

Appendix

Lung Cancer Screening Survey

Hello, my name is _____. I am calling for the Medical University of South Carolina and we are gathering information about health attitudes of residents of the United States.

Is this _____?

If No, thank you very much but I must have misdialed. It is possible that your number may be called at another time. Good-bye.

If Yes, continue

How many people live in your household that are 40 years of age or more?

If 0, Thank you, but we are only interviewing persons 40 years old and older. Good-bye.

If greater than 40, continue

May I speak to the person of those 40 and older who most recently had a birthday?

If already speaking to selected person, continue with: You have been randomly selected to be interviewed and I'd like to ask some questions about your health and health practices. This interview will take less than 5 minutes and all answers will be kept confidential. You don't have to answer any questions you don't want to and you can end this interview at any time. If you have any questions about this survey I will be happy to give you a telephone number you can call to get more information [Dr Zoller @ 1-843-766-5777] Is now a good time to talk?

If correct person must be summoned, continue with: Hello, my name is _____ . I am calling for the Medical University of South Carolina and we are gathering information about health attitudes of residents of the United States. You have been randomly selected to be interviewed and I'd like to ask some questions about your health and health practices. This interview will take less than 5 minutes and all answers will be kept confidential. You don't have to answer any questions you don't want to and you can end this interview at any time. If you have any questions about this survey I will be happy to give you a telephone number you can call to get more information [Dr Zoller @ 1-843-766-5777] Is now a good time to talk?

If person says now is not a good time to talk, ask when you call back.

1. How old were you on your last birthday? _____

2. Gender [do not ask]
 - a) Male
 - b) Female

3. In general, compared to other people your age, would you say that your health is
 - a) Excellent
 - b) Very good
 - c) Good
 - d) Fair
 - e) Poor

4. Has a doctor ever told you that you had any cancer?
 - a) Yes —————→ What kind of cancer?

 - b) No

5. Have you smoked over 100 ci
 - a) Yes
 - b) No [skip to Question 9]

6. Do you currently smoke cigarettes?
 - a) Yes
 - b) No [skip to Question 9]

7. On average, how many cigarettes do you now smoke per day?

_____ cigarettes

8. For about how many years have you smoked this amount?

_____ years

9. Is there a particular clinic, health center, doctor's office or other place that you usually go to if you are sick or need advice about your health?
 - a) Yes
 - b) No

10. What kind of place is it?
 - a) Doctor's office, group practice or HMO
 - b) A rural health clinic or health department
 - c) Hospital Emergency Room
 - d) A clinic in a hospital
 - e) Other

11. Approximately how far away (in miles) do you live from this place?

_____ miles

12. How long (in minutes), on average, does it take you to get to this place?

_____ minutes

13. Does any health impairment keep you from working at a job or business?

- a) Yes
- b) No

14. Does any health impairment limit in any way the kind or amount of work you could do?

- a) Yes
- b) No

15. Has a doctor or other health professional ever told you that you are at high risk for lung cancer?

- a) Yes
- b) No

16. Do you think that you are at risk for lung cancer?

- a) Yes
- b) No

17. If cancer of the lung is detected early, what is the person's chance of surviving?

- a) Good
- b) Fair
- c) Poor
- d) Don't know

A special new type of x-ray/CAT scan has been developed which can find small cancers in the lung. If this scan finds cancer when it is small doctors believe that chances of curing the cancer is much better.

18. If you were told that you were at risk for lung cancer, would you consider having this scan done to determine the presence of lung cancer?

- a) Yes
- b) No

19. How important is cost to you in making a decision to have this scan?

- a) Very important
- b) Important
- c) Neutral

- d) Not important
- e) Very unimportant

20. How important is convenience to you in making a decision to have this scan?

- a) Very important
- b) Important
- c) Neutral
- d) Not important
- e) Very unimportant

21. How important is the risk of disease to you in making a decision to have this scan?

- a) Very important
- b) Important
- c) Neutral
- d) Not important
- e) Very unimportant

22. How important is the accuracy of the test to you in making a decision to have this scan?

- a) Very important
- b) Important
- c) Neutral
- d) Not important
- e) Very unimportant

23. Would you be willing to pay \$AMT A out of your pocket to have this scan?

- a) Yes
- b) No

Would you be willing to pay \$AMT B out of your pocket to have this scan?

Would you be willing to pay \$AMT C out of your pocket to have this scan?

- a) Yes
- b) No

24. If a doctor told you that you

- a) Yes
- b) No

25. What is your race? Would you say

- a) American Indian or Alaskan Native
- b) Asian or Pacific Islander
- c) Black or African-American
- d) White
- e) Another race

26. What is your marital status?

- a) Married
- b) Single
- c) Divorced

- d) Widowed
- e) Separated

27. What is the highest level of education you have completed?

- a) Did not complete high school
- b) Completed high school
- c) Some college or technical school
- d) Completed college

28. What type of health coverage do you use to pay for most of your medical care? Is it coverage through

- a) Your employer
- b) Someone else's employer
- c) A plan that you or someone else buys on your own
- d) Medicare
- e) Medicaid or Medical Assistance
- f) The military, CHAMPUS or the VA
- g) The Indian Health Service
- h) Some other source
- i) None
- j) Don't know/Not sure
- k) Refused

29. Is that an HMO type insurance plan, or a traditional (fee-for-service) insurance plan?

- a) HMO
- b) Traditional
- c) Don't know
- d) Refused

30. What is your work status?

- a) Employed full-time
- b) Employed part-time
- c) Home maker
- d) In school
- e) Retired from formal employment
- f) Not working, but looking for a job
- g) Not working, but not looking for a job
- h) Don't know

31. Are you the person in your household who owns or rents your home?"

- a) Yes
- b) No
- c) Don't know
- d) Refused

32. What is your total annual household income?

- a) \$0 - \$19,999
- b) \$20,000 to \$29,999
- c) \$30,000 to \$39,999
- d) \$40,000 to \$59,999
- e) \$60,000 to \$79,999
- f) \$80,000 to \$99,999
- g) \$100,000 or greater
- h) Refused

33. Are you the primary income source for your household?

- a) Yes
- b) No
- c) Don't know
- d) Refused

That was my last question. Thank you for your participation in our survey. Your answers will be kept confidential and combined with the answers of others to determine more about the health practices of the United States residents. Good-bye.