Form Approved
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Attachment 6e. NY telephone script for eligible responders to screening, licensed anglers

Caller: May I speak to [NAME OF LICENSED ANGLER]? I am [CALLER'S NAME] from the New York State Department of Health and I am calling you as a follow-up to the Great Lakes Biomonitoring Project screening survey that you returned to us. We sent you this survey because you hold a current New York fishing license and live near the Great Lakes.

Caller: You have checked "Yes" to all three questions on the screening survey. Are you still interested in participating?

Angler is NOT interested in participating:

Licensed angler: No, I am not interested in participating at this time.

Caller: Ok, thank you for your time.

END CALL.

Angler is interested in participating: **Licensed Angler:** Yes, I am interested.

Caller: Would you like to schedule your in-person interview and sample collection

appointment at this time?

Licensed angler: Yes.

Caller: (Schedule the appointment.) Thank you for your time today and please feel free

to contact us at XXX-XXX-XXXX with any questions you have about the project.

END CAII

Public reporting burden of this collection of information is estimated to average 5 minutes per response for total participation, 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 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, MS D-74, Atlanta, GA 30333, ATTN: PRA (0923-XXXX).