

## APPENDICES

### Appendix A. DPN-Intervention Call Scripts

#### DPN-INTERVENTION CALL SCRIPT 1 VOICE FILES

Call Step	Voice File Name	Voice File Script	Skip
<b>Script 1 (intro)</b>	<b>DPN_Intro1.wav</b>	Hi, I'm calling for the Kaiser Permanente Diabetes Telephone Study that you enrolled in a few weeks ago. This is the first of three calls that you'll receive over the next six months. Each call will only take about 5 minutes or less. Please press '1' to continue. If this is not a good time to talk, please press '2.'	If 1, go to 1a. If 2, go to 1b.
<b>Script 1 (1a)</b>	DPN_Intro1a.wav	During this call, I'll ask you about your diabetic peripheral neuropathy symptoms. I'll also ask you about the medication your doctor recently gave you to help treat these symptoms. If at any time you want me to repeat a question, please press the * key.	Go to 2
<b>Script 1 (1b)</b>	DPN_CallBack.wav	Thanks, we'll try you again later. You can also call us at XXX-XXX-XXXX. Good-bye.	END
<b>Script 1 (2)</b>	DPN_StillTakingA.wav	First, I'd like to ask, are you still taking the medication your doctor prescribed to treat your diabetic peripheral neuropathy symptoms? These symptoms may include pain, tingling, electric shock, or burning sensations.	
<b>Script 1 (2options)</b>	DPN_StillTakingB.wav	Press '1' for yes '2' for no	If 'no', go to 2a, if 'yes', skip to 3.
<b>Script 1 (2a)</b>	DPN_NoLongerTaking.wav	Thanks for your response. People have many reasons for stopping their medications. We would like to know if any of the following 6 reasons caused you to stop taking the medication. You may pick more than one.	
<b>Script 1 (2b)</b>	DPN_DidNotHelp.wav	The medication is not helpful for your symptoms, press '1' for yes; '2' for no	
<b>Script 1 (2c)</b>	DPN_DoctorStop.wav	Your doctor told you to stop the medication, press '1' for yes, '2' for no.	

<b>Script 1 (2d)</b>	DPN_SymptomsBetter.wav	Your symptoms got better, press '1' for yes, '2' for no.	
		You already were taking too many medications and didn't want to take another one, press '1' for yes, '2' for no.	
<b>Script 1 (2e)</b>	DPN_SideEffects.wav	You had problems with the side effects, press '1' for yes, '2' for no.	
<b>Script 1 (2f)</b>	DPN_Cost.wav	The medication costs too much, press '1' for yes, '2' for no.	
<b>Script 1 (2g)</b>	DPN_Other.wav	If you sopped taking the medication for other reasons, press '1' for yes,'2' for no.	Go to END
<b>Script 1 (3)</b>	DPN_WhenTake.wav	Thanks for your response. Now I'd like to ask you about how you generally take the medication your doctor prescribed to treat your diabetic peripheral neuropathy symptoms.	
<b>Script 1(3a)</b>	DPN_once a day.wav	Do you usually take your medication every day? Press '1' for yes, '2' for no.	
<b>Script 1 (3b)</b>	DPN_selftitrate.wav	Have you ever decided on your own to increase or decrease the amount of medication you take for your symptoms? Press '1' increase '2' for decrease or 3 for I haven't done this.	
<b>Script 1 (4)</b>	DPN_SymptomRelief.wav	Now I'd like to ask you, how well the medication is working to reduce symptoms such as pain, tingling, or a burning sensations? If not at all, press '1'. If a little bit, press '2'. If somewhat, press '3'. If quite a bit, press '4'. If very much, press '5'. Press '*' to repeat the question.	
<b>Script 1 (5)</b>	DPN_Satisfied.wav	Thinking about your symptoms, is the medication working as well as you hoped it would? If not at all, press '1'. If a little bit, press '2'. If somewhat, press '3'. If quite a bit, press '4'. If very much, press '5'. Press '*' to repeat the question.	

<b>Script 1 (6)</b>	DPN_SideEffectsA.wav  "feeling dizzy, feeling nauseated, having dry mouth, feeling constipated or feeling sleepy"	Thanks so much for your response. This is my last question. Now I'd like to ask about medication side effects. Common side effects include suffering from dizziness, nausea, dry mouth, constipation, or sleepiness. You may have had other side effects. During the last <b>seven</b> days, have you had these or any	If 'no', go to 7
		other side effects that you believe may be related to your diabetic peripheral neuropathy medication? Press '1' for yes, and '2' for no.	
<b>Script 1 (7)</b>	Goodbye.wav	That concludes our call for today. Thank you so much for your time. Remember, if you would like to talk with your doctor about your diabetic peripheral neuropathy symptoms or any other health problems, we encourage you to call Kaiser Permanente or log on to KP.org to make an appointment. If you have any questions about your participation in this study, please call us at 1-866-206- 2969. We will call you again in about 2 months. Thank you and good-bye.	END

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**DPN-INTERVENTION CALL SCRIPT 2 VOICE FILES**

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<b>Call Step</b>	<b>Voice File Name</b>	<b>Voice File Script</b>	<b>Skip</b>
<b>Script 2 (intro)</b>	<b>DPN_Intro2.wav</b>	Hi, I'm calling for the Kaiser Permanente Diabetes Telephone Study  If you're ready to begin with the questions, please press '1' to continue. Please press '2' if this is not a good time to talk.	If 1, go to 1a. If 2, go to 1b.
<b>Script 2 (1a)</b>	DPN_Intro2a.wav	This is the second of three brief calls that you'll receive over the next four months. Like the first call, I'll be asking you about your diabetic peripheral neuropathy symptoms. I'll also ask you about the medication your doctor gave you to help treat these symptoms.	Go to 2
<b>Script 2 (1b)</b>	DPN_CallBack.wav	Thanks, we'll try you again later. You can also call us at XXX-XXX-XXXX. Good-bye.	END
<b>Script 2 (2)</b>	DPN_Symptoms.wav	Since our last call, overall have your diabetic peripheral neuropathy symptoms such as pain, burning, or tingling gotten better, worse, or stayed the same? Press '1' for better, '2' for worse, or '3' for stayed the same	Go to 2
<b>Script 2 (3)</b>	DPN_StillTakingE.wav (were tkg it last time)	At this time, are you still taking the medication your doctor prescribed to treat your symptoms? Press '1' if yes and '2' if no.	If yes, skip to 3. If no, go to 2a.
	(discontinuers= Script 1 ,DPN_StillTakingB=2)	We know last time you said you weren't taking <b>any</b> medications for your symptoms. Have you begun taking any medications to treat your symptoms for diabetic peripheral neuropathy since our last call? Press '1' if yes and '2' if no.	If no, go to 9?. If yes, go to 3a??
<b>Script 2 (3a)</b>	DPN_NoLongerTaking.wav	Thanks for your response. People have many reasons for stopping their medications. We would like to know if any of the following 6 reasons caused you to stop taking the medication. You may pick more than one.	
<b>Script 2 (3b)</b>		It was not helping with symptoms, press '1' for yes; '2' for no	

Call Step	Voice File Name	Voice File Script	Skip
<i>Script 2 (3c)</i>		Your doctor told you to stop the medication, press '1' for yes, '2' for no.	
<i>Script 2 (3d)</i>		Your symptoms got better, press '1' for yes, '2' for no.	
		You already were taking too many medications and didn't want to take another one.	
<i>Script 2 (3e)</i>		You had problems with the side effects, press '1' for yes, '2' for no.	
<i>Script 2 (3f)</i>		The medication costs too much, press '1' for yes, '2' for no.	
<i>Script 2 (3g)</i>		If you switched to a different medication, press '1' for yes, '2' for no.	
<i>Script 2 (4a)</i>	DPN_Self Titrate.wav	Thanks for your response. In the last two months, have you decided on your own to increase or decrease the amount of medication you take for your symptoms? Press '1' for increase; '2' for decrease; or 3 for I haven't done this.	
<i>Script 2 (4b)</i>	DPN_AddedMedication.wav	Sometimes doctors prescribe more than one medication to treat symptoms of diabetic peripheral neuropathy. Are you taking more than one medication to treat your symptoms? Press '1' if yes and '2' if no. Press 3 if you are not sure.	
<i>Script 2 (5)</i>	DPN_Satisfied.wav	Thinking about your symptoms, is the medication working as well as you hoped it would? If not at all, press '1'. If a little bit, press '2'. If somewhat, press '3'. If quite a bit, press '4'. If very much, press '5'. Press '*' to repeat the question.	
<i>Script 2 (6)</i>	DPN_SideEffectsA.wav	Thanks so much for your response. Now I'd like to ask about medication side effects. Common side effects include suffering from dizziness, nausea, dry mouth, constipation, or sleepiness. You may have had other side effects. During the last <b>seven</b> days, have you had these or any other side effects that you believe may be related to your diabetic peripheral neuropathy medication? Press '1' for yes, and '2' for no.	If 'no', go to 8
<i>Script 2 (7)</i>	DPN_Stopping.wav	This is my last question. Have you	

Call Step	Voice File Name	Voice File Script	Skip
		considered no longer taking or stopping this medication because of side effects? Press '1' for yes, and '2' for no.	
<b>Script 2 (8)</b>	Goodbye.wav	That concludes our call for today. Thank you so much for your time. Remember, if you would like to talk with your doctor about your diabetic peripheral neuropathy symptoms or any other health problems, we encourage you to call Kaiser Permanente or log on to KP.org to make an appointment. If you have any questions about your participation in this study, please call us at 1-866-206-2969. We will call you again in about 2 months. Thank you and good-bye.	END

**DPN-INTERVENTION CALL SCRIPT 3 VOICE FILES**

<b>Call Step</b>	<b>Voice File Name</b>	<b>Voice File Script</b>	<b>Skip</b>
<b>Script 3 (intro)</b>	<i>DPN_Intro3.wav</i>	Hi, I'm calling for the Kaiser Permanente Diabetes Telephone Study that you enrolled in a few months ago.  If you're ready to begin with the questions, please press '1' to continue. Please press '2' if this is not a good time to talk.	If 2, go to 1a. If 1, go to 1b.
<b>Script 3 (1a)</b>	<i>DPN_Intro2a.wav</i>	This is the last call that you'll receive as part of this study. Like the first call, I'll be asking you about your diabetic peripheral neuropathy symptoms. I'll also ask you about the medication your doctor gave you to help treat these symptoms. As before, you can always press * if you need me to repeat a question.	Go to 2.
<b>Script 3 (1b)</b>	<i>DPN_CallBack.wav</i>	Thanks, we'll try you again later. You can also call us at XXX-XXX-XXXX. Good-bye.	END
<b>Script 3 (2)</b>	<i>DPN_Symptoms.wav</i>	So since our last call, overall have your diabetic peripheral neuropathy symptoms such as pain, burning, or tingling gotten better, worse, or stayed the same? Press '1' for better, '2' for worse, or '3' for stayed the same	Go to 3
<b>Script 3 (3)</b>	<i>DPN_StillTakingE.wav</i> (were tkg it last time)	At this time, are you still taking the medication your doctor prescribed to treat your symptoms? Press '1' if yes and '2' if no.	If yes, skip to 3. If no, go to 2a.
	(discontinuers)	We know last time you said you were not taking any medications for your symptoms. Have you begun taking <b>any</b> medications to treat your symptoms for diabetic peripheral neuropathy since our last call? Press '1' if yes and '2' if no.	If no, go to 7.
<b>Script 3 (2a)</b>	<i>DPN_NoLongerTaking.wav</i>	Thanks for your response. People have many reasons for stopping their medications. We would like to know if any of the following 6 reasons caused you to stop taking the medication. You	Go to 7.

		may pick more than one.	
<b>Script 3 (2b)</b>		It was not helping with your symptoms, press '1' for yes and '2' for no	
<b>Script 3 (2c)</b>		Your doctor told you to stop the medication, press '1' for yes, '2' for no.	
<b>Script 3 (2d)</b>		Your symptoms got better, press '1' for yes, '2' for no.	
		You already were taking too many medications and didn't want to take another one, press '1' for yes, '2' for no.	
<b>Script 3 (2e)</b>		You had problems with the side effects, press '1' for yes, '2' for no.	
<b>Script 3 (2f)</b>		The medication costs too much, press '1' for yes, 2 for no.	
<b>Script 3 (2g)</b>		If you switched to a different medication, press '1' for yes, 2 for no.	
<b>Script 3 (2h)</b>		If you stopped taking the medication for other reasons, press '1' for yes, '2' for no.	
<b>Script 2 (3a)</b>	DPN_Self Titrate.wav	Thanks for your response. In the last two months, have you decided on your own to increase or decrease the amount of medication you take for your symptoms? Press '1' for increase; '2' for decrease; or 3 for I haven't done this.	
<b>Script 3 (3b)</b>	DPN_AddedMedication.wav	Sometimes doctors will prescribe more than one medication to treat symptoms of diabetic peripheral neuropathy. Are you taking more than one medication to treat your symptoms? Press '1' if yes and '2' if no. Press 3 if you are not sure.	
<b>Script 3 (4)</b>	DPN_Satisfied.wav	Thinking about your symptoms, is the medication working as well as you hoped it would? If not at all, press '1'. If a little bit, press '2'. If somewhat, press '3'. If quite a bit, press '4'. If very much, press '5'. Press '*' to repeat the question.	
<b>Script 3 (5)</b>	DPN_SideEffectsA.wav	Thanks so much for your response. Now I'd like to ask about medication side effects. Common side effects include suffering from dizziness, nausea, dry mouth, constipation, or sleepiness. You may have had other side effects. During the last <b>seven</b> days, have you had these or any other	If 'no', go to 7



		side effects that you believe may be related to your diabetic peripheral neuropathy medication? Press '1' for yes, and '2' for no.	
<b>Script 3 (6)</b>	DPN_Stopping.wav	Have you considered stopping this medication due to side effects? Press '1' for yes, and '2' for no.	
<b>Script 3 (7)</b>	Goodbye.wav	That concludes our call today. Thank you <b>so</b> much for your time. This is the last call we will have together. You will receive a call from a live interviewer in about one month for a follow up interview. Thank you very much for your ongoing participation in this research project. Remember, if you would like to talk with your doctor about your diabetic peripheral neuropathy symptoms or any other health problems, we encourage you to call your doctor to make an appointment or log on to KP.org. If you have any questions about your participation in this study, please call us at 1-866-206-2969. Thank you and good-bye.	END