

HEALTHCARE PROFESSIONAL EMAIL INVITE

Dear Dr. XXXXXXXXXXXXX,

Thank you so much for your participation in Zika Care Connect. We are writing to ask you to complete a brief survey about your experiences as a provider enrolled in the program. This survey will take less than five minutes to complete. Participation is voluntary and anonymous. We value your opinion and your participation will help us to improve Zika Care Connect and inform future programs.

If you would like to participate, please complete the survey by clicking on this link: (insert survey link). The survey will be accessible until (insert date).

On behalf of Zika Care Connect, we thank you for completing this brief survey. If you have any questions or concerns about the project, please feel free to email me at lrechtman@mcking.com or call me at 404-683-4394. In addition, please feel free to contact Caitlin Green at lkj8@cdc.gov or 404-498-1462.

Thank you in advance for your consideration of participation in this important survey.

Sincerely,

Lindsay Rechtman, DrPH, MCHES
Project Director
McKing Consulting

Follow Up Emails

Dear XX,

Thank you again for agreeing to participate in our Zika Care Connect Healthcare Professional Network. We are writing to remind you of the invitation we emailed you on (INSERT DATE) to participate in a brief survey of your experiences as an enrolled provider in the Network. If you have already completed and submitted the survey, thank you for your valuable input!

If you have not yet completed the survey, please follow this link (insert link) to access the survey. These surveys are critically important to the Zika Care Connect program and your input and participation is greatly appreciated.

If you have any questions, please contact us at lrechtman@mcking.com or 404-683-4394.

Sincerely,
Lindsay Rechtman, DrPH, MCHES
Project Director
McKing Consulting