

HCHS/SOL Annual Follow-Up Interview Contact Information Update – CIE(S) – QxQ

Updated on 3/25/2025

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Background

The purpose of the yearly follow-up phone interviews for HCHS/SOL is to document medical events occurring every year from the baseline examination (Visit 1). These annual follow-up interviews maintain and update cohort contact information and ascertain vital status. The follow-up interviews are to be conducted by telephone in English or Spanish. Annual follow-up interviews will continue to occur approximately every 12 months from the baseline (Visit 1) anniversary date. The timing of the annual follow-up interviews is described in more detail in Manual 3-Retention and-Follow-up (formerly Manual 3 and Manual 16) available on the HCHS/SOL website.

Note on using alternate designated respondent (ADR): Before initiating an AFU interview, HCHS/SOL personnel should review records from the last completed interview with the participant. If the previous interview was conducted with an ADR due to participant's cognitive impairment, the ADR should again be contacted to schedule the follow-up interview. Historic ADR information (if available) can be obtained from the CIE(S) form from the previous year.

Contact Information Update/Participant Tracking- CIE(S)

Begin this section by gently stating the following:

English: "Thank you so much for answering these questions. We greatly appreciate your participation in the SOL study. Now, I'd just like to make sure our records are up to date."

Spanish: Muchas gracias por contestar estas preguntas. Apreciamos mucho su participación en SOL. Ahora, quisiera asegurarme que nuestros registros están al día.

Interviewer: Current tracking information from SOL database will be displayed on the screen. Read the following statement before confirming contact information:

English: "It is very important for this study to be able to reach you in the future. Although you provided your contact information at the time of your visit, in order to keep our records up to date please provide us with your current home address. All information you give us is strictly confidential and will not be shared with anyone else".

Spanish: "Es sumamente importante para este estudio que en el futuro podamos comunicarnos con usted. Entendemos que usted dio su información de contacto en su visita al centro, pero para mantener nuestros archivos al día necesitamos confirmar su información actual. Toda información que usted nos provea se mantendrá en estricta confidencialidad y no será compartida con ninguna otra persona o entidad."

Q49 - 49j1 Current home address

Confirm participant's current home address, updating the information as necessary.

Q50 Primary Phone Number

Confirm participant's primary phone number, updating the information as necessary.

Q50a Confirm what type of phone it is.

 What is the best time of day to reach you at this number?

Confirm and/or record the best time of day to reach the participant at this number.

Q52 Secondary phone number

Confirm and/or collect and record the participant's secondary phone number.

Q52a Confirm what type of phone it is.

Q53 What is the best time of day to reach you at this number?

Confirm and/or record the best time of day to reach the participant at this number.

Q54 – 54d Local Contact 1 Name (primary contact)

Confirm and/or collect and record the name of a local contact person

Q55 Relationship

Relationship of contact person with the participant.

Q55a Is this an Alternate designated respondent (ADR) contact?

This question is looking to record if this person has been assigned as an Alternate designated respondent (ADR) by the participant or if by definition can be identified as an ADR.

Local Contacts Information changes:

Local contact information has been streamlined to require only needed information. Below is a table to be used as a guide for all contact information data entry.

Q56-56j1 Current home address of primary contact (local contact 1)

Confirm and/or collect and record the address of this local primary contact person. [See table below for guide on data entry]. This table applies to all local contact information.

Address Component	HOW TO USE IT
A1. PO Box, Box &/or Route and Number Contact 1: 56a1. Contact 2: 60a1. Contact 3: 64a1.	Should include all relevant descriptors and numbers. e.g., "PO BOX" (post office box), "BOX", "R" (route), or "RR" (rural route). If the address is reported as "Route 16, Box 14-A": Enter: ROUTE 16 BOX 14 A. If the only address provided is a post office box, box & / or route and number, complete item [a1]. Proceed to ask about the intersection or street closest to the home location and enter this information in items [c2], described below. If a closest intersection is provided, enter "INTERSECTION" in upper case letters in item [c2], then record the information about both of the two intersecting streets in the note log using item [c2.] format. If available, enter the name of the building at the street or intersection in item [e1]. Are alphanumeric characters or character strings that may precede or follow the
Contact 1: 56b2. Contact 2: 60b2. Contact 3: 64b2.	street number (item [b2]) and may be separated from it by a hyphen (-). Hyphens (-) should be dropped at data entry. For example, the "B" in B-21 East Main Street, would be entered in item [b2] as B 21. If the address includes "1/2" as in "21 ½ West Elm St", "1/2" is a number suffix since it comes after a number so that is how it would be recorded 1, /, 2 in the set of boxes.
C2. Street Name Contact 1: 56c2. Contact 2: 60c2. Contact 3: 64c2.	Refers to the name of the street, avenue, etc. If the address is reported as 21-B East Main Street, then "Main" would be entered into item [c2]. Digits should be used for entering numbered street names, e.g., for 1300 South Second Street, "2nd" would be entered in item [c2].

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Address Component	HOW TO USE IT			
C3. Street Name Type	Refers to the type of roadway used in the address. If the address is reported as 21-B East Main Street, then "Street" would be entered into item [c3]. Special reference			
Contact 1: 56.c3.	needs to be made to street name type abbreviations, since these are frequently used in addresses and often reflect colloquial rather than standard abbreviations.			
Contact 2: 60c3.	You can find the standard U.S.P.S. abbreviations used for geocoding needed in			
Contact 3: 64c3.	HCHS/SOL in https://pe.usps.com/text/pub28/28apc 002.htm.			
E1. Other	Enter additional address information. For example, name of building or location.			
Contact 1: 56e1				
Contact 2: 60e1				
Contact 3: 64e1				
F1. City	In completing this item, only standardized abbreviations of city can be used. These			
Contact 1: 56f1	are Brooklyn, CH, MI, and SD. All other names must be transcribed in full into the address entry panel, but to save time in transcribing cities, a look-up table of			
Contact 2: 60f1	commonly encountered cities is provided in the DES. As is the case for other look-			
Contact 3: 64f1	up tables in the DES, the table is displayed by placing the cursor on the field ([f1] City in this case) and pressing F4. Entering the first letters of a city will highlight the			
	closest match in the table. After verifying that the appropriate city is highlighted in the table HCHS staff can double-click the mouse or press the <enter> key to import the city name into the data field on the form. If the city is <i>not</i> included in the table, pressing the <esc> key will clear the look-up table so that the full name of the city can be entered.</esc></enter>			
G1. County	Information for this item should not be problematic. If unavailable or suspect it can			
Contact 1: 56g1	be compared to information in a look-up table.			
Contact 2: 60g1				
Contact 3: 64g1				
H1. State	You can find the standard U.S.P.S. abbreviations used for two-character state			
Contact 1: 56h1	abbreviations needed in HCHS/SOL in https://pe.usps.com/text/pub28/28apb.htm			
Contact 2: 60h1				
Contact 3: 64h1				
I1. Country/Territory (Select code from list)	See Appendix 1 for codes.			
Contact 1: 56i1				
Contact 2: 60i1				
Contact 3: 64i1				
J1. Zip Code	Should be relatively straightforward. If available, Zip code information in 5+4 format			
Contact 1: 56j1	should be transcribed in full, since they are more informative.			
Contact 2: 60j1				
Contact 3: 64j1				

Q57

Telephone (local contact 1) Confirm and/or collect and record the telephone number of the local primary contact person.

Q57a. collect information on type of phone.

Q58 – 58d Local contact 2 name (secondary contact)

CIE_QxQ_20250325.docx Page 3 of 5 Confirm and/or collect and record the name of a secondary local contact person.

Q59 Relationship

Relationship of contact person with the participant.

Q59a Is this an Alternate designated respondent (ADR) contact?

This question is looking to record if this person has been assigned as an Alternate designated respondent (ADR) by the participant, or if by definition can be identified as an ADR.

Q60 - 64j1 Current home address of secondary contact (local contact 2). Confirm and/or collect and record the address of this local secondary contact person. [See table above for guide on data entry].

Q61 Telephone: (local contact 2)

Confirm and/ or collect and record the telephone number of the local secondary contact person.

Q61a Define what type of phone it is.

Q62 – 62d Local contact 3 name

Confirm and/or collect and record the name of an additional local contact person.

Q63 Relationship

Relationship of contact person has with the participant.

Q63a Is this an ADR contact?

This question is looking to record if this person has been assigned as an Alternate designated respondent (ADR) by the participant or if by definition can be identified as an ADR.

Q64 – 64j1 Current home address of secondary contact (local contact 3)

Confirm and or collect and record the address of this additional local contact person. [See table above for guide on data entry].

Q65 Telephone (local contact 3)

Confirm and/or collect and record the telephone number of the local contact person.

Q65a Define what type of phone it is.

Q66-66e. Name and address of physician or other health care provider (HCP)

Record name and address for participant's physician or health care provider (HCP).

END OF THIS PORTION OF THE ANNUAL FOLLOW-UP CALL

"Thank you for answering the questions about your health. We wish to continue to stay in touch with you and will be contacting you again next year"

Appendix 1. Location Codes for Questions 49.I.1, 56.I.1, 60.I.1, 64.I.1

01	Afghanistan	35	India
02	Anguilla	36	Indonesia
03	Antigua and Barbuda	37	Iran
04	Argentina	38	Iraq
05	Aruba	39	Ireland
06	Australia	40	Israel
07	Austria	41	Italy
80	Bangladesh	42	Japan
09	Belgium	43	Korea
10	Belize	44	Lebanon
11	Bolivia	45	Malaysia
12	Brazil	46	Mexico
13	Canada	47	New Zealand
14	Chile	48	Nicaragua
15	China	49	Norway
16	Colombia	50	Pakistan
17	Costa Rica	51	Panama
18	Cuba	52	Paraguay
19	Czech Republic	53	Peru
20	Denmark	54	Philippines
21	Dominican Republic	55	Poland
22	Ecuador	56	Portugal
23	El Salvador	57	Puerto Rico
24	Finland	58	Russia
25	France	59	South Africa
26	Germany	60	Spain
27	Great Britain	61	Sweden
28	Greece	62	Switzerland
29	Guam	63	United States
30	Guatemala	64	Uruguay
31	Haiti	65	Venezuela
32	Holland	66	Virgin Islands
33	Honduras	67	Other
34	Hungary	99	Unknown/refused
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