

ENVIRONMENTAL MONITORS (INCLUDING DUST COLLECTION KIT) TAKE DOWN CALL

ID NUMBER:									
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FORM CODE: ETC
VERSION: 2.0 08/26/2025

Event: _____

0a) Date of Collection: / /

0b) Staff Code:

Instructions: This form should be completed during the participant's Environmental Monitors and Dust Collection Take Down Call.

1) Are all of the Environmental Monitors still located in the place where they were set up initially?

☐ No₀

☐ Yes₁ → **Go to 2**

1a) If No, in what room in your home are the Environmental Monitors located now?

☐ Bedroom₁

☐ Kitchen₂

☐ Living / Family Room₃

☐ Basement₄

☐ Dining Room₅

☐ Study / Den / Office₆

☐ Other₇

1a1) Other, please be specific: _____

2) Did you take down the Environmental Monitors before this call?

☐ No₀ → **Instruct participant to take down the Environmental Monitors and continue filling out this form with the current date and time**

☐ Yes₁ → **Continue filling out this form by asking the participant when they took down the Environmental Monitors**

3) Air Nicotine Indoor Primary Monitor stop date: / /

4) Air Nicotine Indoor Primary Monitor approximate stop time: : AM₁ / PM₂

5) Participant was shipped an Air Nicotine Indoor Blank Monitor.

☐ No₀ = **EST item 2 = No**

☐ Yes₁ = **EST item 2 = Yes**

6) Participant was shipped an Air Nicotine Indoor Duplicate Monitor.

☐ No₀ = **EST item 3 = No** → **Go to 9**

☐ Yes₁ = **EST item 3 = Yes**

7) Air Nicotine Indoor Duplicate Monitor stop date: / /

8) Air Nicotine Indoor Duplicate Monitor approximate stop time: : AM₁ / PM₂

9) NO₂ Indoor Primary Monitor stop date: / /

10) NO₂ Indoor Primary Monitor approximate stop time: : AM₁ / PM₂

11) Participant was shipped an NO₂ Indoor Blank Monitor.

☐ No₀ = **EST item 4 = No**

☐ Yes₁ = **EST item 4 = Yes**

12) Participant was shipped an NO₂ Indoor Duplicate Monitor.

☐ No₀ = **EST item 5 = No** → **Go to 15**

☐ Yes₁ = **EST item 5 = Yes**

13) NO₂ Indoor Duplicate Monitor stop date: / /

14) NO₂ Indoor Duplicate Monitor approximate stop time: : AM₁ / PM₂

15) Did you complete the dust collection?

☐ No₀ → **Go to 17**

☐ Yes, prior to the set up call₁ → **Go to 17**

☐ Yes, after the set up call₂

☐ N/A₃ (i.e., **dust collection kit was not shipped to the participant**) → **Go to 17**

15a) From what room(s) in your home did you collect dust? PLEASE CHECK ALL THAT APPLY.

☐ Bedroom₁

☐ Kitchen₂

☐ Living / Family Room₃

☐ Basement₄

☐ Dining Room₅

☐ Study / Den / Office₆

☐ Other⁷

15a7a) Other, please be specific: _____

16) Dust collection date: / /

Instructions: Ask the participant what date would be best for the return shipment to be picked up by FedEx and enter that date in item 17. Refer the participant to the Environmental Monitors and Dust Collection Kit instructions for packing the items for shipment.

17) Date of scheduled pick-up of return shipment to core: / /

END OF FORM