

## Telephone Introduction for Patient Interviews

### *CADMIUM*

1. Hello, my name is \_\_\_\_\_. I'm calling for Mr./Ms./Mrs. \_\_\_\_\_. Is he/she in?  
  
(NO) I'm calling on behalf of the State of Michigan. When is a good time to reach him/her? Please tell him/her I called. Here is my phone number (toll free). He/she may call me at 1-800-446-7805.  
  
(YES) I'm calling on behalf of the State of Michigan. We are doing a special investigation into health problems from environmental exposures. Recently we sent you a letter asking for your help with this investigation.
2. Do you remember receiving the letter?  
  
(YES) Good. I'd like to take a moment to describe what you can do to help.  
(go to part 3)  
  
(NO) Let me see...I see that we mailed the letter to you on (date) to (address). Is that your correct address? If not, I will send you another copy of the letter. While I have you on the phone, let me explain briefly what the letter is about.  
(go to part 3)
3. Your participation in this investigation is completely voluntary. If you decide to participate, I will go through a questionnaire by phone. This takes approximately 30 minutes, and would complete your participation in the investigation. You indicate your voluntary participation by answering the questions. You can end your participation or refuse to answer individual questions at any time. All information you give us will be kept confidential. We do not share information from this investigation with any employers or insurance companies. The State of Michigan will use this information to understand more about environmental exposures and what can be done to prevent others from having an elevated cadmium level. If you are still working at the location where you were exposed to cadmium, you may benefit if the results of this investigation lead to changes in your workplace.
4. Will you help us by participating in this questionnaire?  
  
(YES) Great, I will begin the questions now. (If as you start they indicate this isn't a good time, arrange a time to call back.  
  
(NO) I see. May I ask what your concerns are?

## **CADMIUM QUESTIONNAIRE**

**Please complete the following questionnaire to the best of your knowledge. If you have any questions or if you wish to complete the questionnaire over the telephone, please call Dr. Kenneth Rosenman or his staff at their toll-free telephone number: 1-800-446-7805.**

### **FOR CODING ONLY**

Case # C d \_\_\_ \_\_\_ \_\_\_ \_\_\_

Disease: \_\_\_ \_\_\_ \_\_\_

Interviewer: \_\_\_ \_\_\_ \_\_\_ (initials)

Survey Date: \_\_\_ \_\_\_ - \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ \_\_\_

### **BACKGROUND INFORMATION**

1. I want to confirm the spelling of your name:

\_\_\_\_\_  
First Middle

Have you ever had a different Last Name (females only)?

2. I want to confirm your address:

\_\_\_\_\_

\_\_\_\_\_  
City State Zip

3. I want to confirm your home phone number:

( ) \_\_\_\_\_ - \_\_\_\_\_

4. What is your social security number?

### **DEMOGRAPHIC INFORMATION**

5. What is your gender? (do not ask if obvious)

6. What is your date of birth? \_\_\_ \_\_\_ - \_\_\_ \_\_\_ -

7. How would you be classified—the choices are:

\*If OTHER, please specify:

\_\_\_\_\_

1. \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_  
Last

\_\_\_\_\_  
Other Last Name

4. \_\_\_ \_\_\_ \_\_\_ - \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ \_\_\_

5. 1 Male 2 Female

6. \_\_\_ \_\_\_ \_\_\_ \_\_\_ (CCYY)

7. 1 White  
2 African American  
3 Asian/Pacific Islander  
4 White Hispanic  
5 Other\*  
6 Alaskan/American Indian  
7 African American Hispanic  
8 Other Hispanic\*  
88 Unknown  
99 Refused

8. What is the highest level of education that you have completed? 8. 1- 7th grade or less  
 2- 8th, 9th, 10th, or 11th grade  
 3- High School Graduate  
 4- 1-3 years College/Tech  
 5- 4+ years College/Tech  
 88- Unknown  
 99- Refused

9. a. Why did your doctor test you for cadmium? \_\_\_\_\_

b. How were/are you exposed to cadmium? \_\_\_\_\_

**A. BLOOD/URINE TEST**

Our records indicate that you had a blood/urine test of \_\_\_\_\_ for cadmium on \_\_\_\_\_ (date of test).

- A1. Were you ever notified of the result? A1. 1 No 88 Unknown  
 2 Yes 99 Refused

- A2. What was the reason for the test? A2. 1 Company/workplace program **Go to A4**  
 2 Union screening **Go to A4**  
 3 Pre-employment physical **Go to A4**  
 4 (do not use)  
 5 Doctor's advice  
 6 Own decision  
 7 Other\*  
 8 Chelation therapy **Go to A4**  
 88 Unknown  
 99 Refused
- \*If OTHER, please describe: \_\_\_\_\_

A3. Why did you go to the doctor originally?  
 \_\_\_\_\_  
 \_\_\_\_\_

- A4. Have you had any previous cadmium testing in the last 5 years? A4. 1 No 88 Unknown  
 2 Yes 99 Refused

- A5. Do you have a doctor who follows your cadmium levels? A5. 1 No  
 2 Yes-Company doctor  
 3 Yes-Clinic doctor\*  
 4 Yes-Private doctor  
 88 Unknown  
 99 Refused
- \*If YES-Clinic doctor, please specify type: \_\_\_\_\_

- A6. Do you have another cadmium test scheduled? A6. 1 No **Go to B1**  
 2 Yes  
 88 Unknown **Go to B1**  
 99 Refused **Go to B1**

A7. When is your next cadmium test scheduled for? A7. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 (approximate date) MM-DD-YYYY

**B. OCCUPATIONAL HISTORY**

- B1. Are you currently employed, or have you been employed within the past year? B1. 1 No **Go to C1**  
 2 No-Retired **Go to C1**  
 3 Yes-Currently  
 4 Yes-Currently/self-employed  
 5 Yes-Previously  
 88 Unknown **Go to C1**  
 99 Refused **Go to C1**

	<b>CURRENT JOB</b> <i>(where exposure occurred)</i>	<b>PREVIOUS JOB</b> <i>(within last year)</i>
<b>B3.</b> Company Name Address Phone number	SIC _____	SIC _____
<b>B4.</b> Worksite Location <i>(if different than company location)</i>		
<b>B5.</b> Date start / stop <i>(mm/yy)</i>	_____/_____	_____/_____
<b>B6.</b> Job Title	COC _____	COC _____
<b>B7.</b> Please describe your job duties and any types of material or substances used on this job.		
<b>B8.</b> Does your job involve:	1. Manufacturing of nickel-cadmium batteries 2. Smelting, refining and mining of copper, lead, zinc and iron ores 3. Electrical/Electronic equipment manufacturing or repair 4. Producing, spraying, scraping of industrial paint 5. Hazardous waste removal/site investigations/incineration of waste materials 6. Producing, plating, soldering or welding of cadmium plated steel, iron, copper and brass 7. Metal recycling involving torch cutting of scrap metals 8. Manufacturing or use of industrial chemicals 9. Production or use of cadmium pigments 10. Jewelry, ceramics, pottery making, metal sculpting, painting, or other fine art	1. Manufacturing of nickel-cadmium batteries 2. Smelting, refining and mining of copper, lead, zinc and iron ores 3. Electrical/Electronic equipment manufacturing or repair 4. Producing, spraying, scraping of industrial paint 5. Hazardous waste removal/site investigations/incineration of waste materials 6. Producing, plating, soldering or welding of cadmium plated steel, iron, copper and brass 7. Metal recycling involving torch cutting of scrap metals 8. Manufacturing or use of industrial chemicals 9. Production or use of cadmium pigments 10. Jewelry, ceramics, pottery making, metal sculpting, painting, or other fine art
<b>B9.</b> How many years have you worked around cadmium? <i>(If never, go to C1)</i>	____ # years      NEVER 99	____ # years      NEVER 99
<b>B10.</b> How many other workers do/did the same type of work as you?	<b>Actual # given:</b> _____	<b>Actual # given:</b> _____
<b>EDUCATION</b>		
<b>B11.</b> Has your employer ever trained you on the hazards of working with cadmium?  <i>(self-employed: Have you ever received information about the hazards of working with cadmium? Go to B14.)</i>	1 No <b>Go to B14.</b> 2 Yes 88 Unknown <b>Go to B14.</b> 99 Refused <b>Go to B14.</b>	1 No <b>Go to B14.</b> 2 Yes 88 Unknown <b>Go to B14.</b> 99 Refused <b>Go to B14.</b>
<b>B12.</b> How often does your employer provide this information?		
<b>B13.</b> Is the information provided by someone that works for your employer?	1 No 2 Yes 88 Unknown 99 Refused	1 No 2 Yes 88 Unknown 99 Refused

PERSONAL PROTECTION	CURRENT JOB	PREVIOUS JOB
<b>B14.</b> Are/Were respirators made available for you to use?  <i>(self-employed: Do you have a respirator?)</i>	1 Always 2 Sometimes 3 Never <b>Go to B20.</b> 88 Unknown <b>Go to B20.</b> 99 Refused <b>Go to B20.</b>	1 Always 2 Sometimes 3 Never <b>Go to B20.</b> 88 Unknown <b>Go to B20.</b> 99 Refused <b>Go to B20.</b>
<b>B15.</b> What type of respirator was provided?  <i>(self-employed: What kind of respirator? Go to B17.)</i>	1 Dust mask 2 Cartridge/half face 3 Cartidge/full face 4 Other _____ 88 Unknown 99 Refused	1 Dust mask 2 Cartridge/half face 3 Cartidge/full face 4 Other _____ 88 Unknown 99 Refused
<b>B16.</b> Does/Did your employer ever require that you wear a respirator when working with cadmium?	1 Always 2 Sometimes 3 Never 88 Unknown 99 Refused	1 Always 2 Sometimes 3 Never 88 Unknown 99 Refused
<b>B17.</b> When you're working around cadmium, how often do you wear a respirator?	1 Always 2 Sometimes 3 Never 88 Unknown 99 Refused	1 Always 2 Sometimes 3 Never 88 Unknown 99 Refused
<b>B18.</b> Have you been fit-tested in the past year to wear your respirator?	1 No 2 Yes 88 Unknown 99 Refused	1 No 2 Yes 88 Unknown 99 Refused
<b>B19.</b> Was training provided for proper use, maintenance and storage of the respirator?	1 No 2 Yes 88 Unknown 99 Refused	1 No 2 Yes 88 Unknown 99 Refused
<b>B20.</b> Do you wear a protective uniform/clothing?	1 Always 2 Sometimes 3 Never 88 Unknown 99 Refused	1 Always 2 Sometimes 3 Never 88 Unknown 99 Refused
<b>B21.</b> Do you wear other protective equipment?	1 No <b>Go to B23.</b> 2 Yes 88 Unknown <b>Go to B23.</b> 99 Refused <b>Go to B23.</b>	1 No <b>Go to B23.</b> 2 Yes 88 Unknown <b>Go to B23.</b> 99 Refused <b>Go to B23.</b>
<b>B22.</b> Please describe what other protective equipment is used <i>(prompt for shoes, gloves, hard hats, hearing protection, etc.)</i>		

HYGIENE	CURRENT JOB	PREVIOUS JOB
<b>B23.</b> Are there wash facilities available at the worksite?	1 No <i>Go to B26.</i> 2 Yes 88 Unknown <i>Go to B26.</i> 99 Refused <i>Go to B26.</i>	1 No <i>Go to B26.</i> 2 Yes 88 Unknown <i>Go to B26.</i> 99 Refused <i>Go to B26.</i>
<b>B24.</b> Are showers available at the worksite?	1 No 2 Yes 88 Unknown 99 Refused	1 No 2 Yes 88 Unknown 99 Refused
<b>B25.</b> Do you shower regularly after your shift at work?	1 No 2 Yes 88 Unknown 99 Refused	1 No 2 Yes 88 Unknown 99 Refused
<b>B26.</b> Is there a clean break area provided?	1 No 2 Yes 88 Unknown 99 Refused	1 No 2 Yes 88 Unknown 99 Refused
<b>B27.</b> Do you ever eat/drink/snack/smoke in your work area?	1 No 2 Yes – Eat/snack 3 Yes – Drink 4 Yes – Smoke 88 Unknown 99 Refused	1 No 2 Yes – Eat/snack 3 Yes – Drink 4 Yes – Smoke 88 Unknown 99 Refused
<b>B28.</b> Do you regularly wash your hands before eating/smoking or after your shift at work?	1 No 2 Yes 88 Unknown 99 Refused	1 No 2 Yes 88 Unknown 99 Refused
<b>B29.</b> Does your employer launder your work clothes or provide you with disposable clothing? <i>(self-employed: Do you wash your clothes separate from your family's?)</i>	1 No 2 Yes – Launder 3 Yes – Disposable 88 Unknown 99 Refused	1 No 2 Yes – Launder 3 Yes – Disposable 88 Unknown 99 Refused
<b>B30.</b> Do you wear your work clothes or shoes home?	1 No 2 Yes – Clothes 3 Yes – Shoes 4 Yes – Clothes & Shoes 88 Unknown 99 Refused	1 No 2 Yes – Clothes 3 Yes – Shoes 4 Yes – Clothes & Shoes 88 Unknown 99 Refused

B31. Do you feel you know how to work safely with cadmium?

B31. 1 No  
2 Yes  
88 Unknown  
99 Refused

B2. Are you a member of a union?

\*If YES, Name and Local: \_\_\_\_\_

B2. 1 No  
2 Yes\*  
88 Unknown  
99 Refused

**C. TOBACCO SMOKING**

C1. Do you currently smoke cigarettes?

- C1. 1 No
- 2 Yes
- 88 Unknown
- 99 Refused

C2. How many packs a day do you smoke?

- C2. 1 Less than 1 pack per day
- 2 1 pack per day
- 3 More than 1 pack per day
- 88 Unknown
- 99 Refused

**D. DEMOGRAPHIC INFORMATION**

**(NOTE: Only ask this section if question B1=3: currently employed or, B1=4: currently self employed AND B9 ≠ never.)**

D1. Are there children, 7 years or under, living or regularly spending time in your house?

- D1. 1 No
- 2 Yes
- 88 Unknown
- 99 Refused

D2. If YES, can you please tell me the names and ages of the children, 7 years or under, living or regularly spending time in your house?

Child's Name	Age
_____	_____
_____	_____
_____	_____

D3. If D1 YES, have any of these children been tested for Cadmium?

- D3. 1 No
- 2 Yes
- 88 Unknown
- 99 Refused

D4. If D3 YES, how many children, 7 years or under, were tested?

D4. \_\_\_ \_\_\_ number of children

D5. If D3 YES, have any of these children had elevated Cadmium levels?

- D5. 1 No
- 2 Yes
- 88 Unknown
- 99 Refused

D6. If D5 YES, how many of these children had elevated Cadmium levels?

D6. \_\_\_ \_\_\_ number of children

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**FOR OFFICE USE ONLY**

O1. Heavy metal type:

O1. CD

O2. Specimen type:

- O2. 1 Random Urine (U1)
- 2 -24-Hour Urine (U2)
- 3 Blood

O3. Specimen result:

O3. \_\_\_ \_\_\_ \_\_\_ \_\_\_.

O4. Specimen units:

O4. ug/L (for either blood or urine specimens)  
ug/gram creatinine (urine only)

O5. Specimen date:

O5. \_\_\_ \_\_\_ - \_\_\_ \_\_\_ - \_\_\_ \_\_\_