## Appendix K – Train-the-trainer Participant Confirmation Letter

## [ON PROJECT LETTERHEAD]

## [DATE]

Dear Dr. XXXXXXXXXXXX,

Thank you for agreeing to participate in one of our "Promotion of the National ALS Registry to Non-referral Centers" training sessions. This letter confirms that you have been scheduled for a training session with me on:

## **DATE OF INTERVIEW at START TIME at LOCATION**

As a reminder, the purpose of the training session is to provide you and your staff with information to educate your ALS patients about the National ALS Registry self-enrollment process. We hope the training session will provide you with the necessary tools to do so.

If you have any questions before the training session, please call Ms. Jordan/Rechtman at [for Heather insert: 609-613-6930 OR for Lindsay insert: 404-683-4394.]

If you have any questions or concerns about the project, please email me at wek1@cdc.gov or call me at 770-488-3699.

Sincerely,

Wendy E. Kaye, PhD Project Director National ALS Registry Promotion Project