

«Date»

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

Dear Ms. «motherlastname»:

<For MA: On behalf of the Birth Defects Study To Evaluate Pregnancy exposureS (BD-STEPS), thank you for letting us interview you for our study. Your taking part in this study will help us learn more about the possible causes of birth defects and why stillbirths happen. Your willingness to take part in this study has been most valuable to us and will help other families in the future. We have included a \$30 gift card to thank you for the time you spent taking the first part of the interview. If you have scheduled the second part of the telephone interview, our interviewers will call you at your chosen time. If you have not scheduled the second part of the interview, our interviewers will call you to discuss a time that is convenient for you. The interview takes about 20-30 minutes and will focus on other factors to help us learn why some pregnancies end in a stillbirth and some do not. If you complete the second part of the interview, we will send you an additional \$20 gift card to thank you for the time you spent on this part of the interview.

<<[For SB w/ BD and all controls] In addition to the second part of the interview, there are other ways you can continue to participate in BD-STEPS.

To help us understand more about how infectious diseases before and during pregnancy may contribute to birth defects and other pregnancy problems, we are asking for your permission to request your infectious disease information that was already reported by your physician to the **<INSERT State Health Department/Agency>**. Please read the information included in this letter called, “Informed Consent for Release of Infectious Disease Results.” If you choose to take part, please sign the consent form and return it to us in the postage-paid envelope. A second copy of the consent form is included for you to keep. After we receive the signed consent form, we will mail you a \$10 gift card as a token of appreciation for your time and interest.>>

<<[For singleton controls] To help us understand more about genetic and other biologic factors that may contribute to birth defects and other pregnancy problems, we are also asking for your permission to ask for some of the leftover heel stick blood that was already collected shortly after your baby’s birth by the **<Screening Program>**. Please read the information included with this letter called, “Informed Consent for Release of Leftover Newborn Bloodspots.” If you choose to take part, please sign the consent form and return it to us in the postage-paid envelope. A second copy of the consent form is included for you to keep. After we receive the signed consent form, we will mail you a \$10 gift card as a token of appreciation for your time and interest.>>

<<[For multiple controls] To help us understand more about genetic and other biologic factors that may contribute to birth defects and other pregnancy problems, we are also asking for your permission to ask for some of the leftover heel stick blood that was already collected shortly after your babies’ birth by the **<Screening Program>**. Since your baby was part of a **<twin/triplet/multiple>** birth, we would also like to request some of the leftover newborn bloodspots from your baby’s **<twin/triplet/multiple> live born sibling<>**. Multiple births give a lot of information for researchers who study genetics and birth defects.

You can decide to share the leftover newborn bloodspots for <one/some> but not <both/all> of your <twins/triplets/multiples>.

Please read the information included in this letter called, “Informed Consent for Release of Leftover Newborn Bloodspots For Mothers of Multiples.” If you choose to take part, please sign the consent form and return it to us in the postage-paid envelope. A second copy of the consent form is included for you to keep. After we receive the signed consent form, we will mail you a \$10 gift card as a token of appreciation for your time and interest.>> >

<For AR: On behalf of the Birth Defects Study To Evaluate Pregnancy exposureS (BD-STEPS), thank you for letting us interview you for our study. Your taking part in this study will help us learn more about the possible causes of birth defects and why stillbirths happen. Your willingness to take part in this study has been most valuable to us and will help other families in the future. We loaded your ClinCard with \$30 to thank you for the time you spent taking the first part of the interview. If you have scheduled the second part of the telephone interview, our interviewers will call you at your chosen time. If you have not scheduled the second part of the interview, our interviewers will call you to discuss a time that is convenient for you. The interview takes about 20-30 minutes and will focus on other factors to help us learn why some pregnancies end in a stillbirth and some do not. If you complete the second part of the interview, we will load your ClinCard with an additional \$20 to thank you for the time you spent on this part of the interview.

<<[For SB w/ BD and all controls] In addition to the second part of the interview, there are other ways you can continue to participate in BD-STEPS.

To help us understand more about how infectious diseases before and during pregnancy may contribute to birth defects and other pregnancy problems, we are asking for your permission to request your infectious disease information that was already reported by your physician to the <INSERT State Health Department/Agency>. Please read the information included in this letter called, “Informed Consent for Release of Infectious Disease Results.” If you choose to take part, please sign the consent form and return it to us in the postage-paid envelope. A second copy of the consent form is included for you to keep. After we receive the signed consent form, we will load your ClinCard with \$10 as a token of appreciation for your time and interest.>>

<<[For singleton controls] To help us understand more about genetic and other biologic factors that may contribute to birth defects and other pregnancy problems, we are also asking for your permission to ask for some of the leftover heel stick blood that was already collected shortly after your baby’s birth by the < Screening Program>. Please read the information included with this letter called, “Informed Consent for Release of Leftover Newborn Bloodspots.” If you choose to take part, please sign the consent form and return it to us in the postage-paid envelope. A second copy of the consent form is included for you to keep. After we receive the signed consent form, we will load your ClinCard with \$10 as a token of appreciation for your time and interest.>>

<<[For multiple controls] To help us understand more about genetic and other biologic factors that may contribute to birth defects and other pregnancy problems, we are also asking for your permission to ask for some of the leftover heel stick blood that was already collected shortly after your babies’ birth by the < Screening Program>. Since your baby was part of a <twin/triplet/multiple> birth, we would also like to request some of the leftover newborn bloodspots from your baby’s <twin/triplet/multiple> live born sibling<>. Multiple births give a lot of information for researchers who study genetics and birth defects.

You can decide to share the leftover newborn bloodspots for **<one/some>** but not **<both/all>** of your **<twins/triplets/multiples>**.

Please read the information included in this letter called, “Informed Consent for Release of Leftover Newborn Bloodspots For Mothers of Multiples.” If you choose to take part, please sign the consent form and return it to us in the postage-paid envelope. A second copy of the consent form is included for you to keep. After we receive the signed consent form, we will load your ClinCard with \$10 as a token of appreciation for your time and interest.>> >

To keep women who took part in the study up-to-date, we have an electronic newsletter available that updates families on the progress of the study. You can see this newsletter at www.bdsteps.org.

If you have any questions, please call one of our study staff at <<number>> or you can contact <<name>> at <<number>>.

Thank you for helping us to better understand and prevent birth defects and stillbirths.

Sincerely,

Enclosures

<<Study ID>>