study pocket card Template

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| Provide this pocket card to referring physicians to help them recall the study’s eligibility criteria when examining patients. Include only high-level eligibility criteria for referring clinicians to quickly assess patients.  |

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| [INSERT STUDY NAME]**Objective:** [Describe the study objective in one to two sentences. Use lay-friendly language that the physician can convey to patients.] Inclusion Criteria (Partial):* [Inclusion Criteria]
* [Inclusion Criteria]
* [Inclusion Criteria]

What is Involved?* [Provide study duration]
* [How many visits are involved?]
* [Note main study procedures]
* [Participant reimbursement?]

**If Patient is Interested:** Please fax the provided referral form with the patient’s contact information.If preferable, patient can contact:L:\Research\Research Partnerships\Recruitment & Retention Team\BPM & Toolkit\Toolkit\R&R Toolkit\Design\Final Template Icons\insert_study_image-logo.jpg[Coordinator name][Site name][Coordinator phone][Coordinator email] [Insert Study Logo]  |

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* [Inclusion Criteria]
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