**RaDaR Delegation Log**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name (please print)** | **Trial Role** | **General Duties (see below)** | **Initials** | **Signature** | **Date of Duties** | | **Principal Investigator Signature** | **Date of PI Signature** |
| **From** | **To** |
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| --- | --- | --- |
| **a.** Compilation and Maintenance of Site Files | **b.** Patient Identification | **c.** Informed Consent Procedures |
| **d.** Data Entry | **e.** Other – Please specify …………………………………….. | **f.** Other – Please specify …………………………………….. |

**RaDaR Screening Log**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ID** | **Participant Initials** | **Gender** | | **Screening Date**  **(dd/mm/yyyy)** | **Hospital**  **Number** | **Condition** | **Outcome –**  **Please Tick** | | **Brief Reason for Screening Failure** |
| **M** | **F** |
|  |  |  |  |  |  |  | Recruited |  |  |
| Screening Failure |  |
|  |  |  |  |  |  |  | Recruited |  |  |
| Screening Failure |  |
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| Screening Failure |  |
|  |  |  |  |  |  |  | Recruited |  |  |
| Screening Failure |  |

**RaDaR Enrolment Log**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **ID** | **Participant Name** | **Gender** | | **Date of Birth** | **Hospital Number** | **Condition** | **Recruitment Date** |
| **M** | **F** |
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