



(Affix Label Here)

Participant ID: \_\_\_\_\_

Participant Name Code: \_\_\_\_\_

Date Form Filled Out:

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(e.g., 10JUN2005)

Interviewer Code: □ □ □

Circle Field Center Location:

BU CU DK UP

Circle Visit: <sup>6</sup>Visit 3 <sup>7</sup>Visit 3 (New Participant)

Form Version Date: 21/11/2019

### LLFS Telephone Screener Visit 3 New Control Subjects (TS1a-c)

***Interviewer Note:*** To be kept in a confidential file separate from other data forms

***This interview entails calling a spouse of an enrolled family member that has been identified and consented by the previously screened family member.***

***Interviewer Script:*** Hi, my name is [insert your name here] and I am calling from [insert your institution here] about the LONG LIFE Family Study. We are attempting to learn why some families have more relatives living to a very old age than some other families. Your [husband / wife] [Insert spouse's name] told us that they spoke with you and that you are interested in learning more about participating in this study. Your [husband / wife] belongs to a family we believe has had the good fortune to have many member living long and healthy lives. Because your [husband / wife] is participating in this important international study of longevity, we would like to invite you to participate as well. In addition to our university, this study is being conducted at two other American universities [insert names here], as well as at the University of Southern Denmark. Our goal is to find out what families with histories of long-lived individuals have in common. By participating in this study, you may make an important contribution to our efforts to help improve the health of future generations.

*If you choose to participate in our study, we would arrange to see you in person. For now, we have some questions we would like to ask you. You do not have to answer any questions that you do not want to. All information that I receive from you, including your name and any other identifying information, will be strictly confidential and kept under lock and key. Your participation is voluntary; you do not have to answer these questions. This will take approximately 15 minutes. Is it okay to speak with you now?*

1 .....Yes  
 0 .....No

***Interviewer:*** If no, then ask: When would be a good day and time for me to call you back and discuss this study?

Day/Date: \_\_\_\_\_ Time: \_\_\_\_\_ AM/PM

Participant ID: \_\_\_\_\_

Participant Name Code: \_\_\_\_\_

1. Do I have permission to ask you some questions about yourself?

- 1 .....Yes
- 0 .....No

**Script: Thank you very much for speaking with me.**

3. Are you 18 years old or older?

- 1 .....Yes
- 0 .....No

**Script: Thank you very much for speaking with me.**

**Interviewer Script – for those continuing: Before we continue, I want to ask you what is your understanding of the purpose of the LONG LIFE Family Study?**

8a. Key elements (concepts), "family, long lived, research study" \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Interviewer: Does the individual have a clear understanding of the purpose of the study?**

- 8b.  1 .....Yes
- 0 .....No

**End Interview (Use Script B Below)**

**Interviewer: Does a hearing, language barrier or other problem make the Screenee unable to communicate with you?**

- 8c.  1 .....Yes
- 0 .....No

**End Interview (Use Script B Below)**

**Script B – End Interview: "Thank you so much for this information. We greatly appreciate the time and interest you have shown in our study. The information you provided is very important and will help us discover how some people and their families live to a very old age. Take care." **END OF INTERVIEW****

**Interviewer:** Thank you for answering our questions. The information you provided is very helpful. At this point, we would like to invite you to participate in an in-person visit so that we can gather more information about your health and find out what common traits are present in families with long-lived individuals. This interview can be scheduled at your convenience either in your home or at our clinic. During the visit, trained clinical staff will obtain medical and personal information about you. You will be asked to answer questions related to your current and past medical history, medication use, daily living activities, physical activity as well as your health habits. You will also be asked questions such as how many years of education you have had and where you were born and your occupation. Other questionnaires will include paper and pencil tests of your ability to process and recall information and a mood/personality assessment. With your permission, we will obtain measurements of your weight, height, waist circumference, heart rate, arm and leg blood pressures, carotid arteries, and lung function. You will also be asked to perform some simple physical tasks such as standing up from of a chair, gripping an object to measure hand strength and walking a short distance to assess your physical function, and a one-minute chair stand test for fitness. Additionally, you will be asked to perform a series of movements to test your balance. You will be asked if we can collect a small blood sample. This examination can be completed approximately 3-4 hours. We will use all this information to determine the different ways in which families can achieve long lives and successful aging. You may refuse to participate in any portion of the study.

9a. Are you interested in participating in an in-person visit, including providing a blood sample?

- <sup>1</sup> .....Yes **Go to 9b**
- <sup>0</sup> .....No\* **Go to Q9c**
- <sup>D</sup> .....Don't Know (Pending) Specify: \_\_\_\_\_ **Call Back**

\*if no, probe about saliva sample before moving on

9b. Where would you like this visit to be conducted?

- <sup>1</sup> .....Home Visit **Schedule appointment for in-person visit**
- <sup>2</sup> .....Clinic Visit **Schedule appointment for in-person visit**
- <sup>3</sup> .....Other (Please Specify) \_\_\_\_\_

- **If applicable, schedule appointment for in-person visit.**
- **If "other" (i.e. long distant visit), then read the following script:** "We will follow up with you as soon as possible to update you when we will be in your area."
- **If phone visit is the only option, Go to Q9b1.**

9b1. Do you think you would be interested in participating in the study via a telephone visit?

- <sup>1</sup> .....Yes **Schedule Telephone Visit**
- <sup>0</sup> .....No **Answer Q9b2; Read End Interview Script**

9b2. **Interviewer:** If no, why not? \_\_\_\_\_

**Suggested Script for Scheduling/Confirming Appointment:** "We would like to see you and your husband/wife together. He/she is scheduled for \_\_\_\_\_. Are you available that day? (Work with subject to schedule a convenient time.) The visit will take under 4 hours to complete. We will be mailing to your home a reminder letter and instruction sheet, prior to the visit. Do you have any questions at this time? We will call you the day before your visit to confirm the date and time. The visit will take under three hours to complete. Do you have any questions at this time?"

Participant ID: \_\_\_\_\_

Participant Name Code: \_\_\_\_\_

We are very excited about meeting you and your husband/wife in-person on \_\_\_\_\_ [day/date] at \_\_\_\_\_ o'clock. If you have any questions or something comes up and you need to reschedule, please call me at XXX-XXX-XXXX. Thank you and good-bye." **END OF INTERVIEW**

**Telephone Visit Script:** "We are currently scheduling telephone visits for the week of \_\_\_\_\_. Are you available on \_\_\_\_\_? (Work with participant to schedule a convenient time.) The call will take about \_\_\_\_\_ [minutes/hours] to complete. We will be mailing to your home a reminder letter and instruction sheet, prior to the call. Do you have any questions at this time?"

We are very excited to talk to you on \_\_\_\_\_ [day/date] at \_\_\_\_\_ o'clock. If you have any questions or something comes up and you need to reschedule, please call me at XXX-XXX-XXXX. Thank you and good-bye. **END OF INTERVIEW**

9c. If "No", could you please indicate your reason(s)? (*Please X all that apply; then End Interview using Script B below*).

- 1 .....Just Not Interested
- 1 .....Not Enough Time
- 1 .....Unwilling to Provide Blood / saliva Sample
- 1 .....Concern about Ability to Complete Examination
- 1 .....Privacy Issue/Concern
- 1 .....Unwilling to Contact Family Members
- 1 .....Lack of "Family" Interest
- 1 .....Other, Please Specify: \_\_\_\_\_

**Script B – End Interview:** "Thank you so much for the information you have provided. We greatly appreciate the time and interest you have shown in our study. The information you provided is very important and will help us discover how some people and their families live to a very old age. If you decide at a later date that you would like to participate in this family study, please contact me at XXX-XXX-XXXX. Thank you and good-bye." **END OF INTERVIEW**

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