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| **GENERAL INSTRUCTIONS** – delete this box from the completed form. Red text represents instructions to you – to be deleted from the final version.**NOTE: This form is designed to be a starting point on a Phone Call Summary Report. Update it as necessary for your specific study.** * All phone call communications with the study sponsor, external Lead Team, or regulatory agency like the FDA should be documented and retained in summary format within study regulatory files.
* Phone call communications with a participant should be documented on this form and kept in the participant file. This form can be entirely built within REDCap and maintained within a specific participant’s electronic data record.
* These summary reports should be made available for anyone reviewing study records.
* Delete the CRRO template version date and add in the study-specific version date of this document.
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| **Call Information** |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone Call Type[ ]  Participant – ID# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Sponsor – Name/Role \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Summary of Phone Call:** *Include details surrounding conversation and any required follow-up from study team members or clinicians.* |
|  |
| **Research Staff Completing Form:** |
| Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_­­­­\_\_\_\_\_\_\_\_\_­­­\_\_\_\_­­­­­\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ |