Emergency Medicine Request to Enroll

Principal Investigator:

Lead Study Coordinator:

Protocol title (attach protocol):

Plan to:

Screen in Adult ED ☐ Children’s ED ☐ EC3 ☐

Consent/Enroll in Adult ED ☐ Children’s ED ☐ EC3 ☐

Do you have an ED faculty collaborator?

Name of collaborator:

What times/days per week do you plan to approach in the Emergency Dept?

How many patients do you plan to approach?

What is the enrollment period/dates (ex. July 2022-Dec 2022)?

Does your study allow co-enrollment?

Who should be contacted for co-enrollment questions?

REMINDER: A research note must be placed in MiChart when a patient is consented/enrolled.