Appendix I Biomedical Fieldworker (Stage 2) overview and documents

I1 Overview of information collected during the biomedical fieldworker (health visit) stage

Table I.1 summarises the information collected during the biomedical fieldworker stage.

Table I.1: Information collected during the health visit

Measurement or procedure	Participant
Details of prescribed medications	All ages
Infant length measurements	Aged 1.5-2 years
Waist and hip circumferences	Aged 11 years and over
Demispan	Aged 65 and over or those 16-64 years old with unreliable height measurement
Non-fasting blood sampling	All aged 1.5-3 years and those 4 years and over not willing to fast3
Fasting blood sampling	Aged 4 years if not excluded from fasting
Spot urine	Aged 4 years and remote interviews

National Diet and Nutrition Survey (NDNS)

N16198 Year 15 Mainstage

Program Documentation

Biomedical Fieldworker Schedule

This 'paper version of the program' has been created to indicate the wording and content of the health questionnaire.

• Instructions for the biomedical fieldworker are given in capital letters, and questions the biomedical fieldworker is to ask the participant are given as normal text.

• Items which appear in the actual program but which have been excluded here for clarity include: Repetition of participant's name on each question; Checks on the accuracy of answer codes in relation to each other; Prompts for back-coding during the edit process.

Contents:

IF (Method=Val) THEN
BIValConf
BIOMEDICAL FIELDWORKER: IS THE BLOOD VALIDATION STUDY STILL ONGOING?
  1 Yes
  2 No

OpenDisp
Date of 1st interviewer visit: **(DD/MM/YYYY)**

Telephone number(s): **(Phone numer) - (Name), (Phone number) - (Name), (Phone number) - (Name)**

Below are the people who have been recorded by the interviewer.

No.	Name	Sex	Age	DoB	Nurse	Demispan
(Participant number)	(Name)	(M/F)	(Age)	(Date)	(Yes/No/Unsure/Ineligible)	(Yes/No)
(Participant number)	(Name)	(M/F)	(Age)	(Date)	(Yes/No/Unsure/Ineligible)	(Yes/No)
(Participant number)	(Name)	(M/F)	(Age)	(Date)	(Yes/No/Unsure/Ineligible)	(Yes/No)

IF (Method = Val) AND (BIValConf=Yes)THEN
Reminder: This point is included in the Blood Validation Study (remember, if the blood samples are from 1.5-15 years old, the blood sample delivery method is: <b>ONLY<b> Posted cool box)

IF (Method = PO) or (((Method = Val) AND (BIValConf=No)) THEN
Reminder: The blood sample delivery method is: **Posted cool box.**

Press <1> and <Enter> to see information left for you by the interviewer.

DispCont
INTERVIEWERS WERE ASKED TO RECORD ANY REACTION PARTICIPANT(S) GAVE TO MENTION OF THE BLOOD SAMPLE. ANY RELEVANT INFORMATION WILL BE PROVIDED HERE. N/A MEANS THAT THE INTERVIEWER DID NOT RECORD ANY DETAIL.

(Participants number)	(Participants name)	(Response to health visit)
(Participants number)	(Participants name)	(Response to health visit)
(Participants number)	(Participants name)	(Response to health visit)

Parents:
(Parent first name)   (Relationship)
(Parent first name)   (Relationship)

{IF P3 participant AND AgeOf < 16}
The full name name of the parent/guardian who gave consent for [P3 firstname] to take part in the interview is: (Spare4[P3])

{IF P4 participant AND AgeOf < 16}
The full name name of the parent/guardian who gave consent for [P4 first name] to take part in the interview is: (Spare4[P4])

Press <1> and <Enter> to see information left for you by the interviewer.

DispInfo
Address information: **(Interviewer notes on address)**

Availability information: **(Interviewer notes on availability)**

{IF Method=F2F: "
Spot Urine Kit left with (particpant 1 name) by interviewer. Yes/No
Spot Urine Kit left with (particpant 2 name) by interviewer. Yes/No
Spot Urine Kit left with (particpant 3 name) by interviewer. Yes/No
Spot Urine Kit left with (particpant 4 name) by interviewer. Yes/No "}

{IF Method=Remote: "
The household had a remote interview at stage 1 and the participant(s) were therefore not asked to provide a urine sample. CAPI will ask you to introduce the spot urine sample for each participant and see if they are willing to be left with a kit and post it back themselves. This will be routed to following the blood sample module."}

Press <Ctrl Enter> to select a biomedical fieldworker schedule for the person you want to interview, or to quit this form.

BIOMEDICAL FIELDWORKER SCHEDULE

IF (participant refused health visit) THEN
RefInfo
BIOMEDICAL FIELDWORKER:(Name) is recorded as having refused a health visit.
Please check if he/she has changed his/her mind."
1   Change "Yes, now agrees to health visit",
2   Still   "No, still refuses health visit"

IF (Participant agreed/unsure health visit) OR (RefInfo = Change) THEN
Info
BIOMEDICAL FIELDWORKER: You are in the Biomedical Fieldworker Schedule for...
  Person   *(Person number)*
  Name   *(Participant name)*
  Age   *(Age)* (at date of 1st Interviewer visit – (date))
  DOB   *(DD/MM/YYYY)*
  Sex   *(Participant sex)*
  Demispan   *(Whether demispan measurements required or n/a)*
  MonthAge/WeekAge (Displayed if HHage < 2)

> **IF (Participant = Unsure to health visit)**
> BIOMEDICAL FIELDWORKER: THIS PARTICIPANT WAS UNSURE ABOUT THE
> HEALTH VISIT WHEN ASKED BY THE INTERVIEWER.
>
> **IF (ReInfo = Change) THEN**
> BIOMEDICAL FIELDWORKER: THIS PARTICIPANT REFUSED THE HEALTH VISIT
> WHEN ASKED BY THE INTERVIEWER BUT HAS NOW AGREED.
>
> **IF (Participant + Unsure to eligibility)**
> BIOMEDICAL FIELDWORKER: THIS PARTICIPANT WAS UNSURE WHETHER
> THEY WOULD BE ELIGIBILE TO GIVE A BLOOD SAMPLE.

IF THE PARTICIPANT (FOLLOWING YOUR INITIAL TELEPHONE CONTACT) IS
INELIGIBLE TO GIVE A BLOOD SAMPLE, DO NOT PROCEED WITH THE REST OF THE
INTERVIEW

1   Yes   "Yes, I will do the interview now",
2   No   "No, I will not be able to do this interview"

InfoS
Safety copy of Info
1   Yes   "Yes, I will do the interview now",
2   No   "No, I will not be able to do this interview"

IF (InfoS = Yes) THEN
StrtNur
Start time of the interview
: TIMETYPE

MachDate

Automatically recorded date of interview
: DATETYPE

NEndDate
Date at end of interview
: DATETYPE

DateOK
BIOMEDICAL FIELDWORKER : Today's date according to the laptop is *(Date)*.
Is this the correct date?
1 Yes
2 No

IF (DateOK = No) THEN
NurDate
BIOMEDICAL FIELDWORKER: Enter the date of this interview
: DATETYPE

NDoBD
Can I just check your date of birth?
BIOMEDICAL FIELDWORKER : Enter day, month and year of (*participant's name*)'s date of
birth separately.
Enter the **day** here.
: 1…31

NDoBM
BIOMEDICAL FIELDWORKER : Enter the code for the **month** of (*participant's name*)'s date
of birth.
1 January
2 February
3 March
4 April
5 May
6 June
7 July
8 August
9 September
10 October
11 November
12 December

NDoBY
BIOMEDICAL FIELDWORKER: Enter the **year** of (*participant's name*)'s date of birth.
: 1890..2014

NDoB
Date of birth (derived)
: DATETYPE

IF (NDoB <> RDoB) THEN
DoBDisc
BIOMEDICAL FIELDWORKER: Please explain the difference between date of birth the
Interviewer recorded (Date of birth of participant) and date of birth you have just recorded
(Date of birth derived).

:OPEN

HHAge
Age of participant based on Biomedical Fieldworker entered date of birth and date at time of household interview.
: 0..120

ConfAge
: 0..120

IF (Age ≤ 15) THEN
CParInt
BIOMEDICAL FIELDWORKER: A child can **only** be interviewed with the permission of, and in the presence of, their parent or a person who has (permanent) legal parental responsibility *(specify names), "*parent".
No measurements should be carried out without the agreement of both the parent **and** the child.
N.B Written child assent, where appropriate, should also be sought from children who are able to give it.
Press <1> and <Enter> to continue.
1   Continue

InfSH
Have you read and understood the (*parent/guardian/11+*) biomedical fieldworker information sheet and have I answered any questions you may have?
1   Yes   "Read and understood info sheet",
2   No   "Not read or understood info sheet"

If (InfoSh=Yes)
Code01
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.**
BIOMEDICAL FIELDWORKER: ASK PARTICIPANT/PARENT/ GUARDIAN TO INITIAL (OR TICK) **STATEMENT 1** BOX IN THE CONSENTS' SECTION IN THE CONSENT BOOKLET.
- MAKE SURE YOU USE THE CORRECT AGE CONSENT FORM.
- MAKE SURE PARTICIPANT'S NAME IS FILLED IN IN THE CONSENT BOOKLET.
- ASK PARTICIPANT/ PARENT/ GUARDIAN TO SIGN AND DATE BENEATH THE STATEMENT IN THE CONSENT BOOKLET.
ASK PARENT/GUARDIAN/PARTICIPANT TO CIRCLE **CONSENT CODE 01** AT QUESTION 8 ON FRONT OF THE CONSENT BOOKLET.

BIOMEDICAL FIELDWORKER: DO NOT TAKE CONSENT BOOKLET BACK.

Press <1> and <Enter> to continue,
1   Continue

If (InfSh=No)
SOFT CHECK BIOMEDICAL FIELDWORKER: Please double-check participant's willingness to take part in the visit.
Code02
BIOMEDICAL FIELDWORKER: CIRCLE **CONSENT CODE 02** AT QUESTION 8 ON FRONT OF THE CONSENT BOOKLET.

Press <1> and <Enter> to continue.

1	Continue

IF (InfSh=Yes) THEN
WDraw
BIOMEDICAL FIELDWORKER: Are you aware your/ your child's participation is voluntary and that you/ they can withdraw at any time?"

1	Yes	"I understand voluntary and can withdraw",
2	No	"I don't understand voluntary and can withdraw

If (WDraw=Yes)
Code03
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.**
BIOMEDICAL FIELDWORKER: ASK PARTICIPANT/ PARENT/ GUARDIAN TO INITIAL (OR TICK) **STATEMENT 2** BOX IN THE CONSENTS SECTION IN THE CONSENT BOOKLET .
- MAKE SURE YOU USE THE CORRECT AGE CONSENT FORM.
- MAKE SURE PARTICIPANT'S NAME IS FILLED IN IN THE CONSENT BOOKLET.
- ASK PARTICIPANT / PARENT/ GUARDIAN TO SIGN AND DATE AT BENEATH THE STATEMENT IN THE CONSENT BOOKLET.
- ASK PARENT/GUARDIAN/PARTICIPANT TO CIRCLE **CONSENT CODE 03** AT QUESTION 8 ON FRONT OF THE CONSENT BOOKLET.
Press <1> and <Enter> to continue.

1	Continue

IF (WDraw=No)
SOFT CHECK- BIOMEDICAL FIELDWORKER: Please double-check participant's willingness to take part in the visit.
Code04
BIOMEDICAL FIELDWORKER: ASK THE PARTICIPANT TO RETURN THE CONSENT BOOKLET TO YOU, FOLLOWING NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.
CIRCLE **CONSENT CODE 04** AT QUESTION 8 ON FRONT OF THE CONSENT BOOKLET.
Press <1> and <Enter> to continue.

1	Continue

IF (WDraw=Yes) AND (HHAge IN (5..15) THEN
ChAss
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.**
BIOMEDICAL FIELDWORKER: GO THROUGH THE CHILD ASSENT FORM.
IF POSSIBLE AND CHILD AGREES, ASK THE CHILD TO COMPLETE (CIRCLING EACH STATEMENT), SIGN AND DATE THE FORM.
YOU AS THE BIOMEDICAL FIELDWORKER MUST ALSO SIGN THE FORM.
HAS CHILD ASSENT BEEN GIVEN?

1	Yes
2	No

If (ChAss=No)
ChAssN
BIOMEDICAL FIELDWORKER: WHY HAS CHILD ASSENT NOT BEEN GIVEN?
BECAUSE THE PARENT / LEGAL GUARDIAN HAS CONSENTED TO THEIR CHILD'S PARTICIPATION YOU CAN STILL CONTINUE WITH THIS VISIT AS LONG AS THE CHILD HAS INDICATED THEIR AGREEMENT.
1   Yng   "Child too young to read and/or write",
2   Und   "Child too young to understand the study or their participation",
3   Other   "Other answer

IF (ChAssN=Other)
ChAssNO
BIOMEDICAL FIELDWORKER: Please state other reason why child assent has not been given."
:OPEN

IF (Sex=Female) AND (Age = 16- 49) THEN
PregNTJ
Can I check, are you pregnant or breastfeeding at the moment?
1 Yes
2 No

IF (Sex = Female) AND (Age = 10 – 15) THEN
UPreg
BIOMEDICAL FIELDWORKER: HAS THE PARTICIPANT (OR HER PARENT/ GUARDIAN) TOLD YOU THAT SHE IS PREGNANT OR BREASTFEEDING?
Do **not** ask for this information – only code whether or not it has been volunteered.

1   Pregnant – Yes told me she is pregnant/ breastfeeding
2   NotTold – No **not** told me she is pregnant/ breastfeeding

IF PregNTJ = Yes OR UPreg = Pregnant THEN NCPregJ = Pregnant (Computed)
ELSE NCPregJ = NotPreg (Computed)

IF (PregNTJ= Yes) OR (UPreg = Pregnant) THEN
PregMes
BIOMEDICAL FIELDWORKER: Participant is pregnant or breastfeeding. No measurements to be done.
Press <1> and <Enter> to continue.
     1   Continue

IF (NCPregJ = NotPreg) THEN
HlthCh
(Can I just check,) have there been any changes to your/your child's general health since you/he/she were/was visited by the interviewer?
1 Yes
2 No

IF (HlthCh = Yes) THEN
HlthChWh
BIOMEDICAL FIELDWORKER: PLEASE RECORD DETAILS OF THE PARTICIPANT'S CHANGE IN GENERAL HEALTH.
: OPEN

IF (NCPregJ = NotPreg) THEN
MedCNJD

Are /is you/(*child's name*) taking or using any medicines, pills, syrups, ointments, puffers or injections prescribed for you/ (him/her) by a doctor or a biomedical fieldworker?
BIOMEDICAL FIELDWORKER: INCLUDE DIETARY SUPPLEMENTS AS LONG AS PRESCRIBED. MEDICINES SHOULD BE BEING TAKEN NOW, OR BE CURRENT PRESCRIPTIONS FOR USE 'AS REQUIRED.'
1 Yes
2 No

IF (MedCNJD = Yes) THEN
MedIntro

Could I take down the names of the medicines, including pills, syrups, ointments, puffers or injections, prescribed for you/(*child's name*) by a doctor?
Press <1> and <Enter> to continue.
1   Continue

IF (MedCNJD = Yes) THEN routed to "Prescribed Medication"
IF (MedCNJD = Yes)
DrCod1
BIOMEDICAL FIELDWORKER:
To do the drug coding now, press <Ctrl Enter>, select **Drug_Coding: participant name** with the highlight bar and press <Enter>.

Else, press 1 and <Enter> to continue
1   Continue

IF (Age >=8) AND ((BSWill = No) OR (ClotB = Yes or NONRESPONSE) OR (Fit = Yes OR NONRESPONSE) OR (Age = 2-3) OR (GuardCon = No) OR ((AmetopUse= Yes) AND Allergy = Yes) AND (NoAmetop = No)) OR (CBSConst = No)) THEN
NoCodes
BIOMEDICAL FIELDWORKER: NO BLOOD TO BE TAKEN.
BIOMEDICAL FIELDWORKER: ASK THE PARTICIPANT TO RETURN THE CONSENT BOOKLET TO YOU, FOLLOWING NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.
CIRCLE **CONSENT CODES 06, 08, 10, 12, 14** AT QUESTION 8 ON FRONT OF THE CONSENT BOOKLET.
Press <1> and <Enter> to continue.
1   Continue

IF NCPregJ = Pregnant THEN
NoCodeB
BIOMEDICAL FIELDWORKER: NO MEASUREMENTS TO BE TAKEN.
BIOMEDICAL FIELDWORKER: ASK THE PARTICIPANT TO RETURN THE CONSENT BOOKLET TO YOU, FOLLOWING NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.
CIRCLE **CONSENT CODES 02, 04, 06, 08, 10, 12, 14 and 16** AT QUESTION 8 ON THE FRONT OF THE OFFICE CONSENT BOOKLET.
Press <1> and <Enter> to continue."
1   Continue

IF (NCPregJ = NotPreg) THEN
AllCheck
BIOMEDICAL FIELDWORKER: Check before leaving the participant:
#**That *(participant's name)* has his/her copy of signed consents.**
#**If the participant gave a blood sample the full GP details are entered on front of the Consent Booklet.**
#**If the participant gave a blood sample the name by which the GP knows participant is entered on the front of the Consent Booklet.**
#**That all participant details are completed on front of the Consent Booklet.**
#**That all necessary initials(ticks) and signatures have been collected in the consent booklet.**
#**That appropriate codes have been circled at Question 8 on the front of the Consent Booklet. (For those who have agreed a return visit to give a blood samples, there will be further consents to collect at the return visit).**

Press <1> and <Enter> to continue.
    1   Continue

EndReach
BIOMEDICAL FIELDWORKER: End of questionnaire reached.
  IF (DoBlood [NSeqNo]= NotDone) THEN
  Don't forget to make an appointment to come back and take the blood sample.

Press <1> and <Enter> to continue.

IF (Info = No) THEN
NurOut
BIOMEDICAL FIELDWORKER: Why were you not able to complete the biomedical fieldworker schedule for person (number and name)?
1   NotToBe   (800) "Refuses health visit/Office refusal – not to be interviewed",
2   Complete (810) "Biomedical fieldworker schedule completed",
3   NoContact (820) "No contact made after 4+ visits (OFFICE APPROVAL)",
4   PerRef   (830) "Refusal by person",
5   CovidRef   (831) "Refusal of health visit due to Covid-19 concerns",
6   BldInAC   (833) "Ineligible for blood sample (anticoagulants and/or fits/convulsions)",
7   BldIn1   (834) "Ineligible for blood sample (under 2 years)",
8   BldIn2   (835) "Ineligible for blood sample (aged 2-10 years)",
9   RefBS   (836) "Parent, Child or Young Person refused blood sample (aged 1.5-18 years)",
10   ProxRef   (840) "Proxy refusal",
11   Pregnant (845) "Pregnant and/or breast-feeding",
12   Broken   (850) "Broken appointment, no re-contact gained",
13   BrokenMulti   (851) "Multiple broken appointments",
14   IllHome   (860) "Ill (at home) during field work period",
15   IllHosp   (870) "Ill (in hospital) during field work period",
16   CovidIll   (871) "Unable to complete health visit due to shielding/isolating/quarantining (Covid-19)"
17   Away   (880) "Away (other reason) during field work period",
18   Other   (890) "Other reason for schedule not being completed"
19   CovidNotIssued   (961) "Issued but not attempted due to Covid-19 local lockdowns

(OFFICE APPROVAL)"

IF (NurOut=Other) THEN
NurOutO
BIOMEDICAL FIELDWORKER: Please give reason why not completed.
:OPEN

IF (Info = Yes) OR (InfSh = No) OR (WDraw = No) THEN
Thank
BIOMEDICAL FIELDWORKER: Thank participant for his/her co-operation.
Then press <1> and <Enter> to finish.
1   Continue

StrtTime
Start time for : (Module name)
Just press <Enter>
: ARRAY [0..10] OF TIMETYPE

Elapsed
Timing for : (Module name)
Just press <Enter>."
: ARRAY [0..10] OF TTime,

INFANT LENGTH
FOR PARTICIPANTS AGED 18 MONTHS TO 2 YEARS

IF (Age< 2) THEN
LgthMod
BIOMEDICAL FIELDWORKER: Now follows the *Infant Length* module
Please press <1> and <Enter> to continue.
1   Continue

IF (Age< 2) THEN
LgthInt
BIOMEDICAL FIELDWORKER: IF MESUREMENT IS NOT APPROPRIATE DUE TO COVID
RESTRICTIONS, PLEASE SELECT "UNABLE TO MEASURE LENGTH FOR OTHER
REASON".
(As I mentioned earlier,) I would like to measure *(child's name)'s* length.
IF ASKED: This gives us information about your child's growth.
1   Agree   "Length measurement agreed"
2   Refuse   "Length measurement refused"
3   Unable   "Unable to measure length for other reason"

IF (LgthInt = Agree) THEN
Length
BIOMEDICAL FIELDWORKER: Measure infant's length and record in centimetres.
If measurement not obtained, enter '999.9'.
Range: 40.0..999.9

IF (Length = RESPONSE) and (Length <> 999.9) THEN
LgthRel
BIOMEDICAL FIELDWORKER: Is this measurement reliable?
1   Yes
2   No

IF (Length=999.9 or EMPTY) THEN
YNoLgth
BIOMEDICAL FIELDWORKER: Give reason for not obtaining a length measurement
1   Refuse   "Measurement refused"
2   TryNot   "Attempted, not obtained"
3   NoTry   "Measurement not attempted"

IF (YNoLgth = Refuse.. NoTry) OR (LgthInt = Refuse, Unable) THEN
NoAttL
BIOMEDICAL FIELDWORKER: Give reason for *(refusal/not obtaining measurement/not attempting the measurement)*.
1   Asleep   "Child asleep"
2   Fright   "Child too frightened or upset"
3   Shy   "Child too shy"
4   Lie   "Child would not lie still"
5   CovidRea   "Measurement not offered due to Covid restrictions"

95   Other   "Other reason(s)

IF (NoAttL = Other) THEN
 OthNLth
BIOMEDICAL FIELDWORKER: Enter details of other reason(s) for not obtaining/attempting the length measurement.
: STRING [100]

IF (Length = RESPONSE) and (Length <> 999.9) THEN
MbkLgth
BIOMEDICAL FIELDWORKER: Write the results of the length measurement on participant's Measurement Record Card.
Press <1> and <Enter> to continue
1   Continue

PRESCRIBED MEDICATIONS

{Following questions asked as a loop:}

IF (MedCNJD = Yes) THEN
MedBI
BIOMEDICAL FIELDWORKER: Enter name of drug no.
Ask if you can see the containers for all prescribed medicines currently being taken.
If Aspirin, record dosage as well as name.
: STRING[50]

MedBIA
Have/Has you/(*child's name*) taken/used *(text from MedBI)* in the last 7 days?
1 Yes
2 No

MedBIC
BIOMEDICAL FIELDWORKER CHECK: Any more drugs to enter?
1 Yes
2 No

Derived variable
DrugClot
Any anti-coagulant drugs recorded in the drugs section?
1 Yes
2 No

DEMISPAN

FOR ALL PARTICIPANTS *AGED 65 AND OVER OR THOSE WITH AN UNRELIABLE HEIGHT MEASUREMENT*

ASK ALL AGED 65+ OR (Method = F2F AND AGED 16-64 WITH UNRELIABLE HEIGHT MEASUREMENT- self report = reliable)
SpanIntro
BIOMEDICAL FIELDWORKER: Now follows the **Measurement of Demispan.**

Press <1> and <Enter> to continue.
1   Continue

SpanInt
I would now like to measure the length of your arm. Like height, it is an indicator of size.
BIOMEDICAL FIELDWORKER CODE:
1   Agree   "Participant agrees to have demi-span measured"
2   Refuse   "Participant refuses to have demi-span measured"
3   Unable   "Unable to measure demi-span for reason other than refusal"

IF (SpanInt = Agree) THEN
Span
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS FOR TAKING MEASUREMENTS.**
BIOMEDICAL FIELDWORKER: Enter the *(first/second/third)* demi-span measurement in centimetres.
If measurement not obtained, enter '999.9'.
: Range: 5.0..1000.0

Repeat for up to three demi-span measurements.
Third measurement taken only if first two measurements differ by more than 3cm.

IF (Span <> 999.9) THEN
SpanRel
BIOMEDICAL FIELDWORKER: Is the *(first/second/third)* measurement reliable?
1   Yes
2   No

IF (Span = 999.9 *(both attempts)*) THEN
YNoSpan
BIOMEDICAL FIELDWORKER: Give reason for not obtaining at least one demi-span measurement.
1   Refuse   "Measurement refused"
2   TryNot   "Attempted but not obtained"
3   NoTry   "Measurement not attempted"
IF (YNoSpan = Refuse OR TryNot OR NoTry) THEN
NotAttM
BIOMEDICAL FIELDWORKER: Give reason for *(refusal/not obtaining measurement/measurement not being attempted)*.
1   Bent   "Cannot straighten arms"
2   Bed   "Participant confined to bed"
3   Stoop   "Participant too stooped"
4   NotUnd   "Participant did not understand the procedure"
5   Covid   "Participant refused due to Covid-19 concerns"

6 Other   "Other"

IF (NotAttM = Other) THEN
OthAttM
BIOMEDICAL FIELDWORKER: Give full details of other reason for *(refusal/not obtaining measurement/measurement not being attempted)*.
: STRING [140]

IF (Span <> 999.9) THEN
SpnM
BIOMEDICAL FIELDWORKER CHECK: Demi-span was measured with the participant:
CODE ALL THAT APPLY.
1   Wall   "Standing against the wall or another flat surface"
2   NoWall   "Standing not against the wall or another surface"
3   Sitting   "Sitting"
4   Lying   "Lying down"
5   LeftArm   "Demi-span measured on left arm due to unsuitable right arm"

IF (Span <> 999.9) THEN
DSCard
BIOMEDICAL FIELDWORKER: Write results of demi-span measurement on participant's Measurement Record Card.
Press <1> and <Enter> to continue.
1   Continue

WAIST AND HIP
FOR PARTICIPANTS 11 AND OVER WHO ARE NOT PREGNANT

WHMod
BIOMEDICAL FIELDWORKER: Now follows the *Waist and Hip Circumference Measurement.*
Press <1> and <Enter> to continue.
1   Continue

WHIntro
I would now like to measure your waist and hips. The waist relative to hip measurement is very useful for assessing the distribution of weight over the body.

BIOMEDICAL FIELDWORKER CODE:
1   Agree   "Participant agrees to have waist/hip ratio measured"
2   Refuse   "Participant refuses to have waist/hip ratio measured"
3   Unable   "Unable to measure waist/hip ratio for reason other than refusal"

Repeat for up to three waist-hip measurements.
Third measurement taken only if first two measurements differ by more than 3cm.

IF (WHIntro = Agree) THEN
Waist
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS FOR TAKING MEASUREMENTS.**
BIOMEDICAL FIELDWORKER: Measure the waist and hip circumferences **to the nearest mm**.
Enter the *(first/second/third)* waist measurement in centimetres.
(Remember to include the decimal point.)
If measurement not obtained, enter '999.9'.
: Range: 40.0..1000.0

IF (WHIntro = Agree) THEN
Hip
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS FOR TAKING MEASUREMENTS.**
BIOMEDICAL FIELDWORKER: Measure the waist and hip circumferences **to the nearest mm**.
Enter the *(first/second/third)* measurement of hip circumference in centimetres.
(Remember to include the decimal point.)
If measurement not obtained, enter '999.9'.
Range: 50.0..1000.0

IF (WHIntro = Agree) THEN
RespWH
Imputed
1   Both   "Both obtained"
2   One   "One obtained"
3   Refused   "Refused"
4   NoTry   "NoTry"

IF (Waist = 999.9 *(either attempt)*) OR (Hip = 999.9 *(either attempt)*) THEN
YNoWH
BIOMEDICAL FIELDWORKER: Enter reason for not getting both measurements.
1   Refused   "Both measurements refused"
2   TryNot   "Attempted but not obtained"
3   NoTry   "Measurement not attempted"

IF (RespWH = One OR Refused OR NoTry) OR (YNoWH = Refused) THEN
WHPNABM
BIOMEDICAL FIELDWORKER: Give reason(s) *(for refusal/why unable/for not obtaining measurement/for not attempting/why only one measurement obtained)*.
CODE ALL THAT APPLY.
1   ChairBnd   "Participant is chairbound"
2   Bed   "Participant is confined to bed"
3   Stoop   "Participant is too stooped"
4   NotUnd   "Participant did not understand the procedure"
5   Covid   "Participant refused due to Covid-19 concerns"
6   Other   "Other (SPECIFY AT NEXT QUESTION)"

IF (WHPNABM = OthWH) THEN
OthWH
BIOMEDICAL FIELDWORKER: Give full details of 'other' reason(s) for not getting full waist/hip measurement.
: STRING [140]

IF AT LEAST ONE WAIST MEASUREMENT OBTAINED (IF (Waist (1st) <> 999.9 AND Waist (1st) <> EMPTY) OR (Waist (2nd) <> 999.9 AND Waist (2nd) <> EMPTY)) THEN
WJRel
BIOMEDICAL FIELDWORKER: Record any problems with *waist* measurement:
1   NoProb   "No problems experienced, **reliable** waist measurement"
2   ProbRel   "Problems experienced - waist measurement **likely to be reliable**"
3   ProbSlUn   "Problems experienced - waist measurement likely to be **slightly unreliable***"
4   ProbUn   "Problems experienced - waist measurement **likely to be unreliable***"

IF (WJRel = ProbRel OR ProbSlUn OR ProbUn) THEN
ProbWJ
BIOMEDICAL FIELDWORKER: Record whether problems experienced are likely to increase or decrease the *waist* measurement.
1   Increase   "Increases measurement"
2   Decrease   "Decreases measurement"

IF AT LEAST ONE HIP MEASUREMENT OBTAINED IF ((Hip (1st) <> 999.9 AND Hip (1st) <> EMPTY) OR (Hip (2nd) <> 999.9 AND Hip (2nd) <> EMPTY)) THEN
HJRel
BIOMEDICAL FIELDWORKER: Record any problems with **hip** measurement:
1   NoProb   "No problems experienced, *reliable* hip measurement"
2   ProbRel   "Problems experienced - hip measurement *likely to be reliable*"
3   ProbSlUn   "Problems experienced - hip measurement likely to be *slightly unreliable*"
4   ProbUn   "Problems experienced - hip measurement *likely to be unreliable*"

IF (HJRel = ProbRel OR ProbSlUn OR ProbUn) THEN
ProbHJ
BIOMEDICAL FIELDWORKER: Record whether problems experienced are likely to increase or decrease the **hip** measurement.
1   Increase   "Increases measurement"
2   Decrease   "Decreases measurement"

IF (RespWH = Both OR One) THEN
WHRes
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.**
BIOMEDICAL FIELDWORKER: OFFER TO WRITE RESULTS OF WAIST AND HIP MEASUREMENTS, WHERE APPLICABLE, ONTO PARTICIPANT'S MEASUREMENT RECORD

CARD.
Waist: (X) cm/inches
Hip: (X) cm/inches

Press <1> and <Enter> to continue.

BLOOD SAMPLE
FOR ALL PARTICIPANTS WHO ARE NOT PREGNANT

BIIntro
BIOMEDICAL FIELDWORKER: NOW FOLLOWS THE **BLOOD SAMPLE** MODULE.
BIOMEDICAL FIELDWORKER: EXPLAIN THE PURPOSE AND PROCEDURE OF THE BLOOD SAMPLE. GIVE PARTICIPANT RELEVANT LEAFLETS.
BIOMEDICAL FIELDWORKER; IF PARTICIPANT INITIALLY REFUSED BLOOD SAMPLE BY PHONE TAILOR THIS INTRODUCTION ACCORDINGLY.

Press <1> and <Enter> to continue.

BIIChk
BIOMEDICAL FIELDWORKER: CODE WHETHER TO CONTINUE WITH THE BLOOD SAMPLE MODULE OR NOT, BASED ON PARTICIPANT WILLINGNESS TO PROVIDE A SAMPLE.
1. CONTINUE WITH BLOOD SAMPLE MODULE
2. PARTICIPANT REFUSES TO PROVIDE A BLOOD SAMPLE

BIIChkS
Safety copy of BIIChk
1   CONTINUE WITH BLOOD SAMPLE MODULE
2   PARTICIPANT REFUSES TO PROVIDE A BLOOD SAMPLE

IF (age <16) THEN
ClotB
ASK PARENT I(‘*parent name*’): May I just check, does (*child's name*) have a clotting or bleeding disorder or is he/she currently on anti-coagulant drugs such as Warfarin?
BIOMEDICAL FIELDWORKER: DO NOT TAKE BLOOD SAMPLE IF RESPONDENT IS TAKING:
Warfarin, Sinthrome (Acenocoumarol), Phenindione, Pradaxa (Dabigatran Etexilate), Xarelto (Rivaroxaban), Apixaban (Eliquis), Edoxaban / Lixiana, Brilique (Ticagrelor), Heparin.
TAKE BLOOD SAMPLE IF RESPONDENT IS TAKING; Aspirin (Caprin; Nu-Seals), Flamasacard, Clopidogrel (Plavix) Dipyridamole (Persantin, Persantin Retard, Asasantin Retard), Prasugrel (Efient), Eptifibate (Inteligrin), Tirofiban (Aggrastat)
1   Yes
2   No

> **SIGNAL IF ClotB = Yes**
> NUSRE: You have coded that the participant has a clotting/bleeding disorder or is taking anti-coagulant drugs. This means that no blood is to be taken.
> Is this correct
> If yes supress this warning and continue.
> If no, go back and code 2.

> **SIGNAL IF ClotB = No and DrugClot = Yes**
> Earlier, in the Medicines Section, this person is recorded as taking either Warfarin or Heparin. Please check.

IF (age < 16) AND (ClotB = No) THEN

Fit

ASK PARENT/ ('*parent name*'): May I just check, has (*child's name*) ever had a fit (including epileptic fit, convulsion, convulsion associated with high fever) in the last 5 years?
1   Yes
2   No

IF (age < 16) AND (Fit = Yes) THEN
FitY

"What type of fit has (child's name) experienced?"
1   Epilept   "Epileptic fit",
2   Febrile   "Febrile fit associated with high fever",
3   Other   "Other (SPECIFY AT NEXT QUESTION)")

IF (FitY=Oth) THEN
FitYO
BIOMEDICAL FIELDWORKER: Give details of other reason for fit.
: Open

IF (age < 16) AND (FitY = Febrile) THEN
FitW
ASK PARENT: Was this within the last 24 months?
1   Yes
2   No

IF (age >=16) THEN
ClotBA
May I just check, do you have a clotting or bleeding disorder or are you currently on anti-coagulant drugs such as Warfarin?

BIOMEDICAL FIELDWORKER: DO NOT TAKE BLOOD SAMPLE IF RESPONDENT IS TAKING: Warfarin, Sinthrome (Acenocoumarol), Phenindione, Pradaxa (Dabigatran Etexilate), Xarelto (Rivaroxaban), Apixaban (Eliquis), Edoxaban / Lixiana, Brilique (Ticagrelor), Heparin.
TAKE BLOOD SAMPLE IF RESPONDENT IS TAKING; Aspirin (Caprin; Nu-Seals), Flamasacard, Clopidogrel (Plavix) Dipyridamole (Persantin, Persantin Retard, Asasantin Retard), Prasugrel (Efient), Eptifibate (Inteligrin), Tirofiban (Aggrastat)
1   Yes
2   No

   SIGNAL IF ClotBA = Yes
   NUSRE: You have coded that the participant has a clotting/bleeding disorder or is taking anti-coagulant drugs. This means that no blood is to be taken.
   Is this correct
   If yes supress this warning and continue.
   If no, go back and code 2.

   SIGNAL IF ClotBA=No and DrugClot = Yes
   Earlier, in the Medicines Section, this person is recorded as taking either Warfarin or Heparin. Please check.

IF (age >= 16) AND (ClotBA=No) THEN
FitA
May I just check, have you had a fit (including epileptic fit or convulsion) in the last five years?
1   Yes

2   No

IF (age >= 16) AND (ClotBA = No) AND (FitA = No) THEN
BSWill
Would you be willing to have a blood sample taken?
1   Yes
2   No

IF (age>=4 – 15) AND (ClotB = No) AND ((Fit = No) OR (FitW=No))THEN
CBSConst
ASK PARENT/ ('*parent*'): Are you willing for your child to have a blood sample taken?

> **IF (AXMDAge=10) AND (CAgeNow = 11) THEN**
> BIOMEDICAL FIELDWORKER: AS PARTICIPANT HAS TURNED 11 YEARS SINCE THE INTERVIEWER STAGE, YOU SHOULD TAKE THE BLOOD SAMPLE NOT A PAEDIATRIC PHLEBOTOMIST OR AN 'EXTENDED ROLE' NURSE (I.E. COMPLETED TRAINING TO TAKE BLOOD FROM CHILDREN AGED 6-10 INC.). N.B. FOR ALL OTHER PARTS OF THE VISIT INTERVIEW AGE IS STILL SET AS 10 YEARS FROM THE INTERVIEWER STAGE.

> **IF (Age <11) THEN**
> BIOMEDICAL FIELDWORKER: AS PARTICIPANT IS 10 YEARS OR UNDER, A PAEDIATRIC PHLEBOTOMIST OR AN "EXTENDED ROLE" NURSE (I.E. COMPLETED TRAINING TO TAKE BLOOD FROM CHIDLREN AGED 6-10 INC.) MUST TAKE THE BLOOD SAMPLE.

> **IF (PPAge >= 4) THEN**
> CHILDREN AGED 4 AND OVER SHOULD PROVIDE A FASTING SAMPLE

CHILDREN AGED 4 AND OVER SHOULD PROVIDE A FASTING SAMPLE.
1   Yes
2   No

IF (BSWill = No) OR (CBSConst = No) THEN
RefBSC
BIOMEDICAL FIELDWORKER: RECORD WHY BLOOD SAMPLE REFUSED.
CODE ALL THAT APPLY.
1   PrevDiff   "Previous difficulties with venepuncture"
2   Fear   "Dislike/fear of needles"
3   RecTest   "Participant recently had blood test/health check"
4   Ill   "Refused because of current illness"
5   HIV   "Worried about HIV or AIDS"
6   NoPaed   "No paediatric phlebotomist or 'extended role' nurse available"
7   Parent   "Parent doesn't agree with it/thinks child too young"
8   Busy   "Too busy"
9   Time   "Time constraints (i.e. appointment timings not convenient)"
97   Other   "Other"

IF (RefBSC = Other) THEN
OthRefBS
BIOMEDICAL FIELDWORKER: Give full details of other reason(s) for refusing blood sample.
: STRING [135]

IF ((age < 16) AND (ClotB = Yes) OR (FitW = Yes) OR (FitY= Epilet or Other)) OR ((age >= 16) AND (ClotBA = Yes) OR (FitA = Yes)) OR ((BSWill = No) OR (CBSConst = No))THEN
BSStop

BIOMEDICAL FIELDWORKER: No Blood Samples should be taken from (participant name)
BIOMEDICAL FIELDWORKER: ASK THE PARTICIPANT TO RETURN THE CONSENT
BOOKLET TO YOU, FOLLOWING NATCEN'S COVID PROTOCOLS ON HANDLING
DOCUMENTS.
Ring **consent codes 06, 08, 10 and 12** on the consent booklet
To continue with this schedule on the first visit, press <1> and <Enter>
1   Continue

IF (age >= 4) AND ((BSWill = Yes) OR (CBSConst = Yes)) THEN
Eat
Can I check, have you had anything to eat or drink, excluding water, in the last 8 hours?
BIOMEDICAL FIELDWORKER: IF PROVIDING A FASTING SAMPLE, THE PARTICIPANT
SHOULD HAVE FASTED FOR A MINIMUM OF 8 HOURS AND FOOD SUPPLEMENTS,
VITAMINS OR MINERALS SHOULD PREFERABLY NOT HAVE BEEN TAKEN. THEY CAN
HAVE DRUNK WATER AS NORMAL.
BIOMEDICAL FIELDWORKER: PARTICIPANT CAN STILL PROVIDE A NON-FASTING BLOOD
SAMPLE IF THEY HAVE NOT FASTED.
1   Yes
2   No

IF (Eat = Yes) THEN
TFast
When did you last eat or drink anything other than plain water?
Think of any food and any drink if not plain water.
BIOMEDICAL FIELDWORKER: Record how many hours since participant last ate.
:1…97

IF (Eat = Yes) THEN
WFast
What did you eat or drink at that time?
List all items.
:OPEN

IF (age >= 4) AND ((BSWill = Yes) OR (CBSConst = Yes)) AND (Eat =Yes) THEN
Diabetes
BIOMEDICAL FIELDWORKER: HAS THE PARTICIPANT TOLD YOU THAT THEY ARE
DIABETIC?
        1   Yes
        2   No

IF (Age >=4) AND ((BSWill =Yes) OR (CBSConst= Yes)) AND (Eat=Yes) THEN
NFastBl
BIOMEDICAL FIELDWORKER: THIS PARTICIPANT COULD GIVE A NON -FASTING BLOOD
SAMPLE NOW.
        IF (Diabetes=Yes) THEN
        DIABETIC PARTICIPANT SHOULD EAT AS SOON AS POSSIBLE AFTER BLOOD IS
        TAKEN
BEFORE DECIDING WHETHER TO TAKE BLOOD, CHECK:
IS A RETURN VISIT TO COLLECT A FASTING SAMPLE APPROPRIATE – CHECK
SCENARIOS IN PROJECT INSTRUCTIONS.
        IF (CAgeNow < 11) THEN
        ARE YOU A TRAINED PAEDIATRIC PHLEBOTOMIST (I.E. CAN TAKE BLOODS
        FROM CHILDREN AGED 18 MONTHS AND OVER) OR A NURSE WHO HAS
        TAKEN ON THE 'EXTENDED ROLE(I.E. CAN TAKE BLOODS FROM CHILDREN
        AGED 6-10 YEARS INC.)?

(IF NO, CODE 2)

IF (Method = Val) and (Age >= 16) AND (BIValConf =Yes) THEN
Is the field lab open and expecting a sample and is the local Post Office open and can you deliver the samples in time for guaranteed next day delivery (i.e. is it Monday – Friday)?

IF (Method = PO) or ((Method = Val) and (Age < 16)) or ((Method = Val) and (Age >= 16) AND (BIValConf =No)) THEN
Is the local Post Office open and can you deliver the samples in time for guaranteed next day delivery (i.e. is it Monday – Friday)?
Is there anyone else in the household who will give blood?
If so, could you take blood from all participants at the same time (i.e. a return visit)?
CONSIDER THESE QUESTIONS AND CODE:
1   Yes   Yes, I will take the blood sample now
2   No   No, I will return at a later date to take the blood sample

IF (NFastBI = No) THEN
NFSAppt
BIOMEDICAL FIELDWORKER: ARRANGE AN APPOINTMENT WITH (*participants's name*) TO TAKE A BLOOD SAMPLE. THIS CAN ONLY BE ON A MONDAY TO FRIDAY MORNING.

Press <1> and<Enter> to continue.
     1   Continue

IF (NFastBI = No) AND (Diabetes = YES) THEN
NFSAppt
BIOMEDICAL FIELDWORKER: ARRANGE AN APPOINTMENT WITH (*participants's name*) TO TAKE A BLOOD SAMPLE. THIS CAN ONLY BE ON A MONDAY TO FRIDAY MORNING.
(THE PARTICIPANT HAS TOLD YOU THEY ARE DIABETIC. IF THEY ARE CONCERNED ABOUT FASTING, PRESS F9 FOR GUIDANCE ABOUT THE DIFFERENT MEASURES THAT A DIABETIC PARTICIPANT COULD TAKE AND STILL GIVE A FASTING SAMPLE)

DIABETIC PARTICIPANT SHOULD EAT AS SOON AS POSSIBLE AFTER BLOOD IS TAKEN.

Press <1> and<Enter> to continue.
1   Continue

IF (Eat=No) THEN
IsTime
IF (Method = Val) and (Age >= 16) and (BIValConf=Yes) THEN
BIOMEDICAL FIELDWORKER: HAVE YOU CHECKED THE FIELD LAB AND POST OFFICE ARE OPEN AND YOU CAN DELIVER THE SAMPLES TODAY?

IF (Method = PO) or ((Method = Val) and (Age<16)) or ((Method = Val) and (Age >= 16) AND (BIValConf =No)) THEN
BIOMEDICAL FIELDWORKER: HAVE YOU CHECKED THE POST OFFICE IS OPEN AND YOU CAN DELIVER THE SAMPLES TODAY?

(The computer says time is (*time on laptop*))/ (When this question was originally answered the time was (*time in laptop*))
1 Yes – can deliver samples today

2 No – can **not** deliver samples today

IsTimeT
Time that *IsTime* was first asked.
: TIMETYPE

IF (IsTime=Yes)
FastBI
BIOMEDICAL FIELDWORKER: THIS PARTICIPANT COULD GIVE A FASTING BLOOD
SAMPLE NOW.
BIOMEDICAL FIELDWORKER: DIABETIC PARTICIPANT SHOULD EAT AS SOON AS
POSSIBLE AFTER BLOOD IS TAKEN
BEFORE DECIDING WHETHER TO TAKE BLOOD, CHECK:

> **IF (PSeqNo=2) AND (Age<11) THEN**
> ARE YOU A TRAINED PAEDIATRIC PHLEBOTOMIST OR A NURSE WHO HAS TAKEN
> ON THE 'EXTENDED ROLE' (I.E. CAN TAKE BLOODS FROM CHILDREN AGED 6-10
> YEARS INC.)?
> **IF (Method = Val) and (Age >= 16) and (BIValConf =Yes)THEN**
> Is the lab open and expecting a sample and is the local Post Office open and can you
> deliver the samples in time for guaranteed next day delivery (i.e. is it Monday – Friday)?

> **IF (Method = PO) or ((Method=Val) and (Age<16)) or ((Method = Val) and (Age >= 16)
AND (BIValConf =No))THEN**
> **I**s the local Post Office open and can you deliver the samples in time for guaranteed next
> day delivery (i.e. is it Monday – Friday)?

Are there any other participants in the household who will give blood?
If so, you should take blood from all participants at the same time.
CONSIDER THESE QUESTIONS AND CODE:

> **F9 Acceptable procedures according to medication:**
> …participants on oral hypoglycaemic medication should be able to fast without
> complications.
> …participants on a combination of nightime insulin and daytime tablets should also
> be able to fast unless they are known to have low blood sugar levels first thing in the
> morning. If they do have low blood sugar in the morning, they could still fast but
> should reduce their nightime insulin by a small amount and have breakfast as soon
> as possible after the blood is taken.
> …participants on insulin alone can also provide a fasting sample, but should be given
> special consideration. They should postpone their morning insulin and should be
> seen as early in the day as possible.
> In every case, diabetics should have breakfast as soon as possible after blood is
> taken.

1   Yes   "Yes, I will take the fasting blood sample now"
2   No   "No, I will return at a later date to take the blood sample"

IF (FastBI = NO) OR (IsTime=No) THEN
FBAppt
BIOMEDICAL FIELDWORKER: ARRANGE AN APPOINTMENT WITH (*participants's name*)
TO TAKE A BLOOD SAMPLE. THIS CAN ONLY BE ON A MONDAY TO FRIDAY MORNING.

Press <1> and<Enter> to continue.

IF (DoBlood[PSeqNo] = NotDone) THEN
AmeInt
  (Note: First entry is Age < 6, Second entry is Age = 6-15, Third entry is Age >= 16)
BIOMEDICAL FIELDWORKER: Explain that there is the option of using (Ametop gel/Cryogesic spray or Ametop gel/Cryogesic spray), but that a sample can be given without (it/them/it).
Give parent/participant the (Ametop information sheet/Cryogesic and Ametop information sheets/Cryogesic information sheet) and allow them time to read (it/them/it).
Ask participant/parent whether they think they will want to use (Ametop gel/Cryogesic spray or Ametop gel/Cryogesic spray).

Press <1> and <Enter> to continue.

OBTAIN BLOOD SAMPLE (ASK IF 18 months and older)

IntFBT
BIOMEDICAL FIELDWORKER: NOW FOLLOWS THE MODULE TO OBTAIN BLOOD SAMPLES.
Press <1> and <Enter> to continue.
1   Continue

DateFBT
Date at start of QFBTaken block
: DATETYPE

TimeFBT
Date at start of QFBTaken block
: DATETYPE

IF (PVisit<>1)/ IF BLOOD SAMPLE NOT TAKEN ON FIRST VISIT THEN
    IF (Age <16) THEN
    TClotB
    ASK PARENT/ (Parent name): May I just check again, *does (child's name)* have a clotting or bleeding disorder or *is he/is she* currently on anti-coagulant drugs such as Warfarin?
BIOMEDICAL FIELDWORKER: DO NOT TAKE BLOOD SAMPLE IF RESPONDENT IS TAKING: Warfarin, Sinthrome (Acenocoumarol), Phenindione, Pradaxa (Dabigatran Etexilate), Xarelto (Rivaroxaban), Apixaban (Eliquis), Edoxaban / Lixiana, Brilique (Ticagrelor), Heparin.
TAKE BLOOD SAMPLE IF RESPONDENT IS TAKING; Aspirin (Caprin; Nu-Seals), Flamasacard, Clopidogrel (Plavix) Dipyridamole (Persantin, Persantin Retard, Asasantin Retard), Prasugrel (Efient), Eptifibate (Inteligrin), Tirofiban (Aggrastat)
1   Yes
2   No

    IF (PVisit<>1) AND (Age < 16) AND (TClotB = No) THEN
    TFit
    ASK PARENT:
May I just check also, has (*child's name)* ever had a fit (including epileptic fit, convulsion, convulsion associated with high fever)?
1   Yes
2   No

    IF (Age < 16) AND (TFit = Yes) THEN
    TFitY
What type of fit have you experienced?
1.   Epileptic fit
2.   Febrile fit associated with high fever
3. Other (SPECIFY AT NEXT QUESTION)

    IF (TFitY = Other) THEN
    TFitYO
BIOMEDICAL FIELDWORKER: Give details of other reason for fit.
 : OPEN

IF (Age < 16) and (TFitY = Febrile) THEN
TFitW
Was this within the last 24 months?
1. Yes
2. No

IF (PVisit<>1) AND (age >= 16) THEN
TClotBA
May I just check, do you have a clotting or bleeding disorder or are you currently on anti-coagulant drugs such as Warfarin?
(BIOMEDICAL FIELDWORKER: Aspirin therapy is not a contraindication for blood sample.)
BIOMEDICAL FIELDWORKER: DO NOT TAKE BLOOD SAMPLE IF RESPONDENT IS TAKING: Warfarin, Sinthrome (Acenocoumarol), Phenindione, Pradaxa (Dabigatran Etexilate), Xarelto (Rivaroxaban), Apixaban (Eliquis), Edoxaban / Lixiana, Brilique (Ticagrelor), Heparin.
TAKE BLOOD SAMPLE IF RESPONDENT IS TAKING; Aspirin (Caprin; Nu-Seals), Flamasacard, Clopidogrel (Plavix) Dipyridamole (Persantin, Persantin Retard, Asasantin Retard), Prasugrel (Efient), Eptifibate (Inteligrin), Tirofiban (Aggrastat)
1   Yes
2   No

IF (age >= 16) AND (TClotBA= No) THEN
TFitA
May I just check, have you had a fit (including epileptic fit or convulsion) in the last five years?
1   Yes
2   No

IF (PVisit<>1) AND ((TBSWill = Yes) OR (TCBSConst = Yes)) AND (PPAge >= 4))THEN
TEat
Can I check, have you had anything to eat or drink (excluding water) in the last 8 hours?
DIABETIC PARTICIPANT SHOULD EAT AS SOON AS POSSIBLE AFTER BLOOD IS TAKEN
Acceptable procedures according to medication:
…participants on oral hypoglycaemic medication should be able to fast without complications.
…participants on a combination of nightime insulin and daytime tablets should also be able to fast unless they are known to have low blood sugar levels first thing in the morning. If they do have low blood sugar in the morning, they could still fast but should reduce their nightime insulin by a small amount and have breakfast as soon as possible after the blood is taken.
…participants on insulin alone can also provide a fasting sample, but should be given special consideration. They should postpone their morning insulin and should be seen as early in the day as possible.
In every case, diabetics should have breakfast as soon as possible after blood is taken
 1   Yes
 2   No

IF (TEat=Yes) THEN
TTFast
When did you last eat or drink anything other than plain water?
Think of any food and any drink if not plain water.
BIOMEDICAL FIELDWORKER: Record how many hours since participant last ate.
Range: 1..97

IF (TEat=Yes) THEN
TWFast
What did you eat or drink at that time?
List all items.
: OPEN.

IF (Age <4) THEN
ChEat
Can I check, has (*participant name*) had anything to eat or drink (excluding water) in the last 8 hours?
1   Yes
2   No

IF ((PVisit = 1) AND (PClotB = No) AND (PFit = No))
   OR ((PVisit <> 1) AND (PPAge < 16) AND (TClotB = No) AND ((TFit = No)
   OR (TFitW = No)))
OR ((PVisit <> 1) AND (PPAge >= 16) AND (TClotBA = No) AND (TFitA = No)) THEN
TVits
Can I check, have you/your child taken any vitamins, minerals or other food supplements (for example, folic acid) in the last 8 hours?
1   Yes
2   No

IF (TVits = YES) THEN
TVitsY
What type of vitamins, minerals or food supplements have you/your child taken in the last 8 hours?
BIOMEDICAL FIELDWORKER: PLEASE INCLUDE DETAILS ON SUPPLEMENT NAME, BRAND AND STRENGTH. IF POSSIBLE, ASK TO SEE CONTAINER
: OPEN

IF (age >= 16) THEN
TBSWill
Would you be willing to have a blood sample taken?
1   Yes
2   No

IF (age < 16) THEN
TCBSConst
ASK PARENT
Are you willing for your child to have a blood sample taken?
BIOMEDICAL FIELDWORKER: CHECK THAT CHILD IS WILLING ALSO, EXPLAIN PROCESS AND REASSURE THEM.
        IF (PPage <11) THEN
        EXTENDED ROLE NURSES CANNOT TAKE CHILD BLOODS UNLESS THEY HAVE BEEN ON THE PAEDIATRIC VENEPUNCTURE PROGRAMME.
        IF (CAgeNow <11) THEN
        ONLY TRAINED PAEDIATRIC PHLEBOTOMISTS OR "EXTENDED ROLE" NURSES (I.E. COMPLETED TRAINING TO TAKE BLOOD FROM CHILDREN AGED 6-10 INC.) SHOULD TAKE BLOOD FROM CHILDREN UNDER 11.

.
1   Yes
2   No

IF (TCBSConst = Yes) AND (PPAge < 11) THEN
Soft check
If you are an extended role nurse have you been assessed for taking child bloods?

IF ((age < 16) AND (TClotB = Yes) OR (TFitW = Yes) OR (TFitY= Epilet or Other)) OR ((age >= 16) AND (TClotBA = Yes) OR (FitA = Yes)) OR ((TBSWill = No) OR (TCBSConst = No))THEN
TBSStop
NO BLOOD SAMPLES SHOULD BE TAKEN FROM (participant name). CIRCLE **CONSENT CODES 06, 08, 10 and 12** AT QUESTION 8 ON FRONT OF THE CONSENT BOOKLET.

Press <1> and <Enter> to continue.

IF (age>=6) THEN
CryUse
ASK PARENT
Do you want Cryogesic spray to be used?
BIOMEDICAL FIELDWORKER: PLEASE GIVE PARTICIPANT CRYOGESIC SPRAY LEAFLET TO READ
1   Yes
2   No

IF (CryUse= Yes) THEN
CryAll
ASK PARENT
Has (child name)/ have you ever had a bad reaction to ethyl chloride?
BIOMEDICAL FIELDWORKER: If participant doesn't know enter Ctrl+k. The participant can still use cryogesic spray.
1   Yes
2   No

IF (CryAll=Yes) AND (Age = 6-15) THEN
NoCry1
BIOMEDICAL FIELDWORKER: Cryogesic spray cannot be used. Is participant willing to give a blood sample with the use of Ametop gel?
Code 1 if 'Yes, willing to give blood sample with Ametop gel'
Code 2 if 'Not with Ametop but will give a blood sample'
Code 3 if 'Not willing to give blood sample without Cryogesic'.

1   Yes   "Willing to sample with Ametop"
2   NoAm "Not with Ametop but will give sample"
3   None   "No blood sample"

IF (CryAll=Yes) AND (age>=16) THEN
NoCry2
BIOMEDICAL FIELDWORKER: Cryogesic spray cannot be used. Is participant willing to give a blood sample without Cryogesic spray?

Code 1 if 'Yes, willing to give blood sample without Cryogesic spray'
Code 2 if 'Not willing to give blood sample without Cryogesic'.

1   Yes   "Willing to sample without Cryogesic"
2   None   "No blood sample"

IF (Age <6) OR ((Age = 6 -15) AND ((CryUse= No) OR NOCry1 = Yes)))THEN

AmetopUse
ASK PARENT
Do you want Ametop gel to be used?
1	Yes
2	No

IF (AmetopUse = Yes) THEN
Allergy
ASK PARENT
Have/(Has) you/(he/she) ever had a bad reaction to a local or general anaesthetic bought over the counter at a chemist, or given at the doctor, the dentist or in hospital?
1	Yes
2	No

IF (Allergy = Yes) THEN
NoAmetop
BIOMEDICAL FIELDWORKER: Ametop gel cannot be used. Is participant willing to give blood sample without Ametop gel?
Code 1 if Yes, willing to give blood sample without Ametop gel
Code 2 if No, not willing to give blood sample without Ametop.
1	Yes	"Yes, willing"
2	No	"No, no blood sample"

IF (Allergy = No) THEN
DoAmetop
BIOMEDICAL FIELDWORKER: **Blood sample with Ametop gel**.
- Apply Ametop gel following instructions.
- Wait at least half an hour before attempting blood sample.

Press <1> and <Enter> to continue.
1	Continue

CryOrAm
Whether used Cryogesic or Ametop (DV)
1	Cryogesic
2	Ametop
3	Neither
4	NoBlood

If (CryOrAm = NoBlood) THEN
CryAmNo
BIOMEDICAL FIELDWORKER: Participant cannot give blood.
Press <1> and <Enter> to continue.
1	Continue

IF (TBSWill = No) OR (TCBSConst = No) OR (CryOrAm = NoBlood) THEN
TRefBSC
BIOMEDICAL FIELDWORKER: Record why blood sample refused.
CODE ALL THAT APPLY.
1	PrevDiff	"Previous difficulties with venepuncture",
2	Fear	"Dislike/fear of needles",
3	RecTest	"Participant recently had blood test/health check",
4	Ill	"Refused because of current illness",
5	HIV	"Worried about HIV or AIDS",
6	NoPaed	"No paediatric phlebotomist or 'extended role nurse available",
7	Parent	"Parent doesn't agree with it/thinks child too young",
8	Busy	"Too busy",

| 9 | Time | "Time constraints (i.e. appointment timings not convenient)", |
| 10 | Other | "Other" |

IF (TRefBSC = Other) THEN
TOthRef
BIOMEDICAL FIELDWORKER: Give full details of other reason(s) for refusing blood sample.
: STRING [135]

IF ((PVisit = 1) OR ((PVisit = 2) AND ((TBSWill = Yes) OR (TCBSConst = Yes)))) AND (CryOrAm <> NoBlood) THEN
BSConsC
BIOMEDICAL FIELDWORKER: EXPLAIN NEED FOR WRITTEN CONSENT (from parent):
Before I can take any blood, I have to obtain written consent from you/ *(the written consent from both parent and child).*
If (Age >=5 AND <16) THEN
BIOMEDICAL FIELDWORKER: IF THE CHILD IS ABLE PLEASE SEEK CHILD ASSENT.
Press <1> and <Enter> to continue.
1   Continue

IF (Age = 18 months - 15 years) THEN
GuardCon
BIOMEDICAL FIELDWORKER CHECK: Is a parent or person with legal responsibility willing to give consent?
1   Yes
2   No

IF (GuardCon = No) THEN
Ignore
BIOMEDICAL FIELDWORKER: Record details of why consent refused.
: STRING [140]

IF (GuardCon = Yes) THEN
Code 05C
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.**
BIOMEDICAL FIELDWORKER:
  - ASK PARENT/LEGAL GUARDIAN TO INITIAL (OR TICK) **STATEMENT 3 FOR CHILDREN AGED 4-15 OR 1.5-3** IN 'BLOOD SAMPLE' SECTION IN THE CONSENT BOOKLET.
  - MAKE SURE CHILD/PARTICIPANT'S NAME IS FILLED IN IN THE BOOKLET.
  - ASK PARENT/LEGAL GUARDIAN TO SIGN AND DATE AT THE BOTTOM OF THE PAGE (IF NOT ALREADY DONE SO).
  - ASK PARENT/LEGAL GUARDIAN TO CIRCLE **CONSENT CODE 05** AT QUESTION 8 ON FRONT OF THE CONSENT BOOKLET.

Press <1> and <Enter> to continue.
1   Continue

If (Age > 15) THEN
Code05A
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.**
BIOMEDICAL FIELDWORKER:
  - ASK PARTICIPANT TO INITIAL (OR TICK) **STATEMENT 3** IN 'BLOOD SAMPLE' SECTION IN THE CONSENT BOOKLET.
  - MAKE SURE YOU USE THE CORRECT AGE CONSENT FORM.

- MAKE SURE PARTICIPANT'S NAME IS FILLED IN IN THE CONSENT BOOKLET.
- ASK PARTICIPANT TO SIGN AND DATE AT THE BOTTOM OF THE PAGE IN THE CONSENT BOOKLET (IF NOT ALREADY DONE SO).
- ASK PARTICIPANT TO CIRCLE **CONSENT CODE 05** AT QUESTION 8 ON FRONT OF THE CONSENT BOOKLET.

Press <1> and <Enter> to continue.

IF TBSStop=1 THEN
Code06
BIOMEDICAL FIELDWORKER: ASK THE PARTICIPANT TO RETURN THE CONSENT BOOKLET TO YOU, FOLLOWING NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.

BIOMEDICAL FIELDWORKER: CIRCLE **CONSENT CODE 06** (NO CONSENT FOR BLOOD SAMPLING) AT QUESTION 8 ON FRONT OF THE CONSENT BOOKLET.
Press <1> and <Enter> to continue.
1   Continue

IF (Code05A = RESPONSE) OR (Code05C = RESPONSE) THEN
ConStorB
BIOMEDICAL FIELDWORKER: **ASK PARENT/LEGAL GUARDIAN / ASK PARTICIPANT**
May we have your consent to store any remaining blood for future analysis?

BIOMEDICAL FIELDWORKER: IF ASKED, 'THE BLOOD WOULD BE USED FOR STUDIES/TESTS RELATING TO NUTRITION AND HEALTH. THE SAMPLE WOULD BE ANONYMISED. THIS MEANS FUTURE RESEARCHERS WOULD NOT KNOW WHO YOU ARE. ANY FUTURE RESEARCH WOULD BE SUBJECT TO ETHICAL APPROAVL AS APPROPRIATE'.

BIOMEDICAL FIELDWORKER: IF ASKED, EXPLAIN THE PARTICIPANT CAN WITHDRAW THEIR CONSENT AT ANY TIME, WITHOUT GIVING ANY REASON, BY CONTACTING THE RESEARCHERS AT NATCEN IN WRITING FOR BLOOD TO BE REMOVED FROM STORAGE AND DESTROYED.

1   Yes   "Storage consent given"
2   No   "Consent refused"

IF (ConStorB=Yes) THEN
Code07
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.**
BIOMEDICAL FIELDWORKER:
- **ASK PARENT/ LEGAL GUARDIAN/ PARTICIPANT** TO INITIAL (OR TICK) **STATEMENT 4** BOX IN 'BLOOD SAMPLE' SECTION IN THE CONSENT BOOKLET.
- ASK PARENT/LEGAL GUARDIAN/PARTICIPANT TO CIRCLE **CONSENT CODE 07** AT QUESTION 8 ON FRONT OF CONSENT BOOKLET.

  Press <1> and <Enter> to continue.
1   Continue

IF (ConStorB=No) THEN
Code08
BIOMEDICAL FIELDWORKER: ASK PARTICIPANT/PARENT/LEGAL GUARDIAN TO CIRCLE **CONSENT CODE 08** (NO CONSENT FOR BLOOD STORAGE) AT QUESTION 8 ON FRONT

OF CONSENT BOOKLET.
Press <1> and <Enter> to continue.
1   Continue

IF (Code05A = RESPONSE) OR (Code05C = RESPONSE) THENSnDrSam
ASK PARENT (parent's name)
Would you like to be sent the clinically relevant results of (*child's name)/* your blood sample analysis?
1   Yes
2   No

IF (SnDrSam = Yes) THEN
Code 09
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.**
BIOMEDICAL FIELDWORKER:
  - ASK PARENT/LEGAL GUARDIAN / ASK PARTICIPANT TO INITIAL (OR TICK) **STATEMENT 5** IN 'BLOOD SAMPLE' SECTION IN THE CONSENT BOOKLET.
  - ASK PARENT/LEGAL GUARDIAN /PARTICIPANT TO CIRCLE **CONSENT CODE 09** AT QUESTION 8 ON FRONT OF THE CONSENT BOOKLET.
Press <1> and <Enter> to continue.
1   Continue

IF (SnDrSam = No) THEN
Code 10
BIOMEDICAL FIELDWORKER:
- ASK PARENT/LEGAL GUARDIAN / ASK PARTICIPANT TO CIRCLE **CONSENT CODE 10** AT QUESTION 8 ON FRONT OF THE CONSENT BOOKLET.
Press <1> and <Enter> to continue.
1   Continue

IF (Code05A = RESPONSE) OR (Code05C = RESPONSE) THEN
GPReg
BIOMEDICAL FIELDWORKER CHECK: Is participant registered with a GP?
1   Participant registered with GP
2   Participant not registered with GP

IF (GPReg = Yes) THEN
SendSam
ASK PARENT/LEGAL GUARDIAN
May we send the clinically relevant results of your child's/your blood sample analysis to his/her/your GP?
1   Yes
2   No

IF (SendSam=No) THEN
SenSaC
ASK PARENT/LEGAL GUARDIAN
Why do you not want your child's/your blood sample results sent to his/her/your GP?
1   NeverSee   "Hardly/never sees GP"
2   RecSamp   "GP recently took blood sample"
3   Bother   "Does not want to bother GP"
4   Other   "Other"

IF (SenSac=Other) THEN
OthSam
BIOMEDICAL FIELDWORKER: Give full details of reasons(s) for not wanting results sent to GP.
: STRING [140]

IF (SendSam=Yes) THEN
Code11
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.**
BIOMEDICAL FIELDWORKER
  - ASK PARENT/LEGAL GUARDIAN/PARTICIPANT TO INITIAL (OR TICK) **STATEMENT 6** IN 'BLOOD SAMPLE' SECTION IN THE CONSENT BOOKLET.
  - CHECK THAT GP NAME, ADDRESS AND PHONE NUMBER ARE RECORDED ON FRONT OF CONSENT BOOKLET (IF NOT ALREADY DONE).
  - CHECK NAME BY WHICH GP KNOWS PARTICIPANT, AND ENTER ON FRONT OF CONSENT BOOKLET (IF NOT ALREADY DONE).
  - ASK PARENT/LEGAL GUARDIAN /PARTICIPANT TO CIRCLE **CONSENT CODE 11** AT QUESTION 8 ON FRONT OF CONSENT BOOKLET.

Press <1> and <Enter> to continue.
1   Continue

IF (GPReg=No) OR (SendSam = No) THEN
Code12
BIOMEDICAL FIELDWORKER:
  - ASK PARENT/LEGAL GUARDIAN/PARTICIPANT TO CIRCLE **CONSENT CODE 12** AT QUESTION 8 (NO CONSENT FOR BLOOD SAMPLE RESULTS TO GP) ON FRONT OF THE CONSENT BOOKLET.

Press <1> and <Enter> to continue.
1   Continue

IF (Code10 = RESPONSE) AND (Code12 = RESPONSE) THEN
NoRes
You have indicated that you do not wish to receive your child/your blood sample results or have them sent to your GP.
BIOMEDICAL FIELDWORKER: CHECK THAT THIS IS THE CASE WITH THE PARTICIPANT. IF NECESSARY GO BACK AND AMEND.
IF SPEAKING TO THE PARENT/GUARDIAN OF A CHILD AGED 15 OR UNDER EXPLAIN TO THE PARTICIPANT THAT IN THIS CASE THEY WILL NEED TO AGREE FOR THE SURVEY DOCTOR TO CONTACT THEM IF NEEDED (E.G. RESULT IS OUT OF RANGE). IF THEY DON'T AGREE TO THIS A BLOOD SAMPLE CANNOT BE TAKEN FOR CHILDREN.
Press <1> and <Enter> to continue.
1   Continue

IF (Code10 = RESPONSE) AND (Code12 = RESPONSE) THEN
Code13
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.**
BIOMEDICAL FIELDWORKER:
  - THIS PARTICIPANT DOES NOT WANT THEIR RESULTS SENT TO THEM OR THEIR GP. PLEASE ASK THEM TO READ AND **INITIAL (OR TICK) THE STATEMENT 7 (/ STATEMENT 7i IF (Age<16)) IN THE GREY BOX ON THE RELEVANT CONSENT FORM** IN THE CONSENT BOOKLET

- ASK PARTICIPANT TO CIRCLE **CONSENT CODE 13** ON THE FRONT PAGE OF THE CONSENT BOOKLET.

Press <1> and <Enter> to continue.

IF (Code10 = RESPONSE) AND (Code12 = RESPONSE) AND (age <16) THEN
SurDoc
BIOMEDICAL FIELDWORKER: TO TAKE A BLOOD SAMPLE FROM THE CHILD THE PARENT/LEGAL GUARDIAN MUST INITIAL (OR TICK) STATEMENT 7ii IN THE GREY BOX ON THE CONSENT FORM.
IF THEY DO NOT CONSENT TO THE SURVEY DOCTOR CONTACTING THEM IF NEEDED (E.G. WITH AN OUT OF NORMAL RANGE BLOOD ANALYTE RESULT) YOU MUST NOT TAKE A BLOOD SAMPLE.

Do you agree to the survey doctor contacting you to discuss, if necessary, any results that are directly relevant to your child's health?
1   Yes
2   No

IF (SurDoc=Yes) THEN
Code15
BIOMEDICAL FIELDWORKER: **PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.**
BIOMEDICAL FIELDWORKER:
- **ASK PARENT/LEGAL GUARDIAN** TO INITIAL (OR TICK) **STATEMENT 7ii IN THE GREY BOX** IN 'BLOOD SAMPLE' SECTION IN THE CONSENT BOOKLET.
- ASK PARENT/LEGAL GUARDIAN TOCIRCLE **CONSENT CODE 15** ON THE FRONT OF PAGE OF THE CONSENT BOOKLET.
- THE CONSENT BOOKLET CAN NOW BE RETURNED TO THE BIOMEDICAL FIELDWORKER. PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.

Press <1> and <Enter> to continue.
1   Continue

IF (SurDoc=No)
Code16
BIOMEDICAL FIELDWORKER:
- A BLOOD SAMPLE CANNOT BE TAKEN FROM THE CHILD.
- BIOMEDICAL FIELDWORKER: ASK THE PARTICIPANT TO RETURN THE CONSENT BOOKLET TO YOU, FOLLOWING NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.
- CIRCLE **CONSENT CODE 16** ON THE FRONT OF PAGE OF THE CONSENT BOOKLET.
- THE CONSENT BOOKLET CAN NOW BE RETURNED TO THE BIOMEDICAL FIELDWORKER. PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.

Press <1> and <Enter> to continue.
1   Continue

IF (Code09 = RESPONSE) OR (Code11 = RESPONSE) THEN
Code14
BIOMEDICAL FIELDWORKER:
- THE PARTICIPANT HAS AGREED TO FEEDBACK FROM BLOOD SAMPLE RESULTS (TO GP AND/OR TO THEMSELVES).

- ASK PARENT/LEGAL GUARDIAN TO CIRCLE **CONSENT CODES 14 AND 16** ON THE FRONT OF PAGE OF THE CONSENT BOOKLET
- THE CONSENT BOOKLET CAN NOW BE RETURNED TO THE BIOMEDICAL FIELDWORKER. PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS.

Press <1> and <Enter> to continue.

1   Continue

Label

BIOMEDICAL FIELDWORKER: PLEASE NOW USE YOUR BARCODE SCANNER TO ASSIGN A SHEET OF LABELS TO THIS RESPONDENT. PLEASE SCAN THE FIRST BARCODE ON THE SHEET.

IF THE SCANNER IS NOT READING THE BARCODE, PLEASE ENTER THE BARCODE NUMBER FROM THE SHEET OF LABELS USING YOUR KEYBOARD.

: 7 DIGITS

UPDATED HARD CHECK SO LABEL MUST BEGIN '15'

> **IF (Label = *already used in household*) THEN**
> Hard check: THIS BARCODE HAS ALREADY BEEN ASSIGNED TO ANOTHER MEMBER OF THE HOUSEHOLD. PLEASE CHECK THE BARCODE NUMBER AND ENSURE THAT EACH PARTICIPANT HAS A DIFFERENT BARCODE NUMBER.

LblChk

BIOMEDICAL FIELDWORKER: The barcode number entered is (number from **Label**). Is that correct?

1. Yes
2. No

LblEnt

BIOMEDICAL FIELDWORKER: Was the barcode number entered using the scanner, or did you type it in by hand?

1. "Scanner"   Entered using scanner
2. "Typed"   Type in by hand

IF (LclEnt=Typed) THEN
LblTyp

BIOMEDICAL FIELDWORKER: Why did you type the barcode number in by hand?

1. ScWork   "Barcode scanner wasn't working"
2. ScCharg   "Barcode scanner wasn't charged"
3. ScWith   "Didn't have barcode scanner with me"
4. Other   "Other reason (please specify)"

IF (LblTyp = Other) THEN
LblTypO

BIOMEDICAL FIELDWORKER: Enter other reason why barcode number types in by hand.

: STRING

AXExpired
BIOMEDICAL FIELDWORKER: OPEN THE BLOOD TUBE PACK YOU WILL BE USING FOR THIS PARTICIPANT AND REVIEW THE EXPIRY DATE ON THE TUBES.

ARE ANY OF THE TUBES YOU WILL BE USING OUT OF DATE/EXPIRED?

PLEASE NOTE YOU CAN STILL USE OUT OF DATE TUBES FOR BLOOD SAMPLING.
1. Yes
2. No

If AXExpired = Yes
AXExpiredType
BIOMEDICAL FIELDWORKER: IS/ARE THE EXPIRED TUBE(S) THE BLUE SERUM TRACER ELEMENT 6ML TUBE AND/OR OTHER TUBES?
1. Blue Serum Tracer Element 6ml tube **only**
2. Both the Serum Tracer Element 6ml tube **and** other tube(s)
3. Tube(s) other than the Serum Tracer Element 6ml tube

IF AXExpiredType = 1 or 2
AXExpiredSENDate
BIOMEDICAL FIELDWORKER: WHAT IS THE EXPIRY DATE ON THE EXPIRED Blue Serum TE 6ml (SEN1/SEN2) TUBE(S)? IF YOU ARE COLLECTING TWO Serum TE 6ml TUBES FOR THIS PARTICIPANT AND THE EXPIRY DATES ARE DIFFERENT ENTER THE DATE OF THE MOST EXPIRED TUBE.
:DATE
Require response

IF AXExpiredSType = 2 or 3
AXExpiredEN1
BIOMEDICAL FIELDWORKER: IS THE Lilac EDTA K3 2ml (EN1) TUBE EXPIRED?
1. Yes
2. No

IF AXExpiredEN1 = Yes
AXExpiredEN1Date
BIOMEDICAL FIELDWORKER: WHAT IS THE EXPIRY DATE ON THE EXPIRED Lilac EDTA K3 2ml (EN1) TUBE?
:DATE
Require response

IF AXExpiredSType = 2 or 3 AND (Age >= 7)
AXExpiredLHN6ml
BIOMEDICAL FIELDWORKER: IS/ARE THE Green Lithium Heparin LH 6ml (LHN1/LHN2) TUBE(S) EXPIRED?
1. Yes
2. No

IF AXExpiredLHN6ml = Yes
AXExpiredLHN6mlDate
BIOMEDICAL FIELDWORKER: WHAT IS THE EXPIRY DATE ON THE EXPIRED Green Li Hep LH 6ml (LHN1) TUBE? IF YOU ARE COLLECTING TWO Green Lithium Heparin LH 6ml TUBES

FOR THIS PARTICIPANT AND THE EXPIRY DATES ARE DIFFERENT ENTER THE DATE OF THE MOST EXPIRED TUBE.
:DATE
Require response

IF AXExpiredSType = 2 or 3 AND (Age = 18 months – 6 years)
AXExpiredLHN4ml
BIOMEDICAL FIELDWORKER: IS THE Green Lithium Heparin LH 4ml (LHN1) TUBE EXPIRED?
1. Yes
2. No

IF AXExpiredLHN4ml = Yes
AXExpiredLHN4mlDATE
BIOMEDICAL FIELDWORKER: WHAT IS THE EXPIRY DATE ON THE EXPIRED Green Li Hep LH 6ml (LHN1) TUBE?
:DATE
Require response

IF AXExpiredSType = 2 or 3 AND (Age >= 16)
AXExpiredEN2
BIOMEDICAL FIELDWORKER: IS THE Purple EDTA K3 4ml (EN1) tube expired?
1. Yes
2. No

IF AXExpiredEN2 = Yes
AXExpiredEN2Date
BIOMEDICAL FIELDWORKER: WHAT IS THE EXPIRY DATE ON THE EXPIRED Purle EDTA K3 4ml (EN2) TUBE?
:DATE
Require response

Hidden variable
Spare4
Derive text based on responses to AXExpired to AXExpiredEN1Date.
Characters[1to5]: IF AXExpired = No, enter text "None." Otherwise enter "0000."
Characters[6to13]: IF AXEpiredType = 1 or 2, enter text "SEN" then month and year entered at AXExpiredSENDate as digits, e.g. "0322" then "." E.g. "SEN0322." Otherwise enter "0000000."
Characters[14to21]: IF AXEpiredEN1 = Yes, enter text "EN1" then month and year entered at AXExpiredEN1Date as digits, e.g. "0322" then "." E.g. "EN10322." Otherwise enter "0000000."

Hidden variable
Spare5
Derive text based on responses to AXExpiredLHN6ml to AXExpiredEN2Date
Characters[1to9]: IF AXExpiredLHN6ml = Yes, enter text "L6ml" then month and year entered at AXExpiredLHN6mlDate as digits, e.g. "0322" then "." E.g. "L6ml0322." Otherwise enter "00000000."
Characters[10to18]: IF AXExpiredLHN4ml = Yes, enter text "L4ml" then month and year entered at AXExpiredLHN4mlDate as digits, e.g. "0322" then "." E.g. "L4ml0322." Otherwise enter "00000000."

Characters[19to26]: IF AXEpiredEN2 = Yes, enter text "EN2" then month and year entered at

AxExpiredEN2Date as digits, e.g. "0322" then "." E.g. "EN20322." Otherwise enter "0000000."

IF (CryOrAm = Cryogesic) THEN
DoCry
BIOMEDICAL FIELDWORKER: **Blood sample with Cryogesic spray.**
-   Apply Cryogesic spray following instructions.
Press <1> and <Enter> to continue.
1   Continue

IF (Age >=16) THEN
TakSAd1
BIOMEDICAL FIELDWORKER: First check you have **all applicable signatures and the**
relevant boxes have been initialled (OR ticked) on the consent form. Then …
A) Take blood samples in the following order:
   1. EDTA K3 (2.0ml) tube Lilac cap, label EN1 PROJ2170
   2. Serum TE (6.0ml) tube Royal Blue cap, label SEN1
   3. Li Hep LH (6.0ml) tube Green cap, label LHN1
   4. Serum TE (6.0ml) tube Royal Blue cap, label SEN2
   5. Li Hep LH (6.0ml) tube Green cap, label LHN2
   6. EDTA K3 (4.0ml) tube Purple cap, label EN2
B) Stick the barcoded label VERTICALLY LENGTHWAYS along the tube (see project instructions
for image).

> **IF (Method = Val and (Age >= 16) AND (BIValConf =Yes)) THEN**
> **C)** Stick appropriate barcoded labels on the consent booklet (NCON), field lab despatch
> form (FL1), Addenbrookes Biorepository despatch form (EN1POST), MRC EPI Cambs
> Posted Cool Box despatch form (use a spare barcode label from the set allocated), and
> despatch note (OFFDESP).

> **IF (Method = PO) or ((Method = Val) and (Age<16**) or **((Method = Val) and (Age >=**
> **16) AND (BIValConf =No))**) **THEN**
> **C)** Stick appropriate barcoded labels on the consent booklet (NCON), Blood Sample
> Despatch Form (PCB DESP), and despatch note (OFFDESP).

Press <1> and <Enter> to continue.
1   Continue

IF (Age >=16) THEN
TakSAd2
BIOMEDICAL FIELDWORKER:
Please take careful note of the order (and therefore numbering) of the delivery and
vacutainers labels.
-   Check to ensure you have used the correct barcoded labels for THIS participant……
    Barcode number:

> **IF (Method = Val and (Age >= 16) AND (BIValConf =Yes)) THEN**
> {PLEASE REMEMBER TO DELIVER A PACK OF MICROTUBES (PARTICIPANT AGED

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16 + - PINK LABELLED MICROTUBES PACK), FIELD LAB LABELS AND FIELD LAB DESPATCH NOTE TO YOUR LOCAL LAB WHEN YOU DELIVER THESE SAMPLES!

REMEMBER THAT THE TUBES MUST BE DELIVERED BY THE FOLLOWING MEANS:
-EN1 PROJ2170: To Biorepository in plastic polylope
-SEN1: To Field Lab
-LHN1: To Field Lab
-SEN2: Posted cool box via Royal Mail Post Office
-LHN2: Posted cool box via Royal Mail Post Office
-EN2: Posted cool box via Royal Mail Post Office**}**

Press <1> and <Enter> to continue.
1   Continue
IF (Age = 7-15) THEN
TakSCO1

BIOMEDICAL FIELDWORKER:
First check you have **all applicable signatures and the relevant boxes have been initialled (OR ticked) on the consent form**. Then…
A) Take blood samples in the following order (Child 7-15 years – GREEN labelled vacutainers pack):
1.   EDTA K3 (2.0ml) tube Lilac cap, label EN1 PROJ2170
2.   Serum TE (6.0ml) tube Royal Blue cap, label SEN1
3.   Li Hep LH (6.0ml) tube Green cap, label LHN1
4.   Serum TE (6.0ml) tube Royal Blue Cap, label SEN2
B) Stick the barcoded label VERTICALLY LENGTHWAYS along the tube on the tube (see project instructions for image).

C) Stick appropriate barcoded labels on the consent booklet (NCON), Blood Sample Despatch Form (PCB DESP), and despatch note (OFFDESP).

Press <1> and <Enter> to continue.
1   Continue.

IF (Age = 7-15) THEN
TakSCO2
PLEASE TAKE CAREFUL NOTE OF THE ORDER (AND THEREFORE NUMBERING) OF THE DELIVERY LABELS.
BIOMEDICAL FIELDWORKER: CHECK TO ENSURE YOU HAVE USED THE CORRECT BARCODED LABELS FOR THIS PARTICIPANT……. BARCODE NUMBER:

Press <1> and <Enter> to continue
1   Continue

IF (Age= 18 months – 6 years)
TakSCY

BIOMEDICAL FIELDWORKER:

FIRST CHECK YOU HAVE **ALL APPLICABLE SIGNATURES AND THE RELEVANT BOXES HAVE BEEN INITIALLED (OR TICKED) ON THE CONSENT FORM**. THEN…

A) TAKE BLOOD SAMPLES IN THE FOLLOWING ORDER (CHILD 1.5-6 YEARS – BLUE LABELLED VACUTAINERS PACK):

1. EDTA K3 (2.0ML) TUBE LILAC CAP, LABEL EN1 PROJ2170
2. SERUM TE (6.0ML) TUBE ROYAL BLUE CAP, LABEL SEN1
3. LI HEP LH (4.0ML) TUBE GREEN CAP, LABEL LHN1

B) STICK THE BARCODED LABEL LENGTHWAYS ON THE TUBE (SEE PROJECT INSTRUCTIONS FOR IMAGE).

C) STICK APPROPRIATE BARCODED LABELS ON THE CONSENT BOOKLET (NCON), BLOOD SAMPLE DESPATCH FORM (PCB DESP), AND DESPATCH NOTE (OFFDESP).

CHECK TO ENSURE YOU HAVE USED THE CORRECT BARCODED LABELS FOR THIS PARTICIPANT……. BARCODE NUMBER:

Press <1> and <Enter> to continue

    1   Continue

IF (TakSAd2 = Response OR TakSCO2 = Response OR TakSCY = Response) THEN
TakSAd3

Activate the TimeStrip Complete temparture indicator and stick it onto the short inside wall of the box. Following this, fold the top polystyrene lid down and place the completed Posting Cool Box despatch note into the box on top of the polystyrene lid.

Have you activated the TimeStrip Complete temperature indicator and did the activation window turn blue and the word ON appear in the activation window?
1 Yes
2 No

IF (TakSAd3 = No) THEN
TakSAd4

Please re-open the cool box, replace the TimeStrip Complete indicator ensuring that you activate the TimeStrip Complete temperature monitor correctly.
Press 1 and Enter to Continue

SampTime
BIOMEDICAL FIELDWORKER: Code the time that first blood sample was taken.
:TIMETYPE

IF (Age >=16) THEN
SampF1A
BIOMEDICAL FIELDWORKER: Code if the EDTA K3 (Lilac, 2.0ml) tube filled (label EN1).
1   YesF   "Yes, FULLY filled",
2   YesP   "Yes, PARTIALLY filled",
3   No   "No, not filled"

IF (Age >=16) THEN
SampF2A
BIOMEDICAL FIELDWORKER: Code if the Serum TE (Royal Blue, 6.0ml) tube filled (SEN1).
1   YesF   "Yes, FULLY filled",
2   YesP   "Yes, PARTIALLY filled",
3   No   "No, not filled"

IF AND (Age >=16) THEN
SampF3A
BIOMEDICAL FIELDWORKER: Code if the 1st Lithium heparin (Green, 6.0ml) tube filled (label
LHN1).
1   YesF   "Yes, FULLY filled",
2   YesP   "Yes, PARTIALLY filled",
3   No   "No, not filled"

IF (Age >=16) THEN
SampF4A
BIOMEDICAL FIELDWORKER: Code if the Serum TE (Royal Blue, 6.0ml) tube filled (label
SEN2).
1   YesF   "Yes, FULLY filled",
2   YesP   "Yes, PARTIALLY filled",
3   No   "No, not filled"

IF (Age >=16) THEN
SampF5A
BIOMEDICAL FIELDWORKER: Code if the 2nd Lithium heparin (Green, 6.0ml) tube filled (label
LHN2).
1   YesF   "Yes, FULLY filled",
2   YesP   "Yes, PARTIALLY filled",
3   No   "No, not filled"

IF (Age >=16) THEN
SampF6A
BIOMEDICAL FIELDWORKER: Code if the EDTA K3 (Purple, 4.0ml) tube filled (label EN2).
1   YesF   "Yes, FULLY filled",
2   YesP   "Yes, PARTIALLY filled",
3   No   "No, not filled"

IF (Age = 7-15) THEN
SampF1CO
BIOMEDICAL FIELDWORKER: Code if the EDTA K3 (Lilac, 2.0ml) tube filled (label EN1).
1   YesF   "Yes, FULLY filled",
2   YesP   "Yes, PARTIALLY filled",
3   No   "No, not filled"

IF (Age = 7-15) THEN
SampF2CO
BIOMEDICAL FIELDWORKER: Code if the 1st serum TE (Royal Blue, 6.0ml) tube filled (label
SEN1).
1   YesF   "Yes, FULLY filled",
2   YesP   "Yes, PARTIALLY filled",
3   No   "No, not filled"

IF (Age = 7-15) THEN
SampF3CO
BIOMEDICAL FIELDWORKER: Code if the Lithium heparin (Green, 6.0 ml) tube filled (label
LHN1).
1   YesF   "Yes, FULLY filled",
2   YesP   "Yes, PARTIALLY filled",
3   No   "No, not filled"

IF (Age = 7-15) THEN
SampF4CO
BIOMEDICAL FIELDWORKER: Code if the 2nd Serum TE (Royal Blue, 6.0ml) tube filled (label SEN2).
YesF   "Yes, FULLY filled",
YesP   "Yes, PARTIALLY filled",
No   "No, not filled"

IF (Age= 18 months – 6 years)
SampF1CY
BIOMEDICAL FIELDWORKER: Code if the EDTA K3 (Lilac, 2.0ml) tube filled (label EN1).
1   YesF   "Yes, FULLY filled",
2   YesP   "Yes, PARTIALLY filled",
3   No   "No, not filled"

IF (Age= 18 months – 6 years)
SampF2CY
BIOMEDICAL FIELDWORKER: Code if the Serum TE (Royal Blue, 6.0ml) tube filled (label SEN1).
1   YesF   "Yes, FULLY filled",
2   YesP   "Yes, PARTIALLY filled",
3   No   "No, not filled"

IF (Age= 18 months – 6 years)
SampF3CY
BIOMEDICAL FIELDWORKER: Code if the Lithium heparin (Green, 4.0ml) tube filled (label LHN1).
1   YesF   "Yes, FULLY filled",
2   YesP   "Yes, PARTIALLY filled",
3   No   "No, not filled"

SampTak *(Derived from SampF1A – SampF3CY)*
Blood sample outcome:
1   YesF   "Blood sample obtained - all full"
2   YesP   "Blood sample obtained - not all full",
3   No   "No blood sample obtained"

IF (PVPerNo = 2) AND (age <11) THEN
PhlebID
Enter the paediatric phlebotomist's or 'extended role' nurse's ID number who took the blood sample.
Or, if you as a paediatric phlebotomist or an 'extended role' nurse took the blood sample enter your ID number.
Just enter the 4 digit number.
0001…9997

IF (PVPerNo = 2) AND (age <11) THEN
VPForm
Please remind the paediatric phlebotomist or 'extended role' nurse to complete the paper copy of the venepuncture checklist.
If you as a paediatric phlebotomist or an 'extended role' nurse took the blood sample then the paper checklist does not need to be completed.
Continue

VpHand
Was the participant left handed or right handed?
1   Left   "Left handed"
2   Right   "Right handed"

VpArm
Which arm did you use to take blood?
1   Left   "Left arm"
2   Right   "Right arm"
3   Both arms "Both arms"

VpSkin
Code the skin condition of the arm used.
1   Intact   "Skin intact"
2   NotIntac   "Skin not intact"

VpAlco
Did you use an alcohol wipe?
1   Yes
2   No

IF (PDoCryAme = 1) THEN
CryTimH
You used cryogesic spray on this participant.
What time did you apply the Cryogesic spray?
Record the time using a 24 hour clock.
Enter the **hour** here.
0..23

IF (PDoCryAme = 1) THEN
CryTimM
BIOMEDICAL FIELDWORKER: Enter the **minutes** here.
0..59

IF (PDoCryAme = 1) THEN
CryTime
What time did you apply the Cryogesic spray? (DV)
: TIMETYPE

IF (PDoCryAme = 1) THEN
CrySens
Was the participant sensitive to Cryogesic spray?
IF THERE WAS A SEVERE LOCAL REACTION, PARTICIPANT IS LIGHTHEADED OR
SEDATED, CONTACT THE BIOMEDICAL CENTRE
1   Yes
2   No

IF (PDoCryAme = 1) THEN
CryExpD
Record the expiry date of the Cryogesic spray used.
Enter the **day** here.
1..31

IF (PDoCryAme = 1) THEN
CryExpM
BIOMEDICAL FIELDWORKER: Enter the code for the **month** here.
1 January,
2 February,
3 March,
4 April,
5 May,
6 June,
7 July,

8 August,
9 September,
10 October,
11 November,
12 December

IF (PDoCryAme = 1) THEN
CryExpY
BIOMEDICAL FIELDWORKER: Enter the **year** here.
2018-2050

IF (PDoCryAme = 1) THEN
CryExp
Expiry date of the Cryogesic spray used (DV)
: DATETYPE

IF (PDoCryAme = 1) THEN
CryBat
Record the batch number of the Cryogesic
: STRING [20]

IF (PDoCryAme = 2) THEN
AmeTimH
You used AMETOP gel on this participant.
What time did you apply the AMETOP gel?
Record the time using a 24 hour clock.
Enter the **hour** here.
0..23

IF (PDoCryAme = 2) THEN
AmeTimM
BIOMEDICAL FIELDWORKER: Enter the **minutes** here.
: 0..59

IF (PDoCryAme = 2) THEN
AmeTime
What time did you apply the Ametop gel? (DV)
: TIMETYPE

IF (PDoCryAme = 2) THEN
AmeSens
Was the participant sensitive to AMETOP Gel?
IF THERE WAS A SEVERE LOCAL REACTION, PARTICIPANT IS LIGHTHEADED OR
SEDATED, CONTACT THE BIOMEDICAL CENTRE.

IF (PDoCryAme = 2) THEN
AmeExpD
Record expiry date of the Ametop gel used.
Enter the **day** here.
:1..31

IF (PDoCryAme = 2) THEN
AmeExpM
BIOMEDICAL FIELDWORKER: Enter the code for the **month** here.
1 January,
2 February,
3 March,
4 April,

5   May,
6   June,
7   July,
8   August,
9   September,
10 October,
11 November,
12 December

IF (PDoCryAme = 2) THEN
AmeExpY
BIOMEDICAL FIELDWORKER: Enter the **year** here.
1890..2050

IF (PDoCryAme = 2) THEN
AmeEXP
Expiry date of the Ametop used (DV)
DATETYPE

IF (PDoCryAme = 2) THEN
AmeBatch
Record the batch number of the Ametop
: STRING [20]

VpSTime
Time of answering VpProb
TIMETYPE

VpSDate
Date of answering VpProb
DATETYPE

VpSam
Code the number of (successful or unsuccessful) attempts made to take blood.
REMEMBER UP TO **2 ATTEMPTS** AT TAKING BLOODS CAN BE MADE FOR BOTH ADULTS
AND CHILDREN.
1   First   "Sample taken on first attempt"
2   Second   "Sample taken on second attempt"
3   Failed   "Both attempts failed"
4   NoSecond   "First attempt failed and no second attempt"

VpPress
Code who applied pressure to the puncture site.
1   Biomedical fieldworker
2   Phleb   "Phlebotomist or 'extended role' nurse"
3   Participant
4   Parent
5   Partner   "Partner or spouse"

VpSens
Was the participant sensitive to the tape or plaster?
1   Sense   "Sensitive to tape/plaster"
2   Notsense   "**Not** sensitive to tape/plaster"
3   NotChec   "(Did not check)"

VpProb
Was there any abnormality noted after 5 minutes?
(Please remember to recheck the site after completion of the blood sample module.)

1	Sense	"Sensory deficit"
2	Haematoma	
3	Swelling	
4	Other	"Other (describe at next question)"
5	None	

IF (VpProb= Other) THEN
VpOther
Record the details of the other abnormality fully.
: STRING [135]

IF (VpProb<>None) THEN
VpDetail
You have coded that an abnormality was noted after 5 minutes.
Please record the action you took when you noticed this abnormality in the Consent Booklet.
There is space at the back of the Consent Booklet for you to write up these details fully.
Press <1> and <Enter> to continue
1   Continue

VpCheck
Did you re-check the puncture site after completion of the blood sample module?
1   Yes   "Yes, site was re-checked"
2   No   "No, site was not re-checked"

IF (SendSam = Yes) THEN
GPIntro
This is the start of the GP Details block

Press <1> and Enter to continue.

GPName
In order to send your results to your GP I need their contact details.
Please tell me the surname of your GP.
BIOMEDICAL FIELDWORKER: Enter surname of respondent's GP

:STRING[20]

GPSearch
Please tell me the name of your GP's practice.
BIOMEDICAL FIELDWORKER: Search window will appear once you begin typing.
BIOMEDICAL FIELDWORKER: If respondent does not know practice name, prompt for street name, area or town etc.
BIOMEDICAL FIELDWORKER: If you cannot see the practice at first, try other search terms.
BIOMEDICAL FIELDWORKER: If the surgery is not on the list, type ""Not Found"" and then <Enter> in order to enter details manually.
:STRING[50]
     triPracID : STRING[6]
     triPracName : STRING[51]
     triPracAdd1 : STRING[45]
     triPracAdd2 : STRING[40]
     triPracAdd3 : STRING[35]
     triPracAdd4 : STRING[30]
     triPracAdd5 : STRING[20]
     triPracPC : STRING[8]
     triPracTel : STRING[14]

IF (GPSearch = EMPTY) THEN

mPracName
Please tell me the name of your GP's practice.
BIOMEDICAL FIELDWORKER: USE INITIAL CAPITALS (E.G. 'The Orchard Surgery').
: STRING[60]

mPracAdd1
Please tell me the address of your GP's practice, including the post code.
BIOMEDICAL FIELDWORKER: ADDRESS FIRST LINE:
: STRING[40]

mPracAdd2
Address second line:
: STRING[40]

mPracAdd3
Address third line:
: STRING[40]

mPracAdd4
Address fourth line:
: STRING[40]

mPracAdd5
Address fifth line:
: STRING[40]

mPracPC
BIOMEDICAL FIELDWORKER: ENTER GP POSTCODE. USE CAPITAL LETTERS AND LEAVE
A SPACE BETWEEN THE TWO PARTS OF THE POSTCODE, E.G. 'TY12 8QQ'.
: STRING[8]

mPracTel
Please tell me the telephone number of your GP's practice.
BIOMEDICAL FIELDWORKER: ENTER THE FULL NUMBER INCLUDING THE DIALLING
CODE.
IF TELEPHONE NUMBER IS NOT KNOWN, LEAVE BLANK, PRESS ENTER AND THEN CODE
AS DON'T KNOW.
: STRING[14]

GPAddCon
BIOMEDICAL FIELDWORKER: THE GP DETAILS ARE AS FOLLOWS. PLEASE CHECK THEY
ARE CORRECT.
Practice Name :
Address Line 1 :
Address Line 2 :
Address Line 3 :
Address Line 4 :
Address Line 5 :
Postcode :
Telephone Number :

1   Correct   "Correct",
2   Not correct - Go back and change

GPDiff
Does your GP know you by a different name to (name)?
1   GP uses different name

2   GP uses same name

IF (GPDif = GP uses different name) THEN
NDTitle
What name does your GP know you by?
: TTitle

NDTtlTxt
BIOMEDICAL FIELDWORKER: ENTER TITLE
: STRING[20]

NDFirst
First name
: STRING[20]

NDSurn
Surname
: STRING[20]

GPEnd
BIOMEDICAL FIELDWORKER: THIS IS THE END OF THE GP DETAILS MODULE
BIOMEDICAL FIELDWORKER: IF THEY ARE CORRECT, PLEASE RECORD ON THE FRONT
PAGE OF THE PARTICIPANT'S CONSENT BOOKLET.
Press <1> and <ENTER> to record the duration of the module and continue.

Press 1 and enter to continue

IF (PVPerNo = 2) AND (Age < 11) THEN
PhlebVP
BIOMEDICAL FIELDWORKER: PLEASE REMEMBER TO COLLECT THE COMPLETED
VENEPUNCTURE CHECKLIST FROM THE PAEDIATRIC PHLEBOTOMIST OR 'EXTENDED
ROLE' NURSE AND RETURN IT TO THE OFFICE.
PAEDIATRIC PHLEBOTOMIST OR EXTENDED ROLE NURSE: THE PAPER
VENEPUNCTURE CHECKLIST DOES NOT NEED TO BE COMPLETED IF YOU TOOK THE
BLOOD SAMPLE
1   Continue

IF ((SampTak = YesF) OR (SampTak = YesP)) AND (Age>=4) THEN
BldProv
BIOMEDICAL FIELDWORKER: Can you just confirm, did the participant provide a fasting or non-
fasting sample?
1.   Fasting   "Fasting"
2.   NonFast   "Non-fasting"

IF (BldProv=Fasting) AND IF ((PVisit=1 AND PEat=Yes) OR (PVisit=2 AND TEat=Yes)) THEN
BldFY
BIOMEDICAL FIELDWORKER: You recorded earlier that the participant had eaten or drunk
something other than water in the last 8 hours. Please either go back and change your answer at
BldProv, or explain below why you collected a fasting blood sample even though you recorded
that they had eaten earlier in the interview.

IF (BldProv=NonFast) THEN
BldNFY
BIOMEDICAL FIELDWORKER: Please explain why a fasting blood sample was not able to be
obtained
:OPEN

IF (SampTak = YesF) OR IF (SampTak = YesP)
SamDifC
BIOMEDICAL FIELDWORKER: Record any problems in taking blood sample.
CODE ALL THAT APPLY.
1	NoProb	"No problem",
2	Small	"Incomplete sample",
3	BadVein	"Collapsing/poor veins",
4	TakeTwo	"Second attempt necessary",
5	Faint	"Some blood obtained, but participant felt faint/fainted",
6	NoTour	"Unable to use tourniquet",
7	Other	"Other (SPECIFY AT NEXT QUESTION)"

IF (SamDifC = Other) THEN
OthBDif
BIOMEDICAL FIELDWORKER: Given full details of other problem(s) in taking blood sample.
: STRING [140]

IF (SampTak = No) THEN
NoBSC
BIOMEDICAL FIELDWORKER: Code reason(s) why no blood obtained.
CODE ALL THAT APPLY.
NoVein	"No suitable or no palpable vein/collapsed veins",
Anxious	"Participant was too anxious/nervous",
Faint	"Participant felt faint/fainted",
Other	"Other"

IF (NoBSC = Other) THEN
OthNoBSM
BIOMEDICAL FIELDWORKER: Give full details of reason(s) no blood obtained.
: STRING [140]

Spot Urine (Participant 4+ years)

[Triggered if Method=Tel Or Video]

NDoSpUr
BIOMEDICAL FIELDWORKER: **YOU WILL NOW INTRODUCE THE SPOT URINE SAMPLE FOR (NAME).**
IF THE PARTICIPANT AGREES, THE KIT WILL BE LEFT WITH THE RESPONDENT TO BE POSTED BACK AFTER YOUR VISIT.
PRESS <ENTER> TO CONTINUE
1   Continue

IUrNur
We want to measure the levels of iodine in the body. Iodine is an important nutrient. To measure iodine we would like to collect a small sample of your/(child's name) urine. We cannot get this information from your/their dietary recall or in any other way.
PRESS <ENTER> TO CONTINUE
   1   Continue

NIUrEli
Due to the way that the samples are analysed we are unable to take them from some people.
Answering yes or no: Do you/Does (name of respondent) fall into <u>any</u> of the following categories? BIOMEDICAL FIELDWORKER: READ OUT ALL THE CATEGORIES BEFORE ASKING FOR THE PARTICIPANT TO RESPOND YES OR NO.
     I use a urinary catheter,
     I am pregnant,
     I am breastfeeding.
     FOR CHILD PARTICIPANTS: or my child is aged 4 and older but is NOT dry during the day.
1   Yes
2   No

IF (NIUrEli = No) THEN
NIUrLeaf
BIOMEDICAL FIELDWORKER: PLEASE FOLLOW NATCEN'S PROTOCOLS ON HANDLING DOCUMENTS
Please read this leaflet, it explains about what taking part in the spot urine sample involves.
BIOMEDICAL FIELDWORKER: GIVE LEAFLET TO PARTICIPANT. ALLOW THEM TIME TO READ IT AND ANSWER ANY QUESTIONS.
PRESS <ENTER> TO CONTINUE
   1   Continue

IF (NIUrLeaf = Response AND Age>=16) THEN
NIUrPostAgr

Are you willing to give a urine sample some time after my visit and post it back yourself? You will receive a £5 gift card if you agree to collect and post the sample.
BIOMEDICAL FIELDWORKER: REMIND THE RESPONDENT THAT THE SAMPLE SHOULD BE COLLECTED SOMETIME OVER THE NEXT FEW DAYS.
IF ASKED: IDEALLY PARTICIPANTS SHOULD NOT COLLECT THEIR URINE STRAIGHT AFTER YOUR VISIT AS THEY HAVE RECENTLY FASTED.
BIOMEDICAL FIELDWORKER: THE COLLECTED SAMPLE KIT IS PRE-PAID AND CAN BE POSTED USING A POST BOX OR TAKEN TO A POST OFFICE.
1   Yes
2   No

IF (NIUrLeaf = Response AND Age<16) THEN
NIUrPostAgr
Are you willing for (child's name) to give a urine sample some time after my visit and post it back yourself? You will receive a £5 gift card if you agree to collect and post the sample.
BIOMEDICAL FIELDWORKER: THE SAMPLE SHOULD ONLY BE COLLECTED AFTER THE RESPONDENT HAS EATEN SOMETHING FOLLOWING THIS VISIT.
BIOMEDICAL FIELDWORKER: THE COLLECTED SAMPLE KIT IS PRE-PAID AND CAN BE POSTED USING A POST BOX OR TAKEN TO A POST OFFICE.
1   Yes
2   No

IF (NIUrPostAgr = YES AND Age >= 16) THEN
NIUrConA
 BIOMEDICAL FIELDWORKER: REMEMBER TO FOLLOW THE NATCEN COVID PROTCOLS FOR THE SPOT URINE SAMPLE AND HANDLING DOCUMENTS
BIOMEDICAL FIELDWORKER: EXPLAIN THE NEED FOR WRITTEN CONSENT.
GIVE PARTICIPANT THE WHITE CONSENT FORM.
PARTICIPANT MUST READ AND INITIAL (OR TICK) THE STATEMENTS THEY AGREE TO BEFORE SIGNING.
LEAVE THE BOTTOM COPY WITH THE PARTICIPANT; SEND THE TOP COPY TO BRENTWOOD.
BIOMEDICAL FIELDWORKER: DETAILS FOR CONSENT FORM…
Serial number:
Check letter:
Participant number:
Sex:
Date of birth:
PRESS <ENTER> TO CONTINUE
     1   Continue

IF (NIUrPostAgr = YES AND Age < 16) THEN
NIUrConC
 BIOMEDICAL FIELDWORKER: REMEMBER TO FOLLOW THE NATCEN COVID PROTCOLS FOR THE SPOT URINE SAMPLE
BIOMEDICAL FIELDWORKER: EXPLAIN THE NEED FOR WRITTEN CONSENT.
GIVE THE PARTICIPANT'S PARENT / LEGAL GUARDIAN THE BLUE CONSENT FORM.

PARENT / LEGAL GUARDIAN MUST READ AND INITIAL (OR TICK) THE STATEMENTS THEY AGREE TO BEFORE SIGNING.
GIVE PINK CHILD ASSENT FORM TO CHILD AND ASK THEM TO CIRCLE YES OR NO NEXT TO STATEMENTS THEN SIGN NAME IF YOU THINK THEY CAN READ AND UNDERSTAND.
LEAVE THE BOTTOM COPIES WITH THE PARTICIPANT; SEND THE TOP COPIES TO BRENTWOOD.
BIOMEDICAL FIELDWORKER: DETAILS FOR CONSENT FORM…
Serial number:
Check letter:
Participant number:
Sex:
Date of birth:
PRESS <ENTER> TO CONTINUE
    1   Continue

IF (NIUrPostAgr = YES AND Age < 16) THEN
NIUrAss
BIOMEDICAL FIELDWORKER: HAS CHILD SIGNED THE PINK ASSENT FORM?
1   Yes   "Yes"
2   No   "No"
3   NotAsked   "**Biomedical fieldworker**
 code only: Did not ask child to sign form"

IF (NIUrConA = Response or NIUrConC = Response) THEN
NIUrCon2
BIOMEDICAL FIELDWORKER: WAS WRITTEN CONSENT GIVEN TO OBTAIN A URINE SAMPLE FOR THE MEASURMENT OF IODINE?
1   Yes
2   No
NoDK/NoREF

IF (NIUrCon2 = Yes)
NIUrCon3
BIOMEDICAL FIELDWORKER: WAS WRITTEN CONSENT GIVEN FOR ANY REMAINING URINE TO BE STORED AND USED IN FUTURE RESEARCH?
1 Yes
2 No
NoDK/NoREF

IF (NIUrPostAgr = No) OR (NIUrCon2 = No) THEN
NNoIUri
BIOMEDICAL FIELDWORKER: NO PLACEMENT OF SPOT URINE.
PRESS <ENTER> TO CONTINUE
    1   Continue => End of module

IF (NIUrCon2 = Yes) THEN
NUrLabel
BIOMEDICAL FIELDWORKER: PLEASE NOW USE YOUR BARCODE SCANNER TO ASSIGN A HORIZONTAL ROW OF LABELS TO THIS RESPONDENT.
PLEASE SCAN THE FIRST BARCODE ON THE ROW.

IF THE SCANNER IS NOT READING THE BARCODE, PLEASE ENTER THE BARCODE NUMBER FROM THE SHEET OF LABELS USING YOUR KEYBOARD.
: STRING [7]

UPDATED HARD CHECK SO LABEL MUST BEGIN '15'

IF (NUrLabel = *already used in household*) THEN
Hard check: THIS BARCODE HAS ALREADY BEEN ASSIGNED TO ANOTHER MEMBER OF THE HOUSEHOLD. PLEASE CHECK THE BARCODE NUMBER AND ENSURE THAT EACH PARTICIPANT HAS A DIFFERENT BARCODE NUMBER

NUrLblChk
BIOMEDICAL FIELDWORKER: THE BARCODE NUMBER ENTERED IS (NUMBER FROM **NUrLABEL**). IS THAT CORRECT?
1. Yes
2. No

IF (NUrLblChk = No) THEN
Error message: BIOMEDICAL FIELDWORKER: PLEASE RESCAN OR RE-TYPE THE BAR CODE NUMBER

IF (NUrLblChk = Yes) THEN
NUrLblEnt
BIOMEDICAL FIELDWORKER: WAS THE BARCODE NUMBER ENTERED USING THE SCANNER, OR DID YOU TYPE IT IN BY HAND?
1. "Scanner"   Entered using scanner
2. "Typed"   Type in by hand

IF (NUrLblEnt=Typed) THEN
NUrLblTyp
BIOMEDICAL FIELDWORKER: WHY DID YOU TYPE THE BARCODE NUMBER IN BY HAND?
1. ScWork   "Barcode scanner wasn't working"
2. ScCharg   "Barcode scanner wasn't charged"
3. ScWith   "Didn't have barcode scanner with me"
4. Other   "Other reason (please specify)"

IF (NUrLblTyp = Other) THEN
NUrLblTypO
BIOMEDICAL FIELDWORKER: ENTER OTHER REASON WHY BARCODE NUMBER TYPED IN BY HAND.
: STRING [250]

IF (NUrLabel=Response) THEN
NIUrLabelP

BIOMEDICAL FIELDWORKER: **(Participant's name) WILL BE POSTING THE SAMPLE THEMSELVES. YOU NEED TO STICK LABELS TO THE TUBE, DISPATCH NOTE AND CONSENT FORM.**

STICK THE BARCODE LABELS AS FOLLOWS:
USAM – DIRECTLY ON THE URINE SAMPLE CONTAINER (PLACE THIS LENGTHWAYS ALONG THE TUBE)
UDESP – ON THE URINE DISPATCH FORM
UCON – ON THE URINE SAMPLE CONSENT FORM OFFICE COPY
PRESS <ENTER> TO CONTINUE
    1   Continue

IF (NIUrPostAgr = YES AND NIUrCon2 = Yes) THEN
NIUrPostPlc
BIOMEDICAL FIELDWORKER: GIVE THE PARTICIPANT:
SPOT URINE HOME LEAFLET
SPOT URINE KIT
PRE-PAID ENVELOPE
ASK THE PARTICIPANT TO COLLECT A SAMPLE WITHIN THE NEXT WEEK AND POST BACK WITHIN 24HOURS.
PRESS <ENTER> TO CONTINUE
    1   Continue

NIUr1End
BIOMEDICAL FIELDWORKER: END OF THE IODINE SPOT URINE COLLECTION MODULE.
      1   Continue

NIUr1EDat
Spot Urine intro end date
: DATETYPE

NIUr1ETim
Spot Urine intro end time
: TIMETYPE

GIFT CARD

ThanksB
BIOMEDICAL FIELDWORKER: THANK THE PARTICIPANT FOR THEIR CO-OPERATION.

BIOMEDICAL FIELDWORKER: PLEASE GET A GIFT CARD READY FOR THE PARTICIPANT.
THE PARTICIPANT WILL RECEIVE {IF SampTak = YesF or YesP: "£15 FOR PROVIDING A
BLOOD SAMPLE} {IF (SampTak = YesF or YesP) AND (NIUr2PostAgr = Yes)): "AND"} {IF
(NIUr2PostAgr = Yes): "£5 FOR AGREEING TO PROVIDE A URINE SAMPLE"}.
PLEASE FOLLOW NATCEN'S COVID PROTOCOLS ON HANDLING DOCUMENTS/GIFT
CARDS.
Press <1> and <Enter> to continue.
1   Continue

GCard
Gift card number for participant
: STRING [30]

> **Gift I**
> BIOMEDICAL FIELDWORKER:
> Please get a gift card ready for the participant.
> Before handing over ...
> Write £5/£15/£20 in the circle at the top right-hand corner of the card
> Enter the last 8 digits of the card in the next question.
> Press 1 and Enter to continue.
>
> **GiftNX**
> Enter the last 8 digits of the card number
> :STRING[8]
>
> **GiftBad**
> The 8 digit number you entered have not been recognised.
> **Please leave the card with the participant**
> **and record the number in special action SAS2Act in the admin block.You will need to use code 1 (Yes) at SAS1Act to get to SAS2Act**
> Please remember that the gift card will not be activated until you have completed the interview with the household and transmitted. After transmission, it takes the office up to 72 hours to activate the giftcard. Please make the household aware of this.
> Press 1 and Enter to continue

AllCheck
BIOMEDICAL FIELDWORKER: CHECK BEFORE LEAVING THE PARTICIPANT:
#**That *(participant's name)* has his/her copy of signed consents.**
#**If the participant gave a blood sample the full GP details are entered on front of the Consent Booklet.**
#**If the participant gave a blood sample the name by which the GP knows participant is entered on the front of the Consent Booklet.**
#**That all participant details are completed on front of the Consent Booklet.**
#**That all necessary initials(ticks) and signatures have been collected in the consent booklet.**
#**That appropriate codes have been circled at Question 8 on the front of the Consent Booklet. (For those who have agreed a return visit to give a blood samples, there will be further consents to collect at the return visit):**

{IF InfoSh=Yes: "**CONSENT CODE 01**"}

{IF InfSh=No: "**CONSENT CODE 02**"}
{IF WDraw=Yes: "**CONSENT CODE 03**"}
{IF WDraw=No: "**CONSENT CODE 04**"}
{IF NoCodes=RESPONSE: "**CONSENT CODES 06, 08, 10, 12, 14**"}
{IF NoCodeb=RESPONSE: "**CONSENT CODES 02, 04, 06, 08, 10, 12, 14, 16**"}
{IF BSStop=RESPONSE: "**CONSENT CODES 06, 08, 10, 12**"}
{IF TBSStop=RESPONSE: "**CONSENT CODES 06, 08, 10, 12**"}
{IF Code05C= RESPONSE or Code05A= RESPONSE: " **CONSENT CODE 05**"}
{IF ConstorB=Yes: "**CONSENT CODE 07**"}
{IF ConstorB=No: "**CONSENT CODE 08**"}
{IF SnDrSam=Yes: "**CONSENT CODE 09**"}
{IF SnDrSam=No: "**CONSENT CODE 10**"}
{IF SendSam=Yes: "**CONSENT CODE 11**"}
{IF GPReg=No or SendSam=No: "**CONSENT CODE 11**"}
{IF Code13= RESPONSE: " **CONSENT CODE 13**"}
{IF Code 14=RESPONSE: "**COSENT CODES 14, 16**"}
{IF SurDoc=Yes: "**CONSENT CODE 15**"}
{IF SurDoc=No: "**CONSENT CODE 16**"}

Press <1> and <Enter> to continue.

EndReach
BIOMEDICAL FIELDWORKER: End of questionnaire reached.
Press 1 and <Enter> to continue.

DRUGS

DrC1
BIOMEDICAL FIELDWORKER : Enter code for (*Drug name*).
Enter 999996 if unable to code/ Enter 999999 if unable to code
: STRING [6]

IF (SUBSTRING (DrC1, 1,2) = '02') and (DrC1 <> '021200') AND (Age >15) THEN
YTake1
Do you take (Drug name) because of a heart problem, high blood pressure or for some other reason?
1.   Heart   "Heart problem"
2.   HBP   "High blood pressure"
3.   Other   "Other reason"

IF (YTake1 = Other) THEN
TakeOth1
BIOMEDICAL FIELDWORKER : Give full details of reason(s) for taking (Drug name).
Press <Esc> when finished.
: OPEN

Admin

NotYet
BIOMEDICAL FIELDWORKER: This questionnaire cannot be signed off and returned to head office until you have received the interviewer information over the modem.
Please try again once you have made a connection with the modem (either to transmit other households or to receive information).

Now press 1 and <Enter> to leave this questionnaire.

NChoice
BIOMEDICAL FIELDWORKER: Do you now want to...
1   "..return to the main menu,",
5   "or, complete the admin details and prepare for return to Head Office?
BIOMEDICAL FIELDWORKER: Do not select code 5 until you are sure you wish to send the schedule to head office."

IF (NChoice = 5) THEN
PhonOut
When you phoned the participant to re-introduce the health visit and to make an appointment, what was the outcome of that phone call?
If you made more than one call, please record the outcome from your last call."
1.   "Agreed to visit and agreed to blood sample",
2.   "Agreed to visit but unwilling to provide a blood sample",
3.   "Agreed to visit but unsure about providing a blood sample",

4.   "Not eligible for blood sample and therefore no visit arranged",
5.   "Refused health visit",
6.   "Something else (please specify)"

IF (PhonOut = 6) THEN
PhonOutO
"Please specify"
: OPEN

PhonOp
What was your experience of introducing the blood sample over the phone? Please record as much detail as possible
: OPEN

RespFB
DID THE PARTICIPANT(S) GIVE ANY FEEDBACK OF THEIR EXPERIENCE OF USING INTAKE24 - OR ANY OTHER ASPECT OF THE STUDY, PLEASE RECORD DETAILS HERE

: STRING[100]

IF (Outcome = EMPTY) THEN
UnOut
BIOMEDICAL FIELDWORKER: You haven't completed Biomedical Fieldworker Schedules for every participant.

You must return to each individuals Biomedical Fieldworker Schedule and enter an individual outcome. The only exceptions include:

950. Ran out of time, past end of field work, told to clear out.
960. Re-allocated to another biomedical fieldworker."
Hard Check: If 950 or 960 not entered, they cannot proceed past this question.
Informs biomedical fieldworkers to return to individual biomedical fieldworker schedules

IF (Outcome <> EMPTY) THEN
NurOutc
BIOMEDICAL FIELDWORKER: Final outcome code for **(Participant name)**
If already entered, just press <Enter>.
800   Refuses health visit/Office refusal – not to be interviewed
810   Biomedical fieldworker schedule complete
820   No contact made
830   Refusal by person
831   Refusal of health visit due to Covid-19 concerns
833   Ineligible for blood sample (anticoagulants and/or fits/convulsions)
834   Ineligible for blood sample (under 2 years)
835   Ineligible for blood sample (aged 2-10 years)
836   Parent, Child or Young Person refusal blood sample (aged 1.5-18 years)
840   Proxy refusal
845   Pregnant and/or breast-feeding

IF (NurOutc = 830 or 840) THEN
ReaRef
BIOMEDICAL FIELDWORKER: Enter reason for refusal...
1. NoTime   "Cannot/won't find time"
2. Enough   "Feels done enough already"
3. KnowHlth   "Recently had health check/GP knows health"
4. MedProf   "Had enough of medical profession"
5. NotWant   "Doesn't want to know results/tempt fate"
6. Scared   "Frightened of procedures"
7. Other   "Other"

NTitle
BIOMEDICAL FIELDWORKER: Full name of participant.
First code (**title)**
1.   Mr
2.   Mrs
3.   Ms
4.   Miss
5.   Dr
6.   Other title

IF (NTitle = 6) THEN
NTtlTxt
BIOMEDICAL FIELDWORKER: Enter the other (**title**)
: STRING[15]

NFirst
BIOMEDICAL FIELDWORKER: Enter (**first name**), using initial capitals (eg 'John', not 'john')
: STRING[20]

NSurn

BIOMEDICAL FIELDWORKER: Enter (**surname**), using initial capitals (eg 'Smith', not 'smith')
: STRING[20]

IF (PAge < 16) THEN
NPTitle
BIOMEDICAL FIELDWORKER: Enter full name of participant's parent/legal guardian.
First code (**title)**.
1.   Mr
2.   Mrs
3.   Ms
4.   Miss
5.   Other title

IF (NPTitle = 5) THEN
NPTtlTxt
BIOMEDICAL FIELDWORKER: Enter the other **(title)**
: STRING[15]

IF (PAge < 16) THEN
NPFirst
BIOMEDICAL FIELDWORKER: Now enter **(first name)** of parent/legal guardian, using initial capitals (eg 'John', not 'john')"
: STRING[20]

IF (PAge < 16) THEN
NPSurn
BIOMEDICAL FIELDWORKER: Now enter **(surname)** of parent/legal guardian, using initial capitals (eg 'Smith', not 'smith')"
: STRING[20]

IF (PAge >=4) AND (SampTake = YesF OR YesP) AND (BSFAST = NonFast) THEN
BNFstY
BIOMEDICAL FIELDWORKER OBSERVATION: Why was a non-fasting blood sample obtained?"
1.   ForgFast   "Participant forgot to fast"
2.   UnabFast   "Participant diabetic/ unable to fast"
3.   ChgMind   "Participant changed their mind after fasting sample was booked"
4.   Convert   "Participant was converted to give a blood sample during visit (having previously refused)"
5.   Unwill   "Unwilling to give a fasting blood sample",
6.   UnAppt   "Unwilling/unable to rearrange appointment to provide a fasting blood sample"
7.   Other   "Other (specify at next question)"

IF (BNFastY = Other) THEN
BNFstYO
BIOMEDICAL FIELDWORKER: Please provide more information
: OPEN

IF (PAge >=4) AND (SampTake = YesF OR YesP) THEN
BldInf
When did participant FIRST agree to giving a blood sample?
1.   BefVis   "Before visit while making appointment",
2.   Refused   "Refused while making appointment but agreed during visit"

IF (BldInf = Refused) THEN
BldInfO
How did you convert this initial blood refusal?
: OPEN

NHHVis
How many visits did you make to this household in order to complete the CAPI and sample taking?
If None enter '0'.
: 0..9

IF (CAgeNow < 11) THEN
NPlbVis
If you worked with a phlebotomist or an 'extended role' nurse, how many visits/calls did you arrange with them? (If you are an 'extended role' nurse please enter 0 here)
If None enter '0'."
: 0..7

IF (NPlbVis = 0) THEN
NExVis
Did you, in your capacity as an 'extended role' nurse OR 'paediatric phlebotomist', take the blood sample?
Remember: As an 'extended role' nurse you can take blood from children aged 6 years and over. As a paediatric phlebotomist you can take blood from 18 months and over."
1.   Yes
2.   No

IF (NPlbVis> 0) THEN
SentPVP
 As you did not take the blood, have you sent back the venepuncture checklist for this participant, completed by the paediatric phlebotomist or 'extended role' nurse?"
1   Yes
2   No

IF (SampTak = YesF OR YesP) AND (Method = Val) AND Age>=16 AND (BlValConf =Yes)THEN
NLabVis
How many visits did you make to the Local Laboratory to deliver the blood sample(s)?
If None enter '0'."
: 0..7

IF (NLabVis = 0) THEN
LabVisX
"Are you sure you didn't make any lab visits?"
1   Yes
2   No

IF (NLabVis > 0) THEN
WhcLab
"Which lab was the sample delivered to?"
: STRING[50]

IF (NLabVis > 0) THEN
LabTime

How long did it take you to get to the Local Laboratory?"
1.   Up to one hour
2.   Between one and two hours
3.   More than two hours

IF (SampTak = YesF OR YesP) THEN
NPostOVis
How many visits did you make to the Post Office to deliver the blood sample(s)?
If None enter '0'."
: 0..3

IF (SampTak = YesF OR YesP) THEN
SampPost
Did you post the {IF (Method = Val) and Age>=16 AND BlValConf=YES: "SEN2, and if filled,
LHN2 and EN2"})samples by special delivery the same day as draw?
1.   Yes
2.   No

IF (SampPost = No) THEN
NPost
Why did you not post the samples by special delivery the same day as draw?
:STRING[100]

IF (SampPost = Yes) THEN
PostOff
What is the name of the Post Office you used?
:STRING[50]

IF (SampPost = Yes) THEN
PostRef
What is the tracking number of the parcel?
You will need to claim this expense through the special claim facility on the laptop and send the
receipt to Brentwood.

IF YOU COLLECTED AND POSTED THE BLOOD SAMPLES, YOU MUST EMAIL THE
BIORESPOSITORY IN CAMBRIDGE WITH THE SERIAL NUMBER AND TRACKING NUMBER
(REFER TO PROJECT INSTRUCTIONS FOR EMAIL TEMPLATE).

:STRING[50]

SupFlag
BIOMEDICAL FIELDWORKER: Have you been accompanied by a supervisor for any work at this
household?
1.   Yes
2.   No

SchDone
BIOMEDICAL FIELDWORKER: Have you finished this questionnaire?
Code 1 (Yes) signals that this questionnaire is ready for return to the Head Office.
1.   Yes
2.   No

NDone
BIOMEDICAL FIELDWORKER: That completes the Admin details.
Press <Enter> to leave the questionnaire."