Population	Number of Participants
Primary Care Physicians or Family/Internal Medicine Physicians	5
Obstetricians/Gynecologists (OB/GYNs)	5
Pediatricians	5
Oncologists	5
Nurse practitioners (NP) or physician assistants (PAs)	5
Healthcare providers (of any type) who work at federally qualified health centers (FQHCs) or community health centers	8
Total	33

Attachment #9- Messages to be Tested

- Please submit fewer messages if you think your content will take a longer time (> 5 minutes) to present. An example of a longer piece is a two-page infographic, a video, or a webpage.
- Please specify 1-2 audiences for each message from the list above.
- Add drafts/concepts of messages that have yet to be developed if needed.
- See the example line below.

Messages/Materials for Testing

POC/	Audience (pick	Message/Content (Please specify	Testing Presentation	Probes (Why are you
Branch	1-2 per	content type: social media graphic,	(ex. Side-by-side,	asking this?)
	content)	social media text copy, video, etc.)	scroll through)	

CDC estimates the average public reporting burden for this collection of information as 60 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30333; ATTN: PRA (0920-1154).

Deanna/ OD example	Older Adults (65+)	<section-header><section-header></section-header></section-header>	Scroll through	 How do you feel after reading this table? Is there any information that you feel is missing/that you'd like to see here?
Sara/OD	All audiences	Information for Healthcare Professionals (cdc.gov)	Scroll through and look at the high level topics and information	 Will these topics help you in your job? What additional information is missing that you'd like to see?
Mabel/ ORPB	OB/GYN and PCPs	Protect your pregnant from Listeria webpage and factsheet	Show the webpage and get participant's feedback. Then click on the "Download factsheet" button at the bottom of the page to show the factsheet (to show participants where the factsheet can be downloaded), and get feedback as well	 Webpage First impression/ thoughts? How familiar are you with Listeria? Have you spoken to your patients about Listeria before? (if not mentioned earlier in the interview/FGD) What do you think would be helpful or not helpful for your patients (who are pregnant)? Is there any information missing? How likely would

		[1	
				you use this page/information as a resource when talking to your patients? - How likely would you share this link with your patients? Which patients would you share it with?
				 Factsheet First impression/ thoughts? (Second page of factsheet) Are there any food on this table that you disagree with, or won't necessarily ask your patients to avoid? Are there any food not listed here that you have told patients to avoid? (Second page) How helpful would this be for your patients? Why? Would you prefer sharing a printout of this factsheet or a link to the
Mabel/ ORPB	PCP and FQHCs (NP/PAs too if	Listeria and Older Adults <u>webpage</u> and <u>factsheet</u>	Same as above	webpage? Same as above, for patients who are 65 years
Mabel/ ORPB	possible) Oncologists and PCPs (NP/PA and FQHCs too if	Listeria and People with Weakened Immune Systems <u>webpage</u> and <u>factsheet</u>	Same as above	or older Same as above, for patients who have a weakened immune system

	possible)		
Kelsey/ OD	PCP and FQHCs (Oncologists, NP/PA if possible too)	Scroll through focusing on each food type for ~30 seconds	 How likely are you to share this resource with your older patients? (follow-up question: If not you, what HCP will likely discuss this with patient?) Are there any of your patients you are more likely to share this with (older and immunocompromised, older with chronic conditions, only those that ask about safe food, etc.)? Do you agree with the foods that are listed as safer and riskier? Do you have time to explain to your patients why foodborne illness is of concern for them at their age? What information do you feel is missing/you'd like to see here? Would you prefer this resource be available for your patients in another form (is a printable version or online link more helpful, something else)?
Kelsey/	Pediatricians and	Scroll through	- How likely are you to
OD	PCPs	focusing on each food type for ~30 seconds	share this resource with parents/caregivers of



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ODOncologists (FQHCs and NP/PAs too if possible)Image: Constraint of the second se	OD Oncologists (FQHCs and NP/PAs too if possible) Steff Foodback (FQ HCs and NP/PAs too if possible) Steff Foodback (FQ HCs and NP/PAs too if possible) Steff Foodback (FQ HCs and NP/PAs too if possible) Steff Foodback (FQ HCs and NP/PAs too if possible) Steff Foodback (FQ HCs and NP/PAs too if possible) Steff Foodback (FQ HCs and NP/PAs too if possible) Steff Foodback (FQ HCs and NP/PAs too if possible) Steff Foodback (FQ HCs and NP/PAs too if possible) Steff Foodback (FQ HCs and NP/PAs too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCs and NP/Pas too if possible) Steff Foodback (FQ HCS and NP/Pas too if possible) Steff Foodback (FQ HCS and NP/Pas too if possible) Steff Foodback (FQ HCS and NP/Pas too if possible) Steff Foodback (FQ HCS and NP		<u>г</u>	
for your patients in another form (is a printable version or online link more helpful, something		OD	(FQHCs and NP/PAs too if possible)	 with your <i>immunocompromised</i> <i>patients</i>? (follow-up question: If not you, what HCP will likely discuss this with patient?) Are there any of your patients you are more likely to share this with (specific type(s) of <i>immunocompromised</i>, very young and <i>immunocompromised</i>, very young and <i>immunocompromised</i>, only those that ask about safe food, etc.)? Do you agree with the foods that are listed as safer and riskier? Do you have time to explain to your patients why foodborne illness is of concern for them due to their health condition? What information do you feel is missing/you'd like to see here? Would you prefer this resource be available for your patients in another form (is a printable version or online link more

Kelsey/	OB/GYNs and		Scroll through	-	How likely are you to
OD OD	PCP (FQHCs	SAFER FOOD CHOICES FOR PREGNANT PEOPLE Average have to be used by a bear where these participants and and the to prove participants and and the second participants and a seco	focusing on each		share this resource
	and NP/PAs too	Construction of the second secon	food type for ~30		with your pregnant
	if possible)	Enderschaft das startich, das früge auförstender frie spranger Herperschaft das startich, das früge auförstender frie spranger Herperschaft das startick das st	seconds		patients? (follow-up
		Park dat	50001103		question: If not you,
		APRICE APRICE APPACE			what HCP will likely
		Australia de la gradad per la de la gradad de la gradad de la gradad de la de la gradad de			discuss this with
		COEX Construct a state how productional parts of the state of the productional parts of the state of the productional parts of the state of			patient?)
		Comparing a set or a set or advanced prior or gas advanced for come can advanced or gas,			Are there any of your
		Network Production and the standard sta		-	
		Katalow Sorreget and state Sorreget and			patients you are more
		Charles where the and all here the additional and the original and			likely to share this with
					(pregnant and
		Safer/riskier food table for			immunocompromised,
		pregnant people (<u>printable PDF</u>)			high-risk pregnancy,
					pregnant with chronic
					conditions, only those
					that ask about safe
					food, etc.)?
				-	Do you agree with the
					foods that are listed as
					safer and riskier?
				-	Do you have time to
					explain to your
					patients why
					foodborne illness is of
					concern for them due
					to pregnancy?
				-	What information do
					you feel is
					missing/you'd like to
					see here?
				-	Would you prefer this
					resource be available
					for your patients in
					another form (is a
					printable version or
					online link more
					helpful, something
					else)?
				+	
				+	
				-	