Form Approved OMB No. 0902-XXXX Exp.: XX/XX/20XX

Attachment 15 – Letter of Introduction to Mother

<<Date>>

«motherfirstname» «motherlastname»
«address1»
«address2»
«city», «state» «zip»

Dear «motherfirstname»,

We are contacting you because your child, "patientfirstname" "patientlastname", was identified by the health department in the state where "he/she" was born as a person born with a heart condition. We have been trying to reach "patientfirstname" to invite "him/her" to take part in a survey to examine the healthcare needs of people born with heart conditions. This project is being conducted by the (site), Centers for Disease Control and Prevention (CDC), and the March of Dimes. To learn more about this project, you can visit << Website address>>.

We have not been able to successfully contact your child and would like to ask for your help reaching «him/her». Information from this survey will help us identify unmet needs of adults born with a heart condition. None of your child's answers will be linked to «his/her» name, nor will «his/her» name ever be released as having a heart condition, having completed the survey, or having been asked to participate.

If you would like to provide us with your child's contact information, please return the enclosed contact information form and postage paid envelop, or contact Dr. Sherry Farr, National Center on Birth Defects and Developmental Disabilities, CDC, at (800) xxx-xxxx.

Hundreds of people born with a heart condition are taking part in this survey across the country. Everyone's answers are important to us and will add to what we learn about how heart conditions affect adults. The findings from the survey will help current adults who were born with heart conditions and the future lives of children born with heart conditions.

If we have contacted you in error and this is not your child, or your child was not born with a heart condition, please contact Dr. Sherry Farr at (800) xxx-xxxx so that we can update our records.

Thank you for completing this important survey.

Enclosure:
Contact information form
Postage paid envelop

To learn more about this project, you can visit << Website address>>.

Si desea llenar la encuesta en Español, favor de llamar al (800) xxx-xxxx.