**[ON PROJECT LETTERHEAD]**

**[DATE]**

Dear Dr. XXXXXXXXXXXX,

A Promotion of the National ALS Registry to Non-referral Centers Project team member identified you as a neurologist that either currently diagnoses and/or care persons with ALS or as a neurologist that would diagnose and/or care for persons with ALS if they presented to you. All such neurologists were eligible to receive a key informant interview and a small group of those neurologists were selected. The purpose of the key informant interviews is to better understand neurologists’ knowledge, attitudes, beliefs pertaining to the National ALS Registry, and to review some of the current materials used to promote the National ALS Registry.

***Your name was selected as one of our possible key informant interviewees.***

Enclosed is an Informed Consent Form for your review. If you agree to participate, you will be asked to complete a 45-60 minute interview in a location and at a time that is convenient to you. The interview will be digitally recorded and once the interview is transcribed, the recording will be destroyed. Your name will not be associated with the recording, transcript, or write-up of the interviews in any way. There are no costs to you to take part in this interview, except for your time. You will receive a $100 gift card at the end of the interview.

Feel free to call or email if you would like to schedule an interview. If I do not hear from you, we will follow up with you to see if you are interested in participating.

If you have any questions before the interview, please call or email Ms. Jordan/Rechtman at [for Heather insert: 609-613-6930/hjordan@mcking.com OR for Lindsay insert: 404-683-4394/lrechtman@mcking.com.]

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

Enclosure