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1. Label

NHAMCS-101
(10-24-2008)

U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU
ACTING AS DATA COLLECTION AGENT FOR THE
NATIONAL CENTER FOR HEALTH STATISTICS
CENTERS FOR DISEASE CONTROL AND PREVENTION

**NATIONAL HOSPITAL AMBULATORY MEDICAL CARE SURVEY
2009 PANEL**

2a. Hospital contact information

b. ED contact information

| |
|--|
| Name |
| Title |
| Telephone number (Area code and number) |
| FAX number |

**RECORD ON
CONTROL CARD**

| |
|--|
| Name |
| Title |
| Telephone number (Area code and number) |
| FAX number |

**RECORD ON
CONTROL CARD**

c. OPD contact information

d. ASC contact information

| |
|--|
| Name |
| Title |
| Telephone number (Area code and number) |
| FAX number |

**RECORD ON
CONTROL CARD
RECORD ON
CONTROL CARD**

| |
|--|
| Name |
| Title |
| Telephone number (Area code and number) |
| FAX number |

**RECORD ON
CONTROL CARD**

Section I – TELEPHONE SCREENER

3. Field representative information

4. Record of telephone calls

| | |
|--------------------|---------|
| Telephone screener | FR Code |
| Hospital induction | FR Code |
| ED induction | FR Code |
| OPD induction | FR Code |
| ASC induction | FR Code |

| Call | Date | Time | Results |
|------|------|------|---------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |

5. Final outcome of hospital screening

1 Appointment

| | | | |
|-----|------|------|--------------|
| Day | Date | Time | a.m. p.m. |
|-----|------|------|--------------|

2 Noninterview – Complete sections VI and VII, beginning on page 21.

During your initial call to the hospital, attempt to speak to the contact person. If the contact person is not available at this time, determine when he/she can be reached and call again at the designated time. If, after several attempts, you are still unable to talk to the contact or have determined the contact is no longer an appropriate respondent, begin the interview with a representative of the contact person or new contact, as appropriate.