Form Approved OMB Number: 0920-XXXX Expiration Date: XX/XX/XXXX

## Attachment 3

## Emergency Zika Package: Zika Reproductive Health Call-Back Survey (ZRHCS), 2017

## **Recruitment Script**

"We would like to call to you again to talk in more detail about reproductive issues related to the Zika virus.

The information will be used to help develop and improve the response to the Zika virus in <STATE>. The information you gave us today and any you give us in the future will be kept confidential.

If you agree to this, we will keep your first name or initials and phone number on file, separate from the answers collected today.

Even if you agree now, you may refuse to participate in the future. Would it be okay if we called you back to ask additional questions at a later time?"

- 1 Yes
- 2 No