



DATE

<<Medical Provider>>

<<Street1>>

<<Street2>>

<<city>><<state>><<zip>>

Dear Dr. <<Medical Provider>>,

This is your last opportunity to participate in the 2017 National Survey of Medical Providers on policies and practices for preventing or treating Sexually Transmitted Diseases (STDs).

If you *have* completed the online survey, thank you!

This survey, sponsored by the Division of STD Prevention, an office of the CDC, seeks to understand your guidelines and practices regarding STD diagnosis, treatment, partner notification and treatment, reporting and disease control practices.

online by going to: **www.W.U.RL.com**

QR Code

Once we receive your completed survey, we will send \$40 as a token of appreciation for your participation in this important research.

STDs, including congenital syphilis, are on the rise in the US and this survey will help CDC prioritize over \$10 million dollars' worth of clinical training, tools and guidelines, and investments. Your practice has been randomly selected to represent almost 814,000 physicians, and we cannot replace you with anyone else.

Participation in the survey is voluntary. Survey responses will be kept private and only aggregate data will be analyzed or reported. If you have any questions, please contact ICF. They can be reached via email at [survey name]@icfsurveysupport.com or toll-free at 1-###-###-####.

Thank you for your time and consideration.

Sincerely,

Gail Bolan, MD
Director of Division of STD Prevention,
Centers for Disease Control & Prevention
1600 Clifton Road NE, Mailstop E-02
Atlanta, GA 30329-4027