July 25, 2024

«motherfirstname» «motherlastname»
«address1»
«address2»
«City», «State» «zip»

Dear Ms. «motherlastname»:

On behalf of the Birth Defects Study To Evaluate Pregnancy exposureS or BD-STEPS team, I want to thank you for returning the BD-STEPS newborn bloodspot consent form <and the BD-STEPS Informed Consent for Release of Reportable Infectious Disease Results form> <<NC only: as well as the NC State Laboratory of Public Health <and NC Division of Public Health Communicable Disease Branch> form<s>>to us.

Your <child/children's> <bloodspots OR bloodspot samples> will be used to help us better understand how genetic and other biologic factors play a role in why some babies have birth defects. <The information on reportable infectious diseases will be used to help us better understand how an infection before or during pregnancy might play a role in why some pregnancies are affected by birth defects or other pregnancy problems.> Enclosed is a \$10 gift card <for each consent> as a token of appreciation for your time and interest.

Please feel free to call one of our study staff at 1-888-743-7324 or <Insert Local PI or study coordinator Name> at [insert local contact number] if you have any questions that were not answered. In addition, I hope we may contact you again if new questions come up as we progress in our work.

We publish an electronic newsletter yearly that updates participants on the progress of the study. You can access this newsletter at www.bdsteps.org.

Thank you again for your contributions to BD-STEPS.

Sincerely yours,

<Insert Local PI or study coordinator Name and local contact>