|  |
| --- |
| **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. |

|  |  |
| --- | --- |
| **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: \_\_\_\_\_\_\_\_\_\_\_\_ | |