Form Approved: OMB No. 0920-0840 Expiration Date: 01/31/2013

Local Needs Assessment of Program Collaboration and Service Integration Among Infectious Disease Prevention Providers for Persons Who Use Drugs Illicitly

Attachment 1A

Study Screener

Public reporting burden of this collection of information is estimated to average 1 minute per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; Attn: OMB-PRA (0920-0840)

Good Morning/Afternoon,		
Viral Hepatitis, STD and TB I care and treatment options for specifically interested in findintegration for this population provide services for HIV, Viral	_ and I am calling from the Nat Prevention at the CDC. We are or individuals who use drugs illi- ng out more about program co n. We would like to meet with o al Hepatitis, STDs, TB, substan ces that are currently available	e interested in prevention, icitly in Atlanta, GA. We are illaboration and service rganizations that currently nce abuse or mental health to
If Applicable: We previously of Public Health, and they red	met with commended that we speak wit	, at the Georgia Department h you.
	p a meeting with someone fron ? We anticipate each me	
Do you have any questions?		
appointment. If you have any	contact you on additional questions or if anyt contact me at	hing changes in your
Thank you for your time. We	look forward to meeting with _	<u></u> !