Introduction and Methods:

- **Full scale study goal**: Assess the association between deployment to Southwest Asia and Afghanistan with pulmonary health. A pilot study was conducted between 2014 and 2016 to prepare for the full-scale study.
- **Pilot study goals**: Learn about exposures, health problems, and motivation for study participation among individuals who served during Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), and Operation New Dawn (OND).
- **Pilot study population**: Deployed and non-deployed Veterans selected at random from a national database.
- **Procedure**: Randomized assignment to questionnaire mode stratified by deployment status.
- **Data collection**: Health and exposure questionnaire via one of four survey modes (see Table 1).

Scientific Questions and Preliminary Results:

**QUESTION A**: What are the demographic and military characteristics of responders compared to the original sample?

- **Age**: Median (95% interquartile range)
  - **Sample**: 36 (31-47) years
  - **Responders**: 39 (33-49) years

- **Number of years since leaving military service**: Median (95% interquartile range)
  - **Sample**: 5.25 (3.26-9.25) years
  - **Responders**: 5.01 (3.26-9.20) years

**Note**: 26% of those sampled (258 out of 1008) responded to the survey.

**QUESTION B**: Among deployed and non-deployed OEF/OIF/OND Veterans, which recruitment mode (mail or telephone/long or short) had the highest response rate?

Key Lessons Learned:

Differences in measured demographic and military history characteristics between responders and non-responders to the pilot study survey appear minimal apart from deployment status. A higher response rate among deployed personnel resulted in a higher percentage of deployed personnel among the responders (p<0.01) compared to the original sample, despite the more frequent assignment to long survey modes. Among the deployed, the response rate to the short mail version of the survey was noticeably higher than other survey modes; differences in response rates among non-deployed personnel were not as noticeable. Response rates did not differ significantly between long and short versions of either mail or telephone surveys for both deployed and non-deployed Veterans.