1. Assuming the probability sample is drawn using a birth-center list from sampled PSUs, is there any reason to mount a door-to-door respondent recruitment effort?

2. A birth-center based probability sample, which enrolls prospective mothers when they first present for services related to their pregnancy will start collecting data within weeks of that presentation. When women first present may be affected by socio-economic and demographic factors which are related to health disparities. Will the differences in gestational age that may emerge by income affect inference, and if so, how? For example, will an income gradient in gestational age at enrollment create differences in the availability of prospectively measured environmental factors and thus risk misleading inferences of the effect of income?

3. If environmental data from early in the pregnancy will only be collected for part of the sample, will that compromise statistical power to the extent the study will not be able to detect with adequate precision the effect of environmental factors that are likely significant factors in shaping child health and development? If power is seriously compromised, does this mean the NCS should jettison the objective of peri-conception measurement of environmental factors as a regrettable consequence of the financial infeasibility of the prospective pregnancy design of the door-to-door recruitment strategy.

4. [If discussion above warrants this probing question] Will the add-on layer of data collection aimed at women who present for services with obstetrical providers affiliated with the sampled birthing centers (the third tier) risk sampling bias due to the complexity involved with this larger number of collaborators? Will this layer of sampling support a rigorous probability sample of pregnancies at early gestational ages? Will this layer also support adequate data collection on environmental factors?

6. Assuming there will be a strategy of reserving some fraction, say 10%, of the sample to an outreach recruitment effort (aka convenience sample), are there techniques that will support the combination of that non-probability sample with the probability samples in order to provide more robust scientific inferences than would be possible without the outreach sample?

7. Should the sample size of 100,000 be retained, or should a smaller sample be considered? If the full probability sample with peri-conception environmental data is not feasible, is it better to keep the sample size large and sacrifice greater detail, or is it better to reduce the sample size to insure a strategy of detailed data collection is sustainable over the length of the study?