

**Recruitment Strategies:**

Please comment on

1. Any changes you recommend for implementation to any of the recruitment strategies.
2. Any changes you recommend to the reporting of the data for any of the recruitment strategies

**Sampling Strategy**

Please comment on

1. Any questions you may have about the selection of the primary sampling units
2. If the stringency of the secondary sampling units should be adjusted from the current segment structure to any alternative
3. If the basis for participant selection should be the residence of the participant or the location of the health care provider where the participant seeks or intends to seek prenatal care
4. On the acceptability, including any particular limitations, of
  - a. allowing participants that meet general eligibility criteria regarding age, pregnancy status and location based on primary sampling unit or some other geographic area such as Zip Code or provider base to enroll without restriction and
  - b. then based on demographics grounded in the 2010 census, assigned to high intensity or low intensity data collection. High intensity data collection would be the primary data analysis and low intensity would be a supplemental data analysis.
  - c. The low intensity pool could serve as a reserve population for the high intensity pool
  - d. Populations that are underrepresented in ongoing demographic analyses of enrolled participants would be targeted for enrollment with additional outreach and contact
  - e. with a potential oversampling of hard to reach populations to provide a buffer for any attrition over the course of the study.

