



Attention BEEA Study Participants!

It is important that you make the following preparations for your study visit:

Consent Form

Please take some time to review the consent form so you can be prepared to complete it with the interviewer. The interviewer will address any questions or concerns you may have at the beginning of your visit, or you may also call us at the number below.

Prescription Medications

We will be asking you about the prescription medications you take regularly. Please assemble them in their original containers so they are ready to review with the interviewer.

Work History

We will be asking you about your work history since you were age 18. This includes any full- or part-time positions you have held for a total of at least 12 months. Please use the space provided on this card to help you prepare this information.

Urine Sample Collection

Please review the Directions for Urine Collection and the materials in the collection kit. It is very important that you collect the urine sample on the morning of your visit.

Please call us at 1-800-217-1954 if you have any questions.

In preparation for your interview, please record your Work History, including the start and end year, job title and company name for each job you held for at least 12 months since you were at least 18. We will collect this information at your visit.

Start and End Years	Job Title	Company Name



Attention BEEA Study Participants!

It is important that you make the following preparations for your study visit:

Consent Form

Please take some time to review the consent form so you can be prepared to complete it with the interviewer. The interviewer will address any questions or concerns you may have at the beginning of your visit, or you may also call us at the number below.

Prescription Medications

We will be asking you about the prescription medications you take regularly. Please assemble them in their original containers so they are ready to review with the interviewer.

Work History

We will be asking you about your work history since you were age 18. This includes any full- or part-time positions you have held for a total of at least 12 months. Please use the space provided on this card to help you prepare this information.

Urine Sample Collection

Please review the Directions for Urine Collection and the materials in the collection kit. It is very important that you collect the urine sample on the morning of your visit.

Please call us at 1-800-424-7883 if you have any questions.

In preparation for your interview, please record your Work History, including the start and end year, job title and company name for each job you held for at least 12 months since you were at least 18. We will collect this information at your visit.

Start and End Years	Job Title	Company Name

Public reporting for this collection of information is estimated to average five minutes 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: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0406). Do not return the completed form to this address