

Attachment 3.6

Anniston Community Health Survey: Follow-up Study and Dioxin Analyses

Reminder Telephone Script

HELLO, my name is _____. I am calling on behalf of the Calhoun County Health Department. May I speak to _____ [name]?

[IF NOT CORRECT PERSON] Please let me know the best time we can reach [name]. _____ (day) _____ (time). I will call back then. _____ Thank you. I will call _____ [name] again.

[IF CORRECT PERSON] I am calling to remind you that you have an appointment scheduled on _____ (date) at _____ (time) to participate in the Anniston Follow-up Study. Are you taking any medication for diabetes?

[IF NOT ON DIABETES MEDICATION] Please remember not to eat for at least 8 hours before your appointment. You may drink water during this time. *[GO TO CLOSING REMARKS]*

[IF ON DIABETES MEDICATION] Because you take diabetes medication, we want to give special instructions about your appointment. If you can fast and take your medication without eating, please do. If you cannot fast, please eat, and take your medications as usual. Please eat only fat-free or low-fat food, if possible. Please write down the time and the foods you eat. You may drink water during this time. *[GO TO CLOSING REMARKS]*

[CLOSING REMARKS] Don't forget to bring all your medications with you to your appointment. Please let us know as soon as possible if you have to cancel your appointment. You can call toll-free at (855) 822-1778 if you have to cancel your appointment. Thank you for being part of our study.

Note: This script cannot be used as a voicemail message.