Consent Script

I am calling from [name of health department]. We were notified by your doctor about a complication you experienced after receiving surgery, treatment, or a medical or dental procedure outside the United States. I would like to ask you some questions about your health and the care you received outside the outside the United States. The full interview should take about 20-25 minutes.

The information you provide will help us better understand the risks of having similar procedures or treatments outside the U.S. and could prevent others from getting sick. Providing this information is voluntary. You are free to answer all, some, or none of these questions. You may also end the interview for any reason at any time. We will share the information you provide with public health colleagues at the US Centers for Disease Control and Prevention (or CDC) but we will not share your name or contact information. Your information will be kept confidential and will not be shared outside of the public health investigation group. We will not use your name or any identifiable information in any reports.

Are you willing to participate in this interview? YES/NO