

**Thank you for your help with this survey.  
Your co-operation is very much  
appreciated.**

**For further information, please contact:**

Name of the contact person

Address

Toll-free phone number

E-mail address

Survey web page



## **Health Examination Survey**



### **What is this survey about?**

The intention of this health examination survey is to receive up to date health information of the adult population of x (*country*). The information gathered will be used for planning health care as well as assessment of the prevalence of diseases, their causes, and care. The survey is being carried out by x and y (*name of the organization/partners*).

### **Why am I selected?**

We have invited 4000 people to take part in the survey. You have been randomly selected from the national population register.

### **Why is it important to participate?**

This survey is important for improving public health. As you have been selected to the sample, your participation is very important. As the selection has been made by random, it is not possible to replace a selected person by anyone else.

### **Do I benefit from the survey?**

Yes, you will receive important information about your health. During the examinations you have a chance to get feedback on results and talk to the health professional. After the examination you will get a report of your results in mail. The health examination is free of charge.

All participants will receive xx (*if incentives are used*).

### **What measurements are included?**

The measurements include height, weight, waist circumference, blood pressure and x (*list additional measurements*). Also a blood sample will be taken to measure total and HDL-cholesterol and glucose.

The measurements are safe and are made by specifically trained and qualified personnel.

### **Is the survey confidential?**

All survey data is confidential and protected by legislation (Data Protection Act). This means that survey results will not be presented to reveal your identity at any point.

### **Is the survey compulsory?**

Participation is completely voluntary. The success of the survey relies on the co-operation and goodwill of those asked to take part. The more people take part, the more useful the results are. You may withdraw from the survey at any point.

### **Whom can I contact to ask further questions?**

We will help you with any questions or concerns you may have. Please call us at xx-xx-xxx (*toll-free phone number*). The survey website at <http://www.hes.xx> also has more information.



28 April 2011

Study ID

Mr./Ms. First name Last name  
Street address  
City

Dear Mr. /MS. Last name,

We are inviting you to participate to the Health Examination Survey of country x (*substitute with the survey name*). This survey studies the health of population in country x (*replace with your country*). You have been selected from national population register to represent 25-64 years old people of the country (*replace with your country*).

In the survey, an interview will be conducted and your height, weight, waist circumference, blood pressure will be measured and blood sample collected.

Representativeness and usefulness of the results of the survey depend on people we contact to get involved. It takes 30-45 minutes to go through the interview and measurements. You cannot be replaced by anyone else. Your participation is voluntary.

All information collected during the survey, will be handled confidentially. You can find answers to the questions regarding the survey from attached leaflet. You can also call on Monday-Friday at 9:00-16:00 to TOLL-FREE-PHONE-NUMBER if you have any questions.

Our survey team will contact you within next few days to arrange the appointment time for you.

The HES survey team thanks you for your collaboration.

Sincerely,

A handwritten signature in blue ink that reads 'Mark Model'.

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Mark Model, Dr.  
Project Leader

A handwritten signature in blue ink that reads 'Susie Super'.

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Susie Super, PhD  
Head of Department



28 April 2011

*Study ID*

Mr./Ms. First name Last name  
Street address  
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All information collected during the survey, will be handled confidentially. You can find answers to the questions regarding the survey from attached leaflet.

We have booked you an appointment for the examination clinic (*provide address of the clinic*) on

**6 May 2011 at 8:30.**

If this time is not suitable for you, please call on Monday-Friday at 9:00-16:00 to TOLL-FREE-PHONE-NUMBER to schedule new appointment.

Please, read the instructions to the participants leaflet attached to this invitation before coming to the examination clinic.

The HES survey team thanks you for your collaboration.

Sincerely,

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Mark Model, Dr.  
Project Leader

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Susie Super, PhD  
Head of Department