



Dear «FirstName» «LastName»:

Para recibir esta información en español, por favor envíe un correo electrónico a [mPINC@cdc.gov](mailto:mPINC@cdc.gov).

*IF PREVIOUS mPINC RESPONDENT:*

Thank you for your previous participation in the Centers for Disease Control and Prevention's (CDC) Maternity Practices in Infant Nutrition and Care (mPINC) survey. We invite you to complete the 2026 mPINC survey using the link below. This mPINC survey is being conducted by Abt Global on behalf of the CDC. Your participation is completely voluntary; it takes approximately 30 minutes to complete. If your hospital completes the survey, we will send you an individualized report with your hospital's survey responses that can be used to improve care practices and policies to better support your hospital's maternity patients.

*IF NOT PREVIOUS mPINC RESPONDENT AND IDENTIFIED THROUGH CALLING:*

Recently one of our staff contacted your hospital about the 2026 Centers for Disease Control and Prevention's (CDC) Maternity Practices in Infant Nutrition and Care (mPINC) survey. You were identified as someone knowledgeable about these practices at your hospital. We invite you to complete the 2026 mPINC survey using the link below. This mPINC survey is being conducted by Abt Global on behalf of the CDC. Your participation is completely voluntary; it takes approximately 30 minutes to complete. If your hospital completes the survey, we will send you an individualized report with your hospital's survey responses that can be used to improve care practices and policies to better support your hospital's maternity patients.

*IF NOT PREVIOUS mPINC RESPONDENT AND NOT IDENTIFIED THROUGH CALLING:*

We invite you to complete the 2026 Maternity Practices in Infant Nutrition and Care (mPINC) survey using the link below. This mPINC survey is being conducted by Abt Global on behalf of the Centers for Disease Control and Prevention (CDC). Your participation is completely voluntary; it takes approximately 30 minutes to complete. If your hospital completes the survey, we will send you an individualized report with your hospital's survey responses that can be used to improve care practices and policies to better support your hospital's maternity patients.

The link provided here is unique to your hospital. If your hospital has more than one location that provides maternity care, please complete the survey **only for the location identified below**.

Hospital Name: <<facility name>>

Address: <<address>>

<<city>>, <<state>> <<zip>>

<< Click here to go to the mPINC Survey; Link>>

**If you have any questions regarding this survey, or if maternity care is no longer provided at your hospital, please contact survey staff toll-free at 1-888-854-6545 or by email at [mPINC@cdc.gov](mailto:mPINC@cdc.gov) and refer to Hospital ID <<hospital\_id>>.**

Please submit your survey responses as soon as possible in order for your hospital's information to be included in the mPINC analysis and to receive a Hospital Report.

There is more information at the bottom of this email. Thank you in advance for your time and participation in this important survey.

Sincerely,

Anu Pejavara, MPH  
Chief, Nutrition Branch  
Division of Nutrition, Physical Activity, and Obesity  
National Center for Chronic Disease Prevention and Health Promotion  
Centers for Disease Control and Prevention

### **About the mPINC Survey**

The mPINC survey asks about day-to-day practices in mother-baby care at your hospital, and focuses on infant nutrition and care including breastfeeding, use of formula by healthy newborns, and feeding routines. Since you are completing the survey on behalf of your hospital, you may find that the experience or knowledge of other staff within your hospital may be needed to answer some of the survey questions. We encourage you to share this survey link to obtain input from other key personnel, as needed.

This survey is being conducted by Abt Global on behalf of the Centers for Disease Control and Prevention (CDC) to assess infant feeding practices at maternity care hospitals in the United States and territories. It was first administered in 2007 and has been administered about every two years since, allowing the monitoring of infant feeding practices trends over time. All hospitals in the United States and territories identified as providing maternity care are being asked to participate in the survey, whether or not they participated in the previous surveys.

Once data collection and analysis are complete, we will send you an individualized hospital report containing a summary of your survey results and a comparison of your results to the nation, the region, and to other hospitals of similar size, showing specific changes your hospital can make to support breastfeeding mothers. Hospitals can use this information to improve care practices and policies to better support their maternity patients. In addition, anonymous results from all hospitals will be summarized nationally and for each state.

### **Privacy**

CDC will keep the information that you provide private and secure to the extent permitted by law.

Upon request, data with hospital identifiers (i.e., hospital name and address) may be shared under a data use agreement with applicable state, tribal, local, and territorial health departments for the development of public health programs. Data without hospital identifiers may be released under data use agreements for additional approved purposes such as answering research questions.

Your business contact information is collected to provide your hospital's survey answers and private individualized report, as well as to invite your participation in future mPINC surveys or other related opportunities. Your name, hospital name, and any other personal identifiers will not be included in either oral or written presentation of survey results. Responses will only be reported in summary form (5 or more hospitals) so individual responses cannot be identified. Business contact information (i.e., name and email address) will not be shared with health departments or other data requesters.

### **Survey Tips:**

- Click [here](https://www.cdc.gov/breastfeeding-data/mpinc/survey.html) [https://www.cdc.gov/breastfeeding-data/mpinc/survey.html] to download/print a blank copy of the survey.
- You may change the language to English or Spanish by clicking the language button in the upper right corner. You can then select “English” or “Español” for your preferred language.
- Move between sections of the survey by clicking the **Survey Queue** at the upper right of the page and clicking **Begin survey** on the section of your choosing.
- After completing a section, move to the next by clicking **Complete Section**.
- Do not click on your browser's back and forward buttons while taking the survey.