3. In a typical week or month how many days were you outside on a vesse while it was being deconned?    _  days per unit  Week
E9m4. About how many hours a day did this happen? hours DON'T KNOW 88 REFUSED 99
If E8j2=2-5, else E10a1 E9n1. For most of the time that you were on a vessel, could you see the shoreline? Yes
If E9n1=1, else E10a1

E9n2. Did you work on a vessel that patrolled the beaches or marshes for oil, oily water, tar balls, tar mats, or animals? Yes
If E9n2=1, else E9o1 E9n3a. What month and year did you start working on one of these vessels?  MONTH YEAR DON'T KNOW 88 8888 REFUSED 99 9999
E9n3b. 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
E9n4. In a typical week or month, how many days were you on a vessel doing this type of patrolling?      days per unit  Week
E9n5. About how many hours a day?hours DON'T KNOW 88 REFUSED 99
E9o1. Did you work on a vessel that spent most of the day near beaches or marshes being cleaned? Yes
If E9o1=1, else E9p1 E9o2a. What month and year did you start working on one of these vessels? MONTH

YEA DON'T KNOW 88 8 REFUSED 99 9	3888
_I_I_I_ UNITS Days Weeks Months STILL WORKING DON'T KNOW	, weeks, or months did you do this?  1 2 3 7 8 9
	or month, how many days did you work on a vessel that ear beaches or marshes being cleaned?
E9o4. About how many hours DON'T KNOW 88 REFUSED 99	hours a day?
E9p1. Did you work on structures? Yes	a vessel that cleaned rock jetties or other shoreline
	8888
_I_I_I_ UNITS Days Weeks Months	, weeks, or months did you do this? 1 2 3 8

BuLF STUDY
el that was

REFUSED...... 99

# **SHIP, BOAT AND BARGE TASKS**

If E9I1=1, else E10c1 E10a1. You said you worked on a vessel that deconned other vessels. Were you personally involved in the deconning? Yes
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
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

E10a6. Did you or a person you were directly helping use <u>low</u> pressure sprays? These used a garden-like hose or a sprayer with a handheld wand and a small tank.

E10a7. Did you or a person you were directly helping use <u>high</u> pressure sprays, which used compressed air?

If E10a7=1, else E10a10

E10a8. Of the total time you were involved in deconning, how much of the time was a <u>high</u> 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 3 About half 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 personally 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 8 DON'T KNOW 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]

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

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
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
If E10e1=1, else E10f1 E10e2a. What month did this first happen? MONTH DON'T KNOW 88 8888 REFUSED
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
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
If E10f1=1, else E10j1 E10f2a. In what month did this first happen? MONTH DON'T KNOW 88 8888 REFUSED
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
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? Yes1 No

E10k1. While on a vessel, did you clean up pools of oil or remove oily plastic used to protect surfaces on the vessel? Yes
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 oi or remove oily plastic?      days per unit  Week
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 personally handle oily booms by moving them or bringing them onto the vessel from the water? Yes
If E10I1=1, else E10m1

E10l2a. What month and year d  MONTH	id you f	first do	this?	
YEAR DON'T KNOW 88 8888 REFUSED 99 9999				
E10l2b. How many days, weeks, _I_I_I_UNITS Days 1 Weeks 2 Months 3 DON'T KNOW 8 REFUSED 9	, or moi	nths di	d you d	do this job?
E10I3. In a typical week or month booms by moving them or bringing them. It was a second to the second them of the second them. It was a second the second them of the second them. It was a second the second them of the second them of the second them. It was a second the second them of the second them of the second them. It was a second the second them of the second them. It was a second the secon				
E10I4. About how many hours a hours DON'T KNOW 88 REFUSED 99	day?			
E10l5. What kinds of booms did pompoms, spaghetti, sausage, o	•			
HARD BOOMS SNARE BOOMS POMPOMS SPAGHETTI SAUSAGE OTHER SPECIFY:	YES 1 1 1 1 1 1	NO 2 2 2 2 2 2 2		RE 9 9 9 9 9
If E9d1=1, else E10n1 E10m1. You said you worked or water. Were you personally involves				ed or helped burn oil on the

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 personally help burn oil?      days per unit  Week
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 personally pressure spray them? Yes
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

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Weeks	2	
Months	2 3	
DON'T KNOW	8	
REFUSED	9	
	k or month, how many days did yo er shoreline structures from a vess	
E10n4. About how man hours DON'T KNOW 88 REFUSED 99	y hours a day did you spray?	
during the clean-up efforulike providing security,	e any other tasks you did while on our that I did not ask you about. The monitoring worker safety, supervising tasks we have not asked you ab	ese could include things on, hazard evaluation,
		_[FKEE TEXT FIELD]
NONE / NA 7 DON'T KNOW8		
REFUSED9		
ILLI USED9		

### LAND

If E6.1c=1, else E36a1

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 <u>YEAR</u> THAT YOU STARTED?". THEN ASK "CAN YOU TELL ME THE <u>MONTH</u> 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 <u>YEAR</u> THAT YOU STOPPED?". THEN ASK "CAN YOU TELL ME THE <u>MONTH</u> 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.......7777777
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 <u>not</u> work on the clean-up on <u>land</u> ? YES
E11x2b. Not counting weekends and scheduled time off, about how many days, weeks, or months in total did you <u>not</u> work on the clean-up on <u>land</u> during this time?     _   Units Days
E11x3. Did/Do you spend time in an office on land as part of the clean-up response? Yes
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

E13. Did/do you E13a. Oi Yes No DON'T K	a=2, go to E15a; else if E12=5, go to E53. u spend any time n the beaches?
equipmer Yes No DON'T K	an area where workers were/are deconning vessels or nt?
being use Yes No DON'T K	any other place where oil, oily materials, or chemicals were/are ed?
	3b AND E13c all =2, 8 or 9, else E14a d/do you spend most of your work time when not in the office?  [FREE TEXT FIELD]
If E13a=1, else I E14a. How muc None Less than half About half More than half All of it DON'T KNOW REFUSED	E14c h of the time did/do you spend on the beaches?  1 2 3 4 5 8 9
E14b. What did	/do you do there? [FREE TEXT FIELD]
If E13b=1, else E14c. How much None Less than half About half More than half	E14e h of your time did/do you spend in a deconning area?  1 2 3 4 5

E14j. About how many hours a day?  hours
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
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
E15d. About how many hours a day? hours DON'T KNOW 88

REFU	JSED 99	
E16.	Did/do you clean E16a. Beaches?. Yes No DON'T KNOW REFUSED	 .1 .2 .8
	E16b. Marshes?. Yes No DON'T KNOW REFUSED	.1 .2 .8
	E16c. Rock jetties Yes No DON'T KNOW REFUSED	. 2 . 8
E17a. end lo UTVs Yes No DON"		e E23a n, did you operate or work within 20 feet of trucks, front rtable skimmers or sifters, or sand shakers or washers,
E17b <sup>2</sup> this ed	7a=1, else E18a 1. What month and quipment? MONTH L YEAR T KNOW 88 8 JSED	
_I_I_I Days Week Month STILL	I_ UNITS	

E17c. In a typical week equipment or work with   _   days per unit	or month, how many days do/did you operate this in 20 feet of it?
Week1	
Month2	
DON'T KNOW 88	
REFUSED 99	
E17d. About how many	hours a day?
hours DON'T KNOW 88	
REFUSED 99	
I'm now going to ask al	pout cleaning the shoreline of tar balls, patties or mats;
	d garbage; [PAUSE] oil and oily sand; [PAUSE] and rocks
First,	
	tar balls, patties, or mats using shovels, rakes, buckets, or
other hand tools from the Yes	ne beach or marsnes?
No 2	
DON'T KNOW 8	
REFUSED9	
If E192_1 also E102	
If E18a=1, else E19a.	nd year did you start doing this?
MONTH	ia year ala yea start doing this:
YEAR	
DON'T KNOW 88	8888
REFUSED 99	9999
E18b2. How many day	vs, 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 remove tar balls,
patties, or mats using t	hese hand tools?
_  days per unit	

Week
E18d. About how many hours a day? hours DON'T KNOW 88 REFUSED 99
E19a. Did you cut, collect, or put oily plants, sargassum weed or grass, or garbage into bags or containers for disposal?  Yes
If E19a=1, else E20a E19b1. What month and year did you start doing this?  MONTH YEAR DON'T KNOW 88 8888 REFUSED 99 9999
E19b2. 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
E19c. 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
E19d. About how many hours a day?hours DON'T KNOW 88 REFUSED

E20a. Did you remove oil or oily sand from the beach or marshes with shovels, rakes, wheelbarrows, or other hand tools? Yes
If E20a=1, else E20e 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 oil or oily sand with hand tools?      days per unit  Week
E20d. About how many hours a day? hours DON'T KNOW 88 REFUSED 99
E20e. 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
If E20e=1, else E21a

E20f1. What month and year did you start doing this?  MONTH YEAR
DON'T KNOW 88 8888 REFUSED 99 9999
E20f2. 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
E20g. 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
E20h. About how many hours a day? hours DON'T KNOW 88 REFUSED 99
if not (E18a=1 or E19a=1 or E20a=1 or E20e=1), else E22i E21a. Did/Do you patrol the beaches or marshes on foot to search for oil, tar or oily animals? Yes
If E21a=1, else E22i. 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

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E22c. 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
E22d. 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
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
E22I. About how many hours a day? hours DON'T KNOW 88 REFUSED

## 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?

<b>O</b> 1	•	-
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?

MON	1TH	
YEA	R	
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
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
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

E23h. About how many hours a day? hours	
 DON'T KNOW 88	
REFUSED 99	
E24. Did you handle booms either on land or while stand Yes 1 No2	ding in shallow water?
DON'T KNOW 8 REFUSED 9	
If E24=1, else E28a E25a. Did you put out, move, or inspect booms while sta Yes1	nding in oily water?
No	
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 th	nis?
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	
E25d. About how many hours a day did you stand in oily hours	water?

DON'T KNOW 88 REFUSED 99	
E26a. Did you bring in Yes	oily booms while standing in water?
If E26a=1, else E27a E26b1. What month an MONTH YEAR DON'T KNOW 88 REFUSED	
E26b2. How many day _I_I_I_ UNITS Days Weeks Months STILL WORKING DON'T KNOW REFUSED	ys, weeks, or months did you do this?  1 2 3 7 8 9
E26c. In a typical week while standing in water     days per unit Week	
E26d. About how many hours DON'T KNOW 88 REFUSED 99	·
E27a. Did you repair o Yes 1 No 2 DON'T KNOW 8 REFUSED 9	ily booms?
If E27a=1, else E28a	

E27b1. What month a MONTH YEAR	nd year did you start doing this?
DON'T KNOW 88 REFUSED 99	
E27b2. How many da _I_I_I_ UNITS	ys, weeks, or months did you do this?
Days	1
Weeks	2
Months	3
DON'T KNOW REFUSED	8 9
E27c. In a typical weel   _   days per unit   Week	
E27d. About how man hours DON'T KNOW 88 REFUSED 99	3
DECONTAMINATION	
E28a. Did you clean o	r decon or help to clean or decon vessels, equipment or
Yes1	
No 2	
DON'T KNOW 8 REFUSED 9	
If E28a=1, else go to E Did you clean or decor E28b. Boats, sh Yes No DON'T KNOW . REFUSED	n nips, barges or other vessels? 1 2 8
E28c. Equipme boards?	ent or structures from the vessels, such as wood deck
	***** *

No DON'T KNOW . REFUSED	8
	2 8
Did you clean o E28e. Booms? Yes No DON'T KNOW . REFUSED	1 2 8
E28f. Small ed Yes No DON'T KNOW . REFUSED	2 8
E28g. Other wo Yes No DON'T KNOW . REFUSED	1 2 8
E28h1. What month a MONTH YEAR DON'T KNOW 88 REFUSED 99	
E28h2. How many day _I_I_I_ UNITS Days Weeks Months Still Working DON'T KNOW REFUSED	ys, weeks, or months did you do this?  1 2 3 7 8 9

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

Less than half

About half
More than half

All of it

2

4 5

DON'T KNOW

REFUSED

8

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
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
E32c. Spray dispersants from a plane? Yes
E32d. Did you do anything else with dispersants? Yes
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

REFUSED 9	
If E33a=1, else go to E33b1. What month MONT YEAR DON'T KNOW	and year did you start doing this? H 88 8888
E33b2. How many of _I_I_I_ UNITS Days Weeks Months STILL WORKING DON'T KNOW REFUSED	days, weeks, or months did you do this?  1 2 3 7 8 9
	1 2 88
E33d. About how ma hours DON'T KNOW REFUSED	88
None Less than half About half More than half All of it DON'T KNOW	the time was the wildlife that you handled <u>oily?</u> 1  2  3  4  5  8
with a cloth, sponge, None Less than half	ou handled wildlife, how much of that time did you clean them

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DON'T KNOW REFUSED	8 9
E34d. In a typical wee bags that contained oi     days per unit   Week	3
E34e. About how man hours DON'T KNOW 88 REFUSED 99	3
E34f. Were you involv Yes 1 No 2 DON'T KNOW 8 REFUSED 9	ed in transporting liquid oil or oily water off site by truck?
If E34f=1, else E34j E34g1. What month a MONTH YEAR DON'T KNOW 8i REFUSED 9i	
E34g2. How many da _I_I_I_ UNITS Days Weeks Months STILL WORKING DON'T KNOW REFUSED	lys, weeks, or months did you do this?  1 2 3 7 8 9
E34h. In a typical wee or oily water off site by   _  days per unit Week1 Month2	

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

\_\_ \_\_ \_ YEAR DON'T KNOW...... 88 8888

REFUSED 99 9999		
lays, week 1 2 3 7 8 9	ks, or months did you do this job?	
	nth, how many days do/did you fuel vessels or oill response?	
any hours 88 99	a day?	
	hat you fueled vessels or equipment as part of the p gasoline vs. diesel fuel?	
oline? nan half half han half t KNOW SED	1 2 3 4 5 8 9	
	lays, week  1 2 3 7 8 9 eek or more the oil spect 1 2 88 99 any hours 88 99 the time to any hours layou pumpoline? Than half han half than half	

1

2

4

5

8

9

E35e2. Diesel fuel? None

All of it

Less than half

More than half

DON'T KNOW

About half

**REFUSED** 

## **OTHER TASKS**

E36a1. Did you maintain or work on pumps or tanks that held dispersant, fuel, oil or oily water or something else? Yes
If E36a1=1, else E36b1 E36a2a. What month and year did you first do this? MONTH YEAR DON'T KNOW 88 8888 REFUSED
E36a2b. 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
E36a3. In a typical week or month, how many days did you maintain or work on these pumps or tanks?      days per unit  Week
E36a4. About how many hours a day? hours DON'T KNOW 88 REFUSED 99
E36a5. 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
E36a5a. Dispersant? None 1 Less than half 2 About half 3

E36b5c. Gasoline?

2

Less than half

None

REFUSED	99 9999	
E36c2b. How many _I_I_I_ UNITS Days Weeks Months DON'T KNOW REFUSED	days, weeks, or months did you do this?  1 2 3 8 9	
E36c3. How many days did you do this in a typical week or month?      days per unit  Week		
E36c4. 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		
E36c5. 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		
Less than half About half More than half All of it DON'T KNOW	t? 1 2 3 4 5 8 9	

E36c5c. Gasoline?

Less than half

More than half

About half

1

2

3

4

5

None

All of it

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REFUSED	9
E36d2c. In a typical them, whether from the property of them, whether from the property of them, whether from the property of	 <u> </u>
E36d2d. About how be a hours DON'T KNOW 8	38
If E36d1a=1, else E3	6d3c
Did you enter these to	anks or containers to:
E36d3a. Inspect then Yes	n?
E36d3b. Clean them? Yes	?
If E36d1b=1, else E3	6d4
Did you work on the of E36d3c. Inspect them Yes	outside of these tanks or containers to: n?
E36d3d. Clean them? Yes 1 No 2 DON'T KNOW 8	?

REFUSED...... 9 If (E36d3a=1 or E36d3b=1) and E36d1b=1, else E36d6 E36d4. 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 E36d5. About how many hours a day were you in a tank or container? hours DON'T KNOW...... 88 REFUSED...... 99 If E36d3a=1 or E36d3b=1, else E37 E36d6. 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... E36d6a. Gasoline? None 1 Less than half 2 About half 3 More than half 4 All of it 5 DON'T KNOW 8 9 REFUSED E36d6b. Diesel fuel?

/ til Ol It	O
DON'T KNOW	8
REFUSED	9
E36d6c. Oil or o	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

None

All of it

Less than half

About half
More than half

2

E36d6e. Somethi	ng else? (SPF	ECIFY)			
None	1	ŕ			
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 (E E35a, E36a1, E3					, E34n,
E37. The cleanubeaches, or decoworkers include conferency;	n areas, and vooks; fork lift	were not hand drivers; secur	lling oil or oily ity; health & and of work die	y materials. Th safety personn	nese el;
DON'T KNOW REFUSED			<b>.</b>		•
GO TO MATRIX					
E38a. Did you do ask you about alr Yes	eady?	ks related to t	he oil spill re	sponse that we	did not
No		MATRIX1			
DON'T KNOW					
REFUSED					
DON'T KN	at other tasks IOW8	did you do? _		_ [FREE TEXT	FIELD]

## \$\$ [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 AREAI) 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	Dispersa nt- related	Decon- related
E7c1=2-5	Worked in the moon pool area	Х			
E7c2=2-5	Worked in the drilling area outside the control room	Х			
E7c4=2-5	Worked in the flare area	Х			
E7c5=2-5	Worked in the area where oil and gas were separated	Х			

E7c5b=2-5	Worked out of doors on the rig	Χ			
(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		Х		
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		Х		
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		
E9I1=1 and not (E10a1=1 or E10a7=1 or E10a11=2- 5)	Worked on a vessel that deconned other vessels		X		Х
E9m1	Were outside on a vessel being deconned		Х		X
E9n2	Worked on a vessel that looked for oily materials or animals near or on shore		Х		
E9o1	Worked on a vessel that spent the day near shore cleanup operations		Х		
E9k1	Worked on a vessel where absorbent materials were used to soak up oil by		X		

	hand			
E9p1=1 and	Worked on a vessel that cleaned jetties	Χ		
E10n1<>1	and other structures	, ,		
E10a1	Were involved in deconning other	Χ		Χ
	vessels while on a vessel			
E10a7	Used or helped with high pressure	Χ		Χ
	spraying while deconning on a vessel			
E10a11=2-5	Used cloths, sponges, or brushes to	X		Χ
E40-4	decon while on a vessel	V		
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	Χ	X	
E10e1	Worked outside on a vessel while	Χ	Х	
	dispersant was being sprayed			
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	Χ		
E10m1	Were involved in burning oil	Χ		
E10n1	Pressure sprayed jetties and other	Χ		
	structures			
(E6.1b=1	Worked on a vessel	X		
AND				
totalOtherV				
esselDays				
ThresholdR				
eached=T				
RUE)				
AND				
not (any of				
E9b1, E9b6c,				
E9000,				
E10c1,				
E9d1,				
E10m1,				
E9f1, E10j1,				
E9g2,				
E10d2,				
E10d10,				
E9h1,				
E10d14,				
E10e1, E9i1, E10l1,				
E9i5, E9i1,				
E10a1,				

	T	1	1	1
E10a7,				
E9m1,				
E9n2, E9o1,				
E9k1, E9p1,				
E10n1, OR				
E10k1=1 or				
E10a11=2-				
5)				
AND				
not (				
(any of				
` •				
E36a1,				
E36b1,				
E36c1,				
E36d1a,				
OR				
E36d1b=				
1) AND				
E6.1a<>				
1 AND				
E6.1c<>				
1)				
E21a	Patrolled beaches or marshes on foot			
E22a	Searched for oil or tar under sand or			
	water			
E18a	Removed tar balls, patties, or mats			
E19a	Cut, collected or disposed of oily plants			
E20a	Removed oil or oily sand from the shore			
E20e	Used absorbent material to soak up the			
L200	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			
E23e	absorbent material			
E25a=1 or	Moved or brought in booms while			
E26a=1	standing in oily water			
E27a	Repaired oily booms			
				V
E28a	Deconned vessels, equipment, or			X
<b>500</b>	personnel while on land			
E29c	Used or helped with high pressure			Χ
	spraying while deconning on land			
E29f=2-5	Used cloths, sponges, or brushes to			X
	decon while on land			
E32b	Prepared dispersant		X	
E33a	Handled wildlife			
E34a	Picked up or transported bags			
	containing oily material			
1				

E34j	Recycled oil				
E34n	Disposed of oily material				
E35a	Fueled vessels or equipment				
E36a1	Maintained or worked on pumps or tanks	Х	Х	Х	
E36b1	Handled or pumped chemicals, fuel, oil or oily water	X	X	X	
E36c1	Connected or disconnected transfer lines	X	Х	X	
E36d1a=1 or E36d1b=1	Entered, cleaned, or inspected tanks or containers	X	X		
E37<>missi ng, DK, or REF	PROGRAMMER: USE WORDS IN TEXT FIELD IN E37	Х	Х	Х	Х
E38a<>miss ing, DK, or REF	PROGRAMMER: USE WORDS IN TEXT FIELD IN E38b	X	X	Х	Х

[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 iGO TO E40ai	

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 <u>leather</u> 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 <u>rubber</u> or <u>synthetic</u> 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 E40e]

 DON'T KNOW
 8 [GO TO E40e]

 REFUSED
 9 [GO TO E40e]

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

DISPLAY CHECKLIST

E40e. Did you wear <u>protective coveralls such as Tyvek</u> 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]

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

#### DISPLAY CHECKLIST

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

E40f. 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]

E40f1. 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

 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 E42a

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** 

E42a. 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 E42b] DON'T KNOW 8 [GO TO E42b] REFUSED 9 [GO TO E42b]

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 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

E42a3. Did you get any of this oily residue or tar on the skin of your hands? YES NO 2 [GO TO E42b] DON'T KNOW 8 [GO TO E42b] REFUSED 9 [GO TO E42b] E42a4. 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 E42b. Did your skin or clothing come in contact with oil or oily water during any of your oil spill clean-up work? YES NO 2 [GO TO E42c] 8 [GO TO E42c] DON'T KNOW REFUSED 9 [GO TO E42c] 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 oil or oily water? None 1 2 Less than half About half 3 More than half 4 5 All of it DON'T KNOW 8 9 REFUSED E42b3. Did you get any oil or oily water on the skin of your hands? YES NO 2 [GO TO E42c] DON'T KNOW 8 [GO TO E42c] REFUSED 9 [GO TO E42c] E42b5. 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

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	
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

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E45a. [INTENTIONALLY BLANK]

E45a1. [INTENTIONALLY BLANK]

E45a2. [INTENTIONALLY BLANK]

E45b. [INTENTIONALLY BLANK]

E45b1. [INTENTIONALLY BLANK]

E45b2. [INTENTIONALLY BLANK]

E45c. [INTENTIONALLY BLANK]

E45c1. [INTENTIONALLY BLANK]

E45c2. [INTENTIONALLY BLANK]

E45d. [INTENTIONALLY BLANK]

E45d1. [INTENTIONALLY BLANK]

E45d2. [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 E46b]

 DON'T KNOW
 8 [GO TO E46b]

 REFUSED
 9 [GO TO E46b]

E46a1. In which of your jobs did this happen?

#### **DISPLAY CHECKLIST**

E46a2. On average, how much of the time were you able 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 E46c

E46b. Did you breathe smoke from burning oil during any of your oil spill cleanup work?

YES 1

 NO
 2 [GO TO E46c]

 DON'T KNOW
 8 [GO TO E46c]

 REFUSED
 9 [GO TO E46c]

E46b1a. In which of your jobs did this happen?

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

E46b1b. 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.

E46c. 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 No DON'T KNOW REFUSED	1 2 [GO TO E51] 8 [GO TO E51] 9 [GO TO E51]
[PROBE: WI stop working	W 888
E51. Did you smok Yes No DON'T KNOW REFUSED	. 2 . 8
E53. While working E53a. In a fle Yes No DON'T KNO REFUSED	
E53b. On a Yes NoDON'T KNO REFUSED	2 W 8
totalOtherVesselDa	
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 REFUSED9	
If E53c=1, else E57	
a b c d	ne of each vessel that you slept on?  [FREE TEXT FIELD]
	orking on oil spill clean-up, about how many nights a you sleep on a [FILL ALL = 1 FROM E53 EL]? —
Gulf where, during the d the area of the wellhead Yes No DON'T KNOW	1 2 [Go to E60]
E59. About how many r NIGHTS DON'T KNOW88 REFUSED99	nights, did you sleep there? —
[FLOTEL/BARGE/VESS a sheen to it? Yes No DON'T KNOW	n-up work, did you sleep at least 1 night on a SEL FROM E53] on water that visibly contained oil or had  1 2 [Go to E62] 8 [Go to E62] 9 [Go to E62]
E61. About how many r NIGHTS DON'T KNOW88	nights, did this happen? —

# 

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 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 y	your health. First	, I need y	our height and	d weight.

F1. How tall are you?
feet     inches [OR]
III cm
 DON'T KNOW 8' 88"
REFUSED 9' 99"
F2. How much do you weigh?
lbs [OR]
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"]

Health Symptoms while Working on the Oil Spill

REFUSED...... 9

[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 <u>working on the oil spill</u>. 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
F7. How often did you have tightness in your chest?  All the time
F8. How often were you short of breath? All the time
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

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**Gulf Study** 

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R N D	ometimes
AI M Sc R N D	17c. How often did you stumble while walking?  Il the time
or Al M So R N D	17d. How often did you experience heart palpitations or heart pounding r racing while at rest?  Il the time
AI M Sc R N D	17e. How often did you sweat heavily for no reason?  Il the time
a Al M Si R N D	17f. How often did you experience problems with urination such as taking long time to urinate or having to strain to start the urine flow?  Il the time
F18. Ho	w often did you have lower back pain?

All the time ......1

REFUSED...... 9

sores or blisters that lasted two or more days? Yes
F22a. Did you get this on a part of your body that touched or came into contact with oil or chemical dispersant? Yes
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
No
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
No
F23a. Were you hospitalized for any of these symptom(s) or illness(es) where hospitalized means admitted at least overnight? Yes1
No
F23b. Why were you hospitalized? [FREE TEXT FIELD] DON'T KNOW8 REFUSED9
F23c. When were you hospitalized the first time?

F22. Did you have any dermatitis, eczema, other red, inflamed skin rashes, or

[INTERVIEWER: IF PARTICIPANT HAS TROUBLE ANSWERING, ASK "CAN YOU TELL ME THE <u>YEAR</u> 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 KNOW8 [GO TO QUESTION F25] REFUSED9 [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
Now I would like to dok you some questions about your nearth instory.
[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
DON'T KNOW 8 [GO TO QUESTION F26] REFUSED 9 [GO TO QUESTION F26]
F25a. What month and year were you first 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
F25a.1. At what age were you first 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 KNOW88 REFUSED99
F25b. Have you had any asthma attacks in the past [YEAR FILL]? Yes
F26. Has a doctor ever told you that you have emphysema? Yes

DON'T KNOW 8 [GO TO QUESTION F27] REFUSED 9 [GO TO QUESTION F27]		
F26a. What month and year were you <u>first</u> told you have emphysema? / [MM/YYYY] [GO TO QUESTION F27] DON'T KNOW 88/8888 REFUSED 99/9999		
F26a1. At what age were you <u>first</u> told you have emphysema? [AGE] DON'T KNOW88 REFUSED99		
F27. Has a doctor ever told you that you have chronic bronchitis? Yes		
F27a. What month and year were you <u>first</u> told you have chronic bronchitis? / [MM/YYYY] [GO TO QUESTION F28] DON'T KNOW 88/8888 REFUSED		
F27a.1. At what age were you <u>first</u> told you have chronic bronchitis?[AGE] DON'T KNOW88 REFUSED99		
F28. Has a doctor ever told you that you have high blood pressure? Yes		
F28a. What month and year were you <u>first</u> 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		

F28a.1. At what age were you <u>first</u> 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 KNOW88 REFUSED99		
F28b. Has a doctor told you within the past [YEAR FILL] that you have high blood pressure? Yes		
F29. Has a doctor ever told you that you have angina, also called angina pectoris? Yes		
F29a. What month and year were you <u>first</u> 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 <u>first</u> 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 KNOW88 REFUSED99		
F29b. Has a doctor told you within the past [YEAR FILL] that you have angina? Yes		
F30. Has a doctor ever told you that you have coronary heart disease? Yes		

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 <u>first</u> told you have coronary heart disease? [AGE] DON'T KNOW88 REFUSED99
F31. Has a doctor ever told you that you had a heart attack, also called a myocardial infarction or "MI"? Yes
No
F31a. What month and year were you <u>first</u> 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
F31a.1. At what age were you <u>first</u> 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 KNOW88 REFUSED99
F31b. Has a doctor told you that you had a heart attack within the past [YEAR FILL]? Yes
F131. Have you ever had a heart procedure, for example, coronary bypass surgery, balloon angioplasty, or placement of stents? YES1
NO

[AGE]
DON'T KNOW 88
REFUSED99
F32. Has a doctor ever told you that you have congestive heart failure? Yes1
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 <u>first</u> told you have congestive heart failure?
/ [MM/YYYY] [GO TO QUESTION F33] DON'T KNOW 88/8888
REFUSED99/9999
F32a.1. At what age were you <u>first</u> told you have congestive heart failure?
[AGE]
DON'T KNOW88 REFUSED99
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 <u>first</u> told you had a stroke? / IMM/YYYYI IIF DATE ≥ APRII 2010 GO TO
/ [MM/YYYY] [IF DATE ≥ APRIL 2010 GO TO QUESTION F34; IF DATE < APRIL 2010 GO TO QUESTION F33b] DON'T KNOW 88/8888 REFUSED
NEI 03ED99/9999
F33a.1. At what age were you <u>first</u> 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 F34, IF AGE < AGE AT APRIL 2010 GO TO QUESTION F33b] DON'T KNOW 88
REFUSED99

F131a. At what age did you first have such a procedure?

FILL]?

F33b. Has a doctor told you that you had a stroke within the past [YEAR

Yes
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 <u>first</u> 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 <u>first</u> told you have cirrhosis of the liver? [AGE] DON'T KNOW 88 REFUSED99
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 <u>first</u> 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 <u>first</u> 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 DON'T KNOW 88/88 REFUSED99/9999	/YYYY] [GO TO QUESTION F37] 388
F36a.1. At what age were [AGE] DON'T KNOW 88 REFUSED 99	e you <u>first</u> told you have hepatitis?
disease? [INTERVIEWER: PRO	QUESTION F39]
chronic kidney disease?	
F37a.1. At what ag chronic kidney disc [AGE DON'T KNOW REFUSED	] 88
F38. INTENTIONALLY BLANK	
F39. Has a doctor ever told you Yes	QUESTION F40]
diabetes?	ear were you <u>first</u> told you have diabetes or sugar /YYYY] [GO TO QUESTION F39b] 888 999
F39a.1. At what ag diabetes? [AGE	ge were you <u>first</u> told you have diabetes or sugar

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DON'T KNOW88 REFUSED99
[IF PARTICIPANT IS FEMALE ONLY] F39b. Did you have diabetes only while you were pregnant? YES
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
CANCER OPTIONS

	0 0 = 1. 0 0	
BLADDER 10	LIVER22	SKIN (NON-MELANOMA)32
		SKIN (MELANOMA)25
BLOOD11	LUNG23	SKIN (DON'T KNOW; NOT
		SPECIFIED)33
BONE12	LYMPHOMA (NON	SOFT TISSUE (MUSCLE/
50112	HODGKIN'S)40	FAT)34
	LYMPHOMA (HODGKIN'S	
	DISEASE)24	
BRAIN13	LYMPHOMA (DON'T	STOMACH35
	KNOW; NOT SPECIFIED)	G1 G101 11 11 11 11 11 11 11 11 11 11 11 11
	42	
DDE ACT 44		TEOTIO (TEOTIOLII AD) 00
BREAST 14	MULTIPLE MYELOMA41	TESTIS (TESTICULAR) 36
CERVIX (CERVICAL) . 15	MOUTH/TONOUE/UD	THYROID37
COLON 16	MOUTH/TONGUE/LIP26	UTERUS (UTERINE) 38

ESOPHAGUS (ESOPHAGEAL)17	NERVOUS SYSTEM27	OTHER (SPECIFY)39			
GALLBLADDER 18	OVARY (OVARIAN)28				
KIDNEY19	PANCREAS (PANCREATIC)	DON'T KNOW77			
LARYNX/WINDPIPE 20 LEUKEMIA21	PROSTATE30 RECTUM (RECTAL)31	REFUSED99			
LLOIKLIVIIA21	REGIOW (REGIAE)31				
F47a. What kind of cancer was it? Type 1: [SELECT FROM CANCER OPTIONS]					
F47a.1. What mo	onth and year were you <u>first</u> tolo	d you have [FIRST			
TYPE OF CANC					
	[MM/YYYY] [GO TO QUES	TION F47a.2]			
	88/8888 99/9999				
REFUSED	99/9999				
F47a.1.a.	At what age were you first told	you have [FIRST			
TYPE OF	CANCER]?				
DONET KA	[AGE]				
	NOW88				
KEI OSEI	REFUSED99				
F47a.2. Has a doctor ever told that you have any other types of cancer?					
Yes	1				
No	-	-			
	8 [GO TO QUE				
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 <u>first</u> told you have [SECOND TYPE OF CANCER]?					
/ [MM/YYYY] [GO TO QUESTION F47b.2]					
DON'T KNOW88/8888					
REFUSED99/9999					
E47h 1 a. At what ago were you first told you have					
F47b.1.a. At what age were you <u>first</u> told you have [SECOND TYPE OF CANCER]?					
[AGE]					
	NOW88				

REFUSED......99

F47b.2. Has a doctor ever told you that you have any other types of cancer?
Yes
F47c. What kind of cancer was it? Type 3: [SELECT FROM CANCER OPTIONS]
F47c.1. What month and year were you <u>first</u> told you have [THIRD TYPE OF CANCER]? / [MM/YYYY] [GO TO QUESTION F48] DON'T KNOW88/8888 REFUSED99/9999
F47c.1.a. At what age were you <u>first</u> told you have [THIRD TYPE OF CANCER]? [AGE] DON'T KNOW88 REFUSED99
Health Symptoms  Now I'm going to ask you about your health during the <u>past thirtydays</u> . Please answer <i>All the time, Most of the time, Sometimes, Rarely, or Never</i> .
F48. How often have you had a cough? All the time
F49. How often have you had wheezing or whistling in your chest?  All the time

F50. How often have you had tightness in your chest?  All the time
F51. In the past thirty days, how often have you been short of breath? All the time
F52. How often have you had a stuffy, itchy or runny nose? [INTERVIEWER: READ ANSWER OPTIONS] All the time
F53. How often have you had watery or itchy eyes? All the time
F54. How often have you had burning eyes? All the time

F55. In the past thirty days, how often have you had burning in your nose, throat or lungs?  All the time
F56. How often have you had a sore throat? [INTERVIEWER: READ ANSWER OPTIONS]  All the time
F57. How often have you had a severe headache or migraine? All the time
F58. How often have you felt dizzy or lightheaded? All the time
F59. In the past thirty days, how often have you been nauseated?  All the time

F59a. How often have you experience vomiting?
All the time 1
Most of the time 2
Sometimes3
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
Sometimes3
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
Sometimes3
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
Sometimes3
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
Sometimes3
Rarely 4
Never 5
DON'T KNOW 8
REFLISED 9

ANSW All the Most o Somet Rarely Never DON'1	How often have you had blurred or distorted vision? [INTERVIEWER: READ VER OPTIONS]  etime
	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
	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
	F60c. How often did you stumble while walking? All the time
	F60d. How often did you experience heart palpitations (heart pounding or racing) at rest?  All the time

Rarely
F60e. In the past thirty days, how often did you sweat heavily for no reason?  All the time
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
F61. How often have you had lower back pain? All the time
F62. How often have you had excessive fatigue or extreme tiredness?  All the time
F63. In the past thirty days, how often have you had diarrhea or frequent bowel movements?  All the time 1

Neck...... 04 Chest..... 05 Stomach..... 06

REFUSED... 999

[F65e IS ASKED ONLY FOR THOSE WHO INDICATED THAT THEY WORKED

888

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?

ON THE OIL SPILL RESPONSE (E1 = 1)]

Days .......... 1 Weeks ....... 2 Months ...... 3 Years ....... 4 DON'T KNOW

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 No DON"		
	F66a. Were you hospitalized for any of these symptom(s) or illness(es), where hospitalized means admitted at least overnight?  Yes	
	F66b. Why were you hospitalized? [FREE TEXT FIELD] DON'T KNOW 8 REFUSED	
	F66c. When were you hospitalized the first time? MM/DD/YYYY [ENTER ALL OR PARTIAL DATE] DON'T KNOW	

#### **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 KNOW8	[GO TO QUESTION G2]
REFUSED9	[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
--------	--	---

Sometimes
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
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 G4aacute stress disorder? Yes
G4a.1. When were you first told?/ [MM/YYYY] [IF DATE IS 04/2010 OR LATER GO TC QUESTION G4b] DON'T KNOW 88 8888 REFUSED

[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 se FILL]? Yes No DON'T KNOW REFUSED	een a doctor or been treated for this in the past [YEAR 1 2 8 9
		ld you that you have anxiety or an anxiety disorder?
No DON"	T KNOW	2 [GO TO QUESTION G4d]8 [GO TO QUESTION G4d]9 [GO TO QUESTION G4d]
	G4b.1. When were/ QUESTION G4d] DON'T KNOW8 REFUSED	[MM/YYYY] [IF DATE IS 04/2010 OR LATER GO TO 88 8888
	G4b.2. Have you se FILL]? Yes No DON'T KNOW REFUSED	een a doctor or been treated for this in the past [YEAR]  1 2 8 9
		ld you that you have panic disorder?
No DON"	T KNOW	2 [GO TO QUESTION G4e]8 [GO TO QUESTION G4e]9 [GO TO QUESTION G4e]
	G4d.1. When were/ QUESTION G4e] DON'T KNOW8	[MM/YYYY] [IF DATE IS 04/2010 OR LATER GO TO 88 8888

	G4d.2. Have you s FILL]? Yes No DON'T KNOW REFUSED	een a doctor or been treated for this in the past [YEAR 1 2 8 9
G4e. Has a doctor ever told you that you have post-traumatic stress disorder? Yes		
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		
	G4e.2. Have you s FILL]? Yes No DON'T KNOW REFUSED	een a doctor or been treated for this in the past [YEAR 1 2 8 9
G5. Has a doctor ever told you that you have depression? Yes		
	G5b. Have you see FILL]? Yes No DON'T KNOW REFUSED	en a doctor or been treated for this in the past [YEAR]  1 2 8 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 Never2
Sometimes3
Fairly Often 4
Very Often5
DON'T KNOW8
REFUSED9
G7. In the last month, how often have you felt confident about your ability to
handle your personal problems?
Never1
Almost Never2
Sometimes3
Fairly Often4
Very Often5
DON'T KNOW8
REFUSED9
NEI 00ED9
G8. In the last month, how often have you felt that things were going your way?
Never1
Almost Never
Sometimes3
Fairly Often
Very Often 5 DON'T KNOW 8
REFUSED9
CO In the last month, how often have you falt difficulties were niling up as high
G9. In the last month, how often have you felt difficulties were piling up so high
that you could not overcome them?
Never
Almost Never
Sometimes3
Fairly Often
Very Often5
DON'T KNOW8
REFUSED9

# **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		
H2a. When is your due date?//[MM/DD/YYYY] DON'T KNOW 88 88 8888 REFUSED99 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?//		
H3b. What was the date of your most recent live or stillbirth?///[MM/DD/YYYY] DON'T KNOW88 88 8888 REFUSED99 99 9999		

H4. Have your menstrual periods stopped permanently?

YES	ON I]
H4a. Did your periods stop naturally, of chemotherapy? [INTERVIEWER NOTE: MEDICAL TR HORMONES, BIRTH CONTROL PILL MEASURES. THIS ONLY INCLUDES	EATMENT DOES NOT INCLUDE S OR OTHER TEMPORARY
Naturally	3
H4a1. [IF H4a = 2] Did you have Only your uterus removed? Your uterus plus 1 ovary removed? Your uterus plus 2 ovaries removed? Some other surgery? DON'T KNOW REFUSED	1 2 3 4 Specify:
H4b. How old were you when your per Age in years DON'T KNOW 88 REFUSED99	riods stopped?

## **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.

11. In your entire life, have you had at least 1 drink of any kind of alcohol, not counting

small tastes or sips?
Yes
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.]
2. About how old were you when you first started drinking, not counting small tastes or sips?
[_]
DON'T KNOW88
REFUSED99 [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
3. Have you had an alcoholic beverage in the past 12 months? YES
I3a. How old were you when you last drank alcohol?   _   _  AGE  DON'T KNOW88  REFUSED99 [GO TO QUESTION I9]

per year would you have an alcoholic beverage in a typical year?

13b. When you were drinking alcohol, how many days per week, per month, or

_   _  # DAYS PER WEEK
I3c. When you were drinking alcohol, about how many drinks would you have on the days that you drank?   _   _  # DRINKS / DAY  DON'T KNOW88  REFUSED99
I3d. When you were drinking alcohol, did you ever drink four or more alcoholic beverages in a row, in one sitting? Yes
I3d.1. How many times would this happen in a typical year?   _   _  # TIMES  PER WEEK
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
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 KNOW88 REFUSED99

<FILL "During the past 12 months," IF I5 < 4>

16. [During the past 12 months,] did you ever drink four or more alcoholic beverages in a row, in one sitting?
Yes1
No2 [GO TO QUESTION 17]
DON'T KNOW 8 [GO TO QUESTION 17]
REFUSED9 [GO TO QUESTION 17]
I6a. How many times has this happened in the past 12 months?   _   _  # TIMES  PER WEEK
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
8. On the days that you drank during the past 30 days, how many <b>drinks</b> 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 KNOW88
REFUSED99
l9. 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 KNOW88 REFUSED99
110. 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
REFUSED9

# **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]
Yes1
No2 [GO TO QUESTION J10]
DON'T KNOW 8 [GO TO QUESTION J10]
REFUSED9 [GO TO QUESTION J10]
J2. How old were you when you first started to smoke cigarettes fairly regularly?     AGE IN YEARS
NEVER SMOKED CIGARETTES REGULARLY777
DON'T KNOW
REFUSED999
J3. Do you now smoke cigarettes?
Every day1 [GO TO QUESTION J9]
Some days2
Not at all3 [GO TO QUESTION J6]
DON'T KNOW 8 [GO TO QUESTION J9]
REFUSED9 [GO TO QUESTION J10]
SOME DAYS SMOKER COLLECTION
J4. Have you <i>ever</i> smoked cigarettes every day for at least six months?
Yes1
No2
DON'T KNOW8
REFUSED9
J5. On how many of the past 30 days did you smoke cigarettes?
_  # DAYS [RANGE: 0 - 30]
DON'T KNOW88
REFUSED99 [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 KNOW88 [GO TO J10]
REFUSED99 [GO TO J10]

### FORMER SMOKER COLLECTION

J6. Have you <b>ever</b> smoked cigarettes <b>every day</b> for at least six months?
Yes1
No
DON'T KNOW8 [SKIP TO J7] REFUSED9 [SKIP TO J7]
KEFUSED9 [SKIF 10 37]
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 KNOW88
REFUSED99
J7. About how long has it been since you <i>completely</i> quit smoking cigarettes?  _ _  Units Days1
Weeks2
Months
Years4 DON'T KNOW 88
REFUSED99
THE GOLD
[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 KNOW88 [GO TO J10]
REFUSED99 [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 KNOW88
REFUSED99
Other Tobacco Use
J10. In your <i>entire life</i> , have you ever J10asmoked at least 50 cigars?
Yes1
No2
DON'T KNOW8
REFUSED9

	J10bsmoked a pipe at least 50 times? Yes
	J10cused snuff, such as Skoal®, Skoal Bandit® or Copenhagen® at least 20 times? Yes
	J10dused chewing tobacco, such as Redman®, Levi Garrett® or Beechnut® at least 20 times? Yes
Envir	onmental tobacco smoke
	Over the past two years, on average, how many regular smokers have you lived Do not count yourself if you smoke.  None
smok place	How many regular smokers do you currently live with? Do not count yourself if you e. [INTERVIEWER: If subject indicates that they currently live in more than one , ask "How many regular smokers, not counting yourself, are now living in the where you currently spend the most time?".]  None

J13. About how many hours or minutes per day are you exposed to <u>other</u> people's tobacco smoke? Include <u>all</u> 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.

\$     [G REFUSED 8888888	60 TO K2] 888
DON'T KNOW 99999999	
K1a. You may not be able to give us a	n exact figure for your total household
income, but can you tell me if this inco	•
Less than \$10,0001	
\$10,001 to \$20,0002	
\$20,001 to \$30,0003	
\$30,001 to \$40,0004	
\$40,001 to \$50,0005	
\$50,001 to \$60,0006	
\$60,001 to \$70,0007	
\$70,001 to \$80,0008	
\$80,001 to \$90,0009	
\$90,001 to \$100,00010	
\$100,001 to \$150,000 11	
\$150,001 to \$200,00012	
More than \$200,00113	
DON'T KNOW88	

K2. How many people, including yourself, were supported by this income? [VERIFY THAT PARTICIPANT HAS INCLUDED HIMSELF/HERSELF IN THE TOTAL NUMBER.]

|\_\_|\_| # PEOPLE

REFUSED ......99

<ASK ONLY IF K2 >1, ELSE GO TO K3> K2a. How many of these people were under 18 years old?

|\_\_\_| Units

Days .....1
Weeks .....2

	Months
	K4e. Did you work in this job during the oil spill? Yes
	K4f. Are you still working in this job? Yes
Yes No DON'	as this your longest held job?1 [GO TO QUESTION K6]2  F KNOW8  SED9
	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
	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
	K5c. What were your most important activities on this job in this business? [FREE TEXT FIELD] DUTIES DON'T KNOW
	K5d. About how long did you work at that job in this business?      Units  Days

Years4 DON'T KNOW888 REFUSED999		
K6. Did you have another job at the same time that you were working on the oil spill response?		
Yes		
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 KNOW8 REFUSED9		
K6b. What was your job title or what kind of work did you do? [FREE TEXT FIELD] TYPE OF WORK DON'T KNOW8 REFUSED9		
K6c. What were your most important activities on that job? [FREE TEXT FIELD] DUTIES DON'T KNOW8 REFUSED9		
K6d. About how long did you work for that company in that job?      Units Days		
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 WORKED7 [GO TO QUESTION K23]  DON'T KNOW8 [GO TO QUESTION K23]		

REFUSED9 [GO TO QUESTION K23]	
K7a. What kind of business or industry did you work in for the longest period time as a [LONGEST OCCUPATION]? [FREE TEXT FIELD] BUSINESS/INDUSTRY DON'T KNOW8 REFUSED9	of
K7b. What were your most important activities on this job in this business? [FREE TEXT FIELD] DUTIES DON'T KNOW	
K7c. About how long did you work at that job in this business?      Units Days	
[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	
K8a. What kind of business or industry did you work in? FREE TEXT FIELD] TYPE OF BUSINESS DON'T KNOW88 REFUSED99	
K8b. What was your job title or what kind of work did you do?	

	K8c. What were your most important activities on that job? [FREE TEXT FIELD] DUTIES DON'T KNOW8 REFUSED9
	K8d. About how long did you work for that company in that job?      Units Days
	K8e. Did you work in that job during the oil spill? Yes
	K8f. Are you still working in that job? Yes
Yes No DON'	as this your longest held job?1 [GO TO QUESTION K10]2 T KNOW8 ISED9
	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
	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 KNOW88 REFUSED99

[FREE DON'T	nat were your most importa TEXT FIELD] DUTIES KNOW8 SED9	ant activities on this job in	tnis business?
 Days Weeks Months Years DON'T	cout how long did you work   Units1	at that job in this busines	s?
response? Yes No	nave another job at the sam 1 2 [GO TO QU	ESTION K11]	king on the oil spill
REFUSED K10a. V	/8 [GO TO QU9 [GO TO QU9 [GO TO QU9 what kind of business or income the control of the	ESTION K11] dustry did you work in?	
QUEST SAME / QUEST [FREE DON'T	AS REPORTED IN K8a [PI FION K10d] AS REPORTED IN K9b [PI FION K10d] TEXT FIELD] TYPE OF BU KNOW8	PE IN RESPONSE FROM	
[FREE DON'T	What was your job title or w TEXT FIELD] TYPE OF WO KNOW8 SED9		0?
[FREE DON'T	Vhat were your most impor TEXT FIELD] DUTIES KNOW8 SED9	tant activities on that job?	
<u>                                    </u>	About how long did you wor _   Units 1	k for that company in that	job?

#### [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?

[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	s? 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 LEAVE2
LOOKING FOR WORK OR UNEMPLOYED3 [GO TO K22a]
RETIRED4 [GO TO K22a]
DISABLED, PERMANENTLY OR TEMPORARILY5 [GO TO K22a]
KEEPING HOUSE6 [GO TO K22a]
STUDENT7 [GO TO K22a]
OTHER8 K17a. Specify:
DON'T KNOW88 [GO TO K22a]
REFUSED99 [GO TO K22a]
1.21 002500 [00 10 1.224]
K18. What kind of business or industry do you work in?
[FREE TEXT FIELD] TYPE OF BUSINESS
DON'T KNOW88
REFUSED99
KEFUSED99
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?
K20. What are your most important activities on this job?
[FREE TEXT FIELD] DUTIES
DON'T KNOW 8
REFUSED 9
KOA Alas (I.a. Iana I.a. and I.a. I.a. I.a. I.a. I.a. I.a. I.a. I.a
K21. About how long have you worked for this company in this job?
Units
Days 1
Weeks 2
Months 3
Years4
DON'T KNOW 888
REFUSED 999
K22. Is this your longest held job?
Yes1 [GO TO QUESTION K23]
No2
DON'T KNOW 8
REFUSED9
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 WORKED7 [GO TO QUESTION K23]
DON'T KNOW8 [GO TO QUESTION K23]
•

REFUSED9 [GO TO QUESTION K23]
K22b. What kind of business or industry did you work in for the longest period o time as a [LONGEST OCCUPATION]?
[FREE TEXT FIELD] TYPE OF BUSINESS DON'T KNOW88 REFUSED99
K22c. What were your most important activities on this job in this business? [FREE TEXT FIELD] DUTIES DON'T KNOW
K22d. About how long did you work at that job in this business?      Units Days
Employment in Oil Industry
K23. Have you done oil spill clean-up other than for the Deepwater Horizon Disaster? Yes
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
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 KNOW8 REFUSED9
K24b. What were your most important activities on this job? [FREE TEXT FIELD] DUTIES

DON'T KNOW8 [GO TO K28] REFUSED9 [GO TO K28]
K27a. What branch of the service did you serve in?  Army
[if K27a=7, else K27b] K27a1. Did you work on the Deepwater Horizon clean-up response as part of a National Guard deployment? Yes
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 KNOW8 REFUSED9

Probe if the participant asl Parachute Duty; Flight De Toxic Fuels (or Propellants Bacteria) Lab Duty; Chem	
Yes No DON'T KNOW REFUSED	2 [GO TO K27e] 8 [GO TO K27e]
CHEMICAL MUNITIONS. DANGEROUS VIRUSES OF THE STREES OF TOXIC FUELS (OR PROFICIOLES DUTY)	(OR BACTERIA) LAB DUTY 23 S DUTY
K27d1. When did y Earliest://_/ Latest://_/ DON'T KNOW REFUSED	_ [YYYY] 8
pay)? [INTERVIEWER: P to receive combat pay if the mines; on duty in a foreign	
NoDON'T KNOWREFUSED	8 [GO TO K28]
military conflicts such as In Korea, etc.] [SELECT ALL	
AFGHANISTAN GULF WAR / PERSIAN G	1 ULF WAR / DESERT STORM       2

IRAQ3 VIETNAM4
OTHER, SPECIFY5 [FREE TEXT FIELD]
K27f1. When did you receive combat pay?
Earliest:// [YYYY]
Latest:// [YYYY]
DON'T KNOW8
REFUSED9

# **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	t			
other surfaces	1	2	8	9
K28k. Asphalt, tar or other tar-like materials	1	2	8	9
K28I. Diesel engine exhaust	1	2	8	9
K28m. Gasoline engine exhaust	1	2	8	9
K28n. Pesticides, insecticides, herbicides, or fungicid	es 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.

(2. Were you forced to leave your residence because of Hurricane Isaac?
'ES1 NO
OON'T KNOW 8 REFUSED 9 [GO TO QUESTION X7]
(3. Have you returned to your prior residence or are you in a different residence?
Different residence2 [GO TO QUESTION X5]
OON'T KNOW REFUSED9 [GO TO QUESTION X7]
X3a1. For how many days, weeks, or months were you unable to return? II UNITS  DAYS 1  WEEKS 2  MONTHS 3  DON'T KNOW 88  REFUSED 99
[GO TO QUESTION X7]
(5. Do you expect to return to your prior residence, to stay where you are now, or to nove somewhere else? Return to prior residence1 Stay in current residence2 [GO TO QUESTION X5b1] Move to new residence3 [GO TO QUESTION X5c1] DON'T KNOW
X5a3. What has prevented you from moving back already?  Not allowed

[GO TO QUESTION X7]

X7. Did you experience significant property damage or financial hardship as a result of Hurricane Isaac?

X8. Did you experience the loss of a loved one or a serious injury to you or a loved one during the Hurricane?

# Part 3: Scripts – Post-Telephone Enrollment Questionnaire (Estimated Burden: 2 minutes)

## **SECTION L: Wrap-up and Scheduling**

# **SECTION L.0: Address during the spill**

o 2
ON'T KNOW 8 [GO TO SECTION L.1]
EFUSED9 [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]
L0.1d. Apartment number:[FREE TEXT FIELD]  L0.1e. City:[FREE TEXT FIELD]  L0.1f. State:[STATE DROP DOWN BOX]
L0.1f. State:[STATE DROP DOWN BOX]
DON'T KNOW8 REFUSED9
KEI OOLD
ECTION L.1: SSN, Addresses and Transition
.1.1. What is your social security number? [PROBE: Your social security number will elp us keep in touch with you over the years and allow us to link to the correct records
bout your health. Reporting your social security number is voluntary. We will not share our social security number with others and we will do everything possible to keep it
bout your health. Reporting your social security number is voluntary. We will not share our social security number with others and we will do everything possible to keep it rivate.]
bout your health. Reporting your social security number is voluntary. We will not share our social security number with others and we will do everything possible to keep it rivate.]
bout your health. Reporting your social security number is voluntary. We will not share our social security number with others and we will do everything possible to keep it rivate.]  _/////// [GO TO SECTION L.1.0]  ON'T HAVEHHH HH HHHHH [GO TO SECTION L.1.0] ON'T KNOWKKK KK KKKKK
bout your health. Reporting your social security number is voluntary. We will not share our social security number with others and we will do everything possible to keep it rivate.] _//_////// [GO TO SECTION L.1.0] ON'T HAVEHHH HH HHHHH [GO TO SECTION L.1.0]
bout your health. Reporting your social security number is voluntary. We will not share our social security number with others and we will do everything possible to keep it rivate.]  _/////// [GO TO SECTION L.1.0]  ON'T HAVEHHH HH HHHHH [GO TO SECTION L.1.0] ON'T KNOWKKK KK KKKKK

L1.4. What is your email address? [INTERVIEWER: READ BACK FOR ACCURAC) [FREE TEXT FIELD] EMAIL DON'T HAVE7 DON'T KNOW 8 REFUSED9	Y]
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	
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 TEN DIGIT # DON'T KNOW8 REFUSED9	
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 react 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 KNOW8 [GO TO NEXT SECTION]  REFUSED9 [GO TO NEXT SECTION]	h
L.1.0.1.1. b. Name [FREE TEXT FIELD] REFUSED9 [GO TO NEXT SECTION]	
L.1.0.1.1. c. Phone Number I_I_I_I_I_I_I_I_I TEN DIGIT # [INTERVIEWE ENTER PHONE NUMBER IN THIS FORMAT: 123-456-7890]  DON'T KNOW8  REFUSED9  L.1.0.1.1.c.1 Is this number a cell phone?  Yes1  No2	:R:

DON'T KNOW 3 REFUSED....4

L.1.0.1.1. d. Street Address L.1.0.1.1d.1. House number: L.1.0.1.1d.2. Street name: L.1.0.1.1d.3. Apartment number: L.1.0.1.1d.4. City:	[FREE TEXT FIELD] FREE TEXT FIELD]
L.1.0.1.1. d.1.a. Is this also their mailing address? Yes	
L.1.0.1.1. d.2.a. What is their mailing address?	IEDEE
L.1.0.1.1. d.2.a.1. House number: TEXT FIELD]	[FREE
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: FIELD]	[FREE TEXT
L.1.0.1.1. d.2.a.5. State:[STATE [L.1.0.1.1. d.2.a.6. Zip Code://// DON'T KNOW8 [GO TO NEXT SECTION] REFUSED9 [GO TO NEXT SECTION]	DROP DOWN BOX]
SECTION L.1.00: Spouse Study Notification [ONLY IF RESPONDENT INDICATES THAT THEY ARE MARRIE A PARTNER (D6=1 or 6):]	ED OR LIVING WITH
L.1.00.1. We would also like to mail some information about a stud oil spill cleanup workers to your spouse or partner. What is your spouse or partner.	
name?  FIRST NAME[FREE TEXT FIELD]  LAST NAME[FREE TEXT FIELD]  SUFFIX[FREE TEXT FIELD]	
SUFFIX[FREE TEXT FIELD]	
DON'T KNOW 8 REFUSED9	

[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.]

Yes	ailed to the same address that you currently live?1 [SKIP TO SECTION L.1.00.3]
	2 8 [SKIP TO SECTION L.1.00.3] 9 [SKIP TO SECTION L.1.00.3]
L.1.00.2.a. What is their mailing a L.1.00.2.a.1. House number: L.1.00.2.a.2. Street name: L.1.00.2.a.3. Apartment number: L.1.00.2.a.4. City: L.1.00.2.a.5. State: L.1.00.2.a.6. Zip Code://	address?[FREE TEXT FIELD][FREE TEXT FIELD][FREE TEXT FIELD][FREE TEXT FIELD][STATE DROP DOWN BOX]//
L.1.00.3 Is your phone number to Yes	
DON'T KNOW	8 [SKIP TO SECTION L.1.a]
L.1.00.3.a.1 Is this Yes1 No2 DON'T KNOW REFUSED4	number a cell phone?
L.1.00.3a. What is the bes	st number to reach your spouse or partner?
DON'T KNOW REFUSED	
L.1.00.3a.1a. Is this Yes1 No2	s number a cell phone?
DON'T KNOW REFUSED4	3

#### SECTION L.1.a.

These are all of the study questions I have for you.

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.51

#### **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

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.

[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.

[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 APPOINTMENT1	
SOFT APPOINTMENT2	

[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 addresses	
REFUSED 9 [GO TO END SCRIPT AT	F 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:	<u>-</u>

L.7.f.5. State:	[STATE DROP DOWN BOX
L.7.f.6. Zip Code://	
DON'T KNOW8	
REFUSED9	

[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 <u>EXACTLY</u>, 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 <u>another</u> location?".]

=	- 1	
BP SITE 1	<sup>-</sup> 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 <u>main gate</u> 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. Q2c.	Did you	ou indoors or outdoors? smell an ammonia odor?	Indoors Yes	Outdoors No	DK DK	R R
Q2d.	stay ind	shelter in place, meaning go or oors with doors and windows and the ventilation system off?	Yes	No	DK	R
Q2e.	Did you	evacuate?	Yes	No [GO TO Q3]	DK [GO TO Q3]	R
	Q2e.1.	Approximately when did you	Time:		DK	
		evacuate?	[GO TO Q3]		[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			DON'T		If "Yes", about how long was it before the symptom went
release, did you have?	Yes	No	KNOW	REFUSED	away?
a. irritation, pain, or burning of your eyes	Υ	N	DK	R	
b. burning of your nose, throat or					
lungs	Υ	Ν	DK	R	
c. headache	Υ	N	DK	R	
d. dizziness or lightheadedness	Υ	N	DK	R	
e. loss of consciousness or fainting	Υ	N	DK	R	
f. ringing of the ears	Υ	N	DK	R	
g. difficulty breathing or feeling out-of- breath	Υ	N	DK	R	
h. coughing	Υ	N	DK	R	

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i. increased congestion or phlegm	Υ	Ν	DK	R	
j. wheezing in chest	Υ	Ν	DK	R	
k. chest tightness or chest pain or					
angina	Υ	Ν	DK	R	
I. nausea	Υ	N	DK	R	
m. vomiting	Υ	N	DK	R	
n. irritation, pain, or burning of skin	Υ	N	DK	R	
o. skin rash	Υ	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 TH	IE 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.