National Health and Nutrition Examination Survey, 2005-2006

Examination Consent Brochure
This booklet contains facts for you about the National Health and Nutrition Examination Survey.
If you agree to take part in NHANES, we ask you to sign the attached consent form to show that you know the nature and purpose of the survey. Please be sure you understand the facts we have given you and that all questions are answered.

What is the National Health and Nutrition Examination Survey (NHANES)?

NHANES is a survey conducted by the National Center for Health Statistics (NCHS). NCHS is a part of the Centers for Disease Control and Prevention, U.S. Department of Health and Human Services.

We select a sample of people in towns and cities across the country to be part of the survey. Each year of the survey, we will examine about 5,000 people in 15 different sites. NHANES programs began in the early 1960s. The current survey began in 1999 and will now be an ongoing program. More than 160,000 persons have been part of past NHANES programs.

We have designed the study to learn about the health and diet of people in the United States.

Our survey is unique. It combines a home interview with health tests, which we do in mobile units. These special exam centers travel the country with a highly trained medical team. Our team conducts an exam that looks at special health topics. They use the most up-to-date methods and equipment for medical and dental exams, and other lab tests.

We will use the data gathered in this survey to assess the number of people with certain health problems — for example, diabetes and high blood pressure. We will look at diet and other habits that affect health, such as smoking and exercise. NHANES data will describe the health and nutrition of people of all ages. It will also help design health programs and services, and expand our knowledge about the health of people in the United States.
Why were you selected?

We picked you and your household in a carefully designed sample of people living in the United States. We cannot choose someone in your place because no one has the same health profile as you. Having you as part of our survey will help make our information complete. We will add the data from your interview and exam to that from all others who join in this study. That data will give us a big picture of our nation’s health.

You may choose to take part in the survey and you may permit your child to join in. That is your choice. No penalties or loss of benefits will come from refusing to take part. You may refuse any part of the exam and are free to drop out anytime. Also, during the interviews you may choose not to answer any question.

What do you gain by taking part in the survey?

☐ Free health test results, perhaps some of major value to you
☐ The chance to help learn more about the health of the nation
☐ A cash payment to thank you for your time and effort

Are the data we collect confidential?

We respect your privacy. Public laws keep all information you give confidential.

We will hold all data we collect in the strictest confidence. We gather and protect all data in keeping with the requirements of Federal laws: the Public Health Service Act (42 USC 242k) authorizes collection and Section 308(d) of that law (42 USC 242m) and the Privacy Act of 1974 (5 USC 552A) prohibit us from giving out information that identifies you or your family without your consent. This means that we cannot give out any fact about you, even if a court of law asks for it. However, if we find signs of child abuse during an exam, we will report it to the local department of social services or appropriate law enforcement agency.

What do you gain by taking part in the survey?

We will keep all survey data safe and secure. Sometimes certain collaborators, such as the U.S. Department of Agriculture and the National Center for Environmental Health, assist us in data preparation, analysis, and research. When they do, the information is handled with strict requirements to protect your confidentiality as guaranteed by NCHS. When we allow other collaborators and researchers to use survey data, we protect your privacy. We assign code numbers in place of names and never reveal other facts that could directly identify you.

What about the exam?

Our interviewer will ask you to make an appointment for the exam at the mobile exam center. Our medical team will collect health data by examining you, doing testing, and asking questions about diet and health. No internal exam is included. No drug testing will be done. We will ask you to fast overnight for a morning exam. You will change into special exam clothes at the exam center. The exam may take from 2 1/2 to 4 hours for those 12 and older and 1-3 hours for younger children. The time depends on the age of the person examined, since some procedures are done only for certain ages. (For a full list of procedures, see page 5.)

Reports of Exam Findings

The survey exam does not replace regular health care. However, you will get some exam results at the exam site. If the exam reveals urgent health problems, we will notify you at once and refer you for treatment. If some urgent problem is found through your lab tests, right away we will send that information in a
We will give bone density tests that involve low-dosage x-rays to persons 8 years old and older. Radiation exposure during this test is equal to a cross-country airline flight or a few days of natural background radiation. But because the bone density scan involves x-rays, no one who is pregnant should get this exam. We will obtain information about periods from girls and women, and those who have started their periods will have a urine pregnancy test. We report positive test results only to the person tested if she is 14 years or older. If a girl is under 14 and has a positive pregnancy test, we will inform both her and her parent/guardian. Those with a positive test will not have the bone density scan. Also, pregnant women and girls will not have fitness testing if they are in their second or third trimester.

**Safety of Tests**

We chose the tests and measurements because they are safe. Some of the exams or procedures may cause you slight discomfort. Examples are collecting a blood sample or fasting for 9 hours. For the blood sample, a person will have a small amount of blood drawn from a vein in his/her arm with a needle. Participants 12 years and older with a morning appointment will be asked to drink a sugar solution and have blood taken a second time. Although rare, the sugar solution can cause nausea, vomiting, bloating, or headache. We will not ask you to have any test or procedure that is wrong for you because of a health problem or condition.

**Private Health Interview**

At the exam center you will be asked some personal questions. A trained interviewer will ask some of these questions. Others, like those about sexual experience and drug use, will be
asked in complete privacy. The interviewer will leave the room. The questions will be on a computer screen. You respond by touching an answer on the screen. Like all of the other information we collect, the responses you give us are kept strictly confidential. If you are under 18 years of age, we may notify your parents if we have reason to believe you are a danger to yourself.

**Doctor’s Assessment of Puberty**

Our doctor will determine the physical maturity of children 8-19 years. The doctor will quickly look at females' breasts and the genitals of males and females. No touching is involved. Parents may ask to be present during the assessment if they choose. A chaperone will be present during the exam.

**Tests for Sexually Transmitted Disease (STD)**

Females aged 14-59 years will be asked to do a private, self-administered, vaginal swab for STD testing. In addition, all persons 14-49 years will have their blood and urine tested for STDs. We will not put these results in writing, but you can get STD test results a few weeks after the exam. Before leaving the exam center, you will receive a toll-free number, a password, and the dates to call for your results. Only you will get your test results by calling in and telling us your password. Parents will not be informed of their child's STD test results. If your test results show that you have a current health problem, we will talk with you about the results and tell you how to seek treatment. We will keep all STD test results completely private, just like all other test results. If you do not want to be tested, you can tell a staff member.

**After your visit to the NHANES exam center:**

Persons asked about the foods they eat will receive a phone call 3-10 days after their exam for a similar interview. In addition, a food questionnaire will be mailed to your home. Persons two years old and older are asked to complete this questionnaire and return it to our office in a prepaid envelope provided. Parents or guardians will answer for children 2-5 years and assist children 6-11. The questions will take 20-30 minutes to answer.

Persons six years old and older will be asked to wear a physical activity monitor. Exam staff will give you the monitor at the exam. You will wear the monitor at home for seven days. Parents or guardians will assist children 6-11 years old. You will be asked to return the monitor to our office in a prepaid envelope provided.

A few weeks after your exam, a technician will visit your home to ask a short set of questions and collect a dust sample by vacuuming areas in the room where you sleep. The dust sample will be sent to a lab where it will be measured for allergens. Allergens are substances

(continued on page 6)
**The NHANES Exam**

**Health Measurements**
* Doctor’s exam - all ages
  - ages 8-19 years
* Blood pressure - ages 8 years and older
* Body fat - ages 8-69 years
* Bone density scans
  - whole body, hip, and spine - ages 8-69 years
  - Hip and spine - ages 70 years and older
* Oral health - ages 5 years and older
* Vision test - ages 12 years and older
* Hearing test - ages 12-19 and 70 years and older
* Fitness test - ages 12-49 years
  - (only afternoon/evening exams)
* Height, weight, and other body measures
  - all ages
* Eye conditions - ages 40 years and older
  - Visual field test
  - Retinal photographs

**Lab Tests on Urine: (6 years and older)**
* Kidney function tests - ages 6 years and older
  - Sexually transmitted disease (STD)
  - Chlamydia and gonorrhea - ages 14-39
  - Human immunodeficiency virus (HIV)
    - ages 18-49 (only if no blood is drawn)
* Exposure to environmental chemicals
  - selected persons ages 6 and older
* Pregnancy test - females 12-59 and girls 8-11 who have periods
  - ages 13 and under
  - ages 14 and over

**Lab Tests on Blood: (1 year and older)**
* Anemia - all ages
* IgE Allergens - ages 1 and older
* Lipids - ages 6 and older
* Glucose measures - ages 12 and older
* Infectious diseases - ages 2 and older
* Kidney function tests - ages 6 and older
* Lead - all ages
* Cadmium - all ages
* Mercury - all ages
* Liver function tests - ages 12 and older
* Nutrition status - all ages
* Hormone tests - ages 6 and older

**Lab Tests on Blood: (1 year and older) ... continued**
* Prostate Specific Antigen (PSA)
  - males ages 40 years and older

**Lab Tests on Water**
* Environmental chemicals - selected persons ages 20-59 years

**Other Lab Tests**
* Vaginal swab (self-administered) for Human papillomavirus (HPV)
  - females ages 14-59 years

**Private Health Interviews**
* Body image and eating behaviors
  - ages 8-15 years
* Depression Screening - ages 12 years and older
* Tobacco use - ages 12-59 years
* Drug and Alcohol use - ages 12-59 years
  - (No drug testing will be done)
* Sexual experience - ages 14-59 years
* Reproductive health - females ages 12 years and older
* Bladder and bowel health - ages 20 years and older
* Exposure to chemical products - ages 6 years and older

**Dietary Interview**
* Questions on what you eat - all ages

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* Results reported to you or to your child and you
** Results reported only if positive (or abnormal)
*** Results reported only to person tested
that can cause allergies. Results of the household dust testing will be provided. A date and time to collect a dust sample will be set up after your exam is finished. Persons who test positive for hepatitis C will be called to request participation in a brief phone interview six months after the exam. Parents will respond for children.

Men with a high PSA test result will be called to request participation in a brief phone interview six months after the exam.

Taking part in these interviews and health exams after your visit to the exam center is voluntary.

How are NHANES data used?

What you tell us, your exam findings, and samples you give are a rich resource for health science. Many Federal agencies, universities, and other public and private groups use NHANES data. They use it to help find new cures and treatments for diseases and disabilities. The aim is to enhance the health of all people. Results of this survey may be reported in journals, at major meetings, or through other news media. None of these reports will ever name or use data that can point to any person who took part in the survey.

Many of the National Institutes of Health help us in this survey. The U.S. Department of Agriculture is our partner in planning how to get data on the foods you eat. We share with them the task of looking at people’s diets in the U.S. The U.S. Environmental Protection Agency is another of our many partners. Your survey data helps study harmful effects of being exposed to environmental hazards.

Combining NHANES results with other facts about you can be useful. An example of this is using Social Security numbers to link survey data with vital statistics and other health records. Also, we may need to contact you in the future. To do this we would ask public or private agencies, such as the Post Office, to provide changes in your address.

In the past, we have had the chance to call or revisit people who took part in this survey. We may contact you in the future to ask you to be part of other research projects.

More questions?

Our survey representative can discuss other questions or concerns or give you other printed matter that can help. She or he can give you a phone number in your area that you can call for more facts about the survey. Also, you can make a free call to Dr. Kathryn Porter of the U.S. Public Health Service to discuss any aspect of the survey. She can be reached at 1-800-452-6115, Monday-Friday, 8 AM - 6 PM EST. You may also contact her regarding any survey-related injury. You can also get answers to your questions by mail (Room 4322, 3311 Toledo Rd., Hyattsville, MD 20782). If you have questions about your rights as a participant, call the Research Ethics Review Board Chairperson at 1-800-223-8118.
If you agree to take part in NHANES, we ask you to sign the attached consent form to show that you know the nature and purpose of the survey. Please be sure you understand the facts we have given you and that all questions are answered.
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**NATIONAL HEALTH AND NUTRITION EXAMINATION SURVEY**

**CONSENT/ASSENT AND PARENTAL PERMISSION FOR EXAMINATION AT THE MOBILE EXAMINATION CENTER**

Print name of participant _____________________ ________________ ________________

First Middle Last

The attached brochure gives the details about National Health and Nutrition Examination Survey (NHANES). After reading the information provided, please complete the form below.

For the Parent or Guardian of the Survey Participant who is Under 18 Years Old: (unless the participant is an emancipated minor ☐):

I have read the information in the attached NHANES brochure, which explains the nature and purpose of the survey. I freely choose to let my child take part in the survey.

Signature of parent/guardian of participant _____________________ Date _____________________

If you **do not want a written report** of your child’s exam results, check here ☐.

For the Survey Participant who is 12 Years Old or Older:

I have read the information in the attached NHANES brochure, which explains the nature and purpose of the survey. I freely choose to take part in the survey.

Signature of participant _____________________ Date _____________________

If you **do not want a written report** of your exam results, check here ☐.

Signature of staff member _____________________ Date _____________________

Witness (if required) _____________________ Date _____________________

SP ID _____________________

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Mobile Examination Center (MEC) Diagram

- Hearing Test
- Dental Screening
- Body Measurement
- Body Composition

- Laboratory
- Blood Draw
- Staff Area

- Eye Photos
- Dietary Interviews
- Interview Rooms
- Doctor

- Fitness Testing
- Vision Test
- Reception