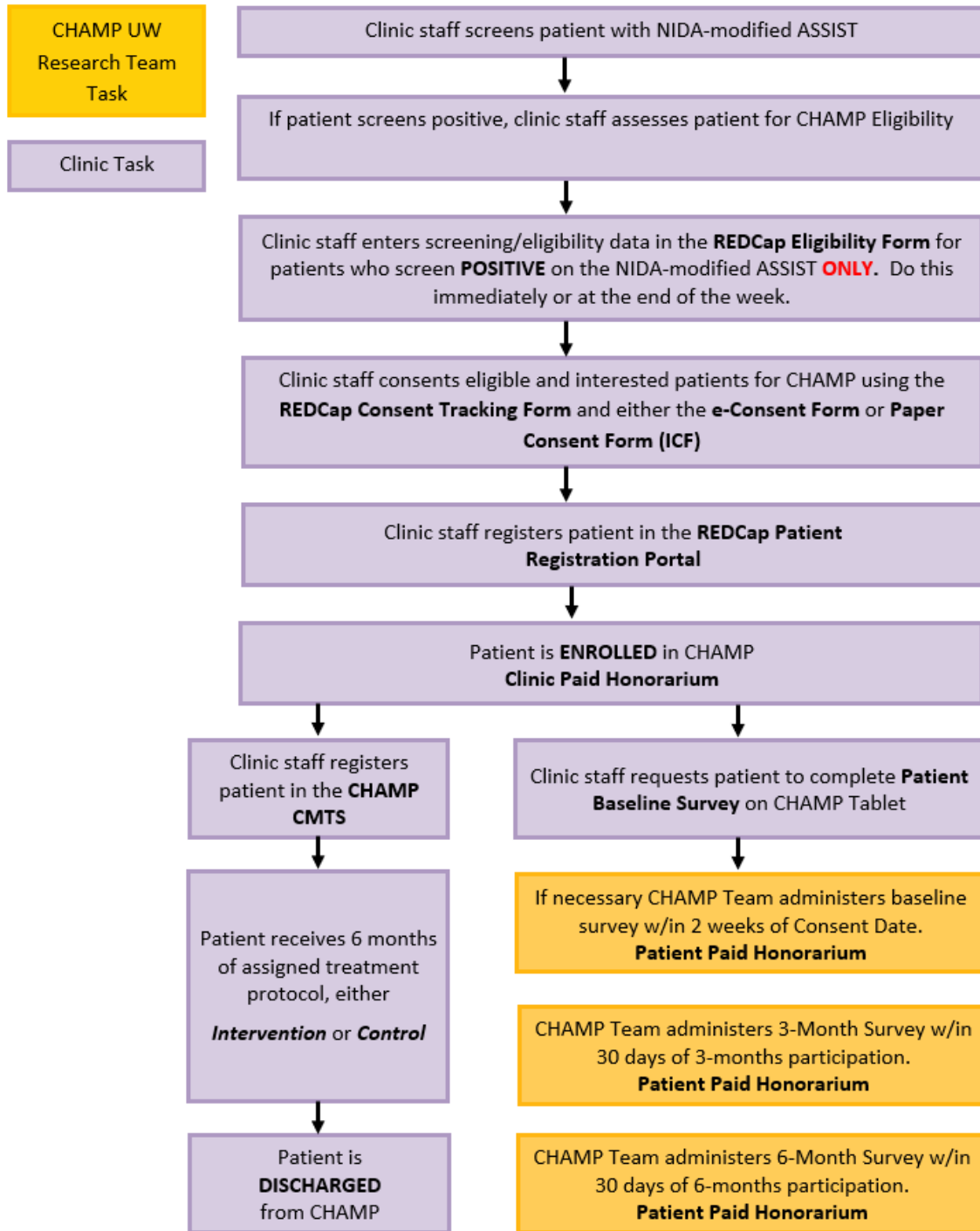




CHAMP Study Research Workflow

The basic research workflow for the CHAMP Study, which indicates what REDCap forms to use and when to use them.

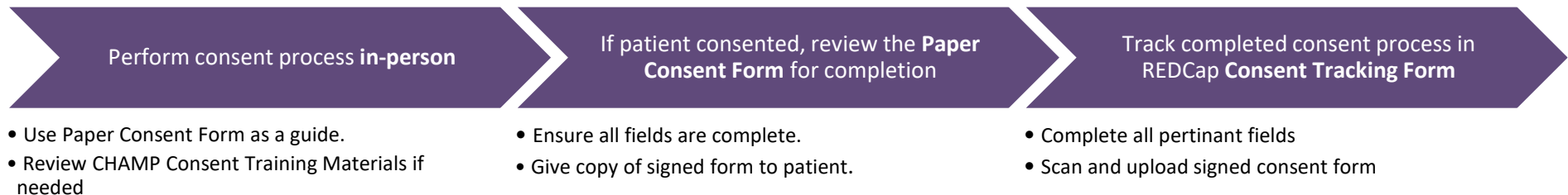




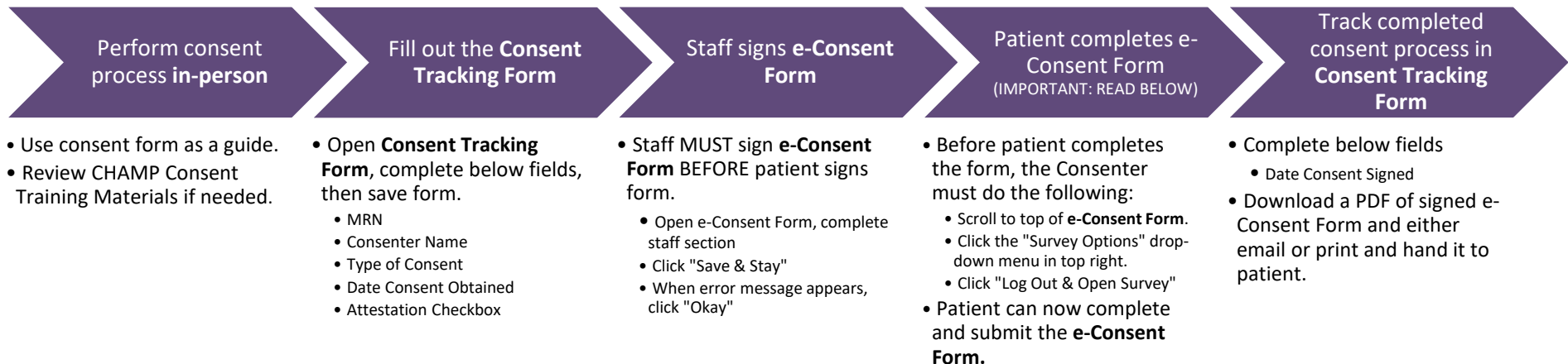
Suggested Consent Workflows by Consent Approach

Below are 4 consent process workflows to consider using depending on which approach is right for your patient. Workflows 3 & 4 have additional detail to walk you through how to use the e-Consent Form in the context of each scenario.

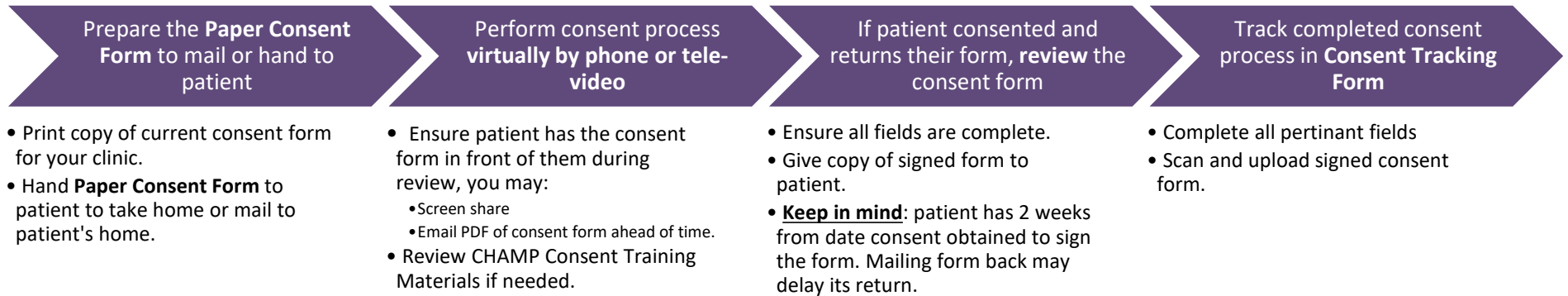
1. CONSENTING IN-PERSON WITH PAPER CONSENT FORM



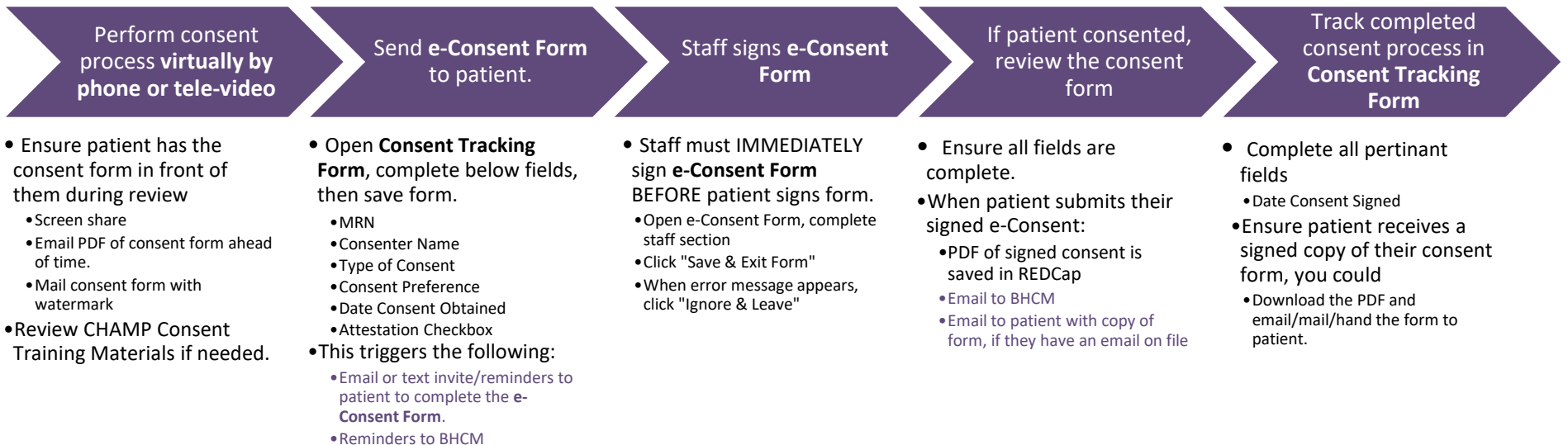
2. CONSENTING IN-PERSON WITH E-CONSENT FORM ON TABLET OR COMPUTER



3. CONSENTING VIRTUALLY WITH PAPER CONSENT FORM



4. CONSENTING VIRTUALLY WITH E-CONSENT FORM



CHAMP REDCap Quick Reference

Log in: [REDCap](#) | * =triggers email or text to Patient or Staff or Study Team.

CHAMP Eligibility & Consent Project

Eligibility Form

- Record ID (auto)
- MRN
- NMA screen date
Within past 6months
- NMA prescription score
- NMA street score
- DSM-5 screened/date
- # of DSM-5 dx met
- PHQ9 screened/score
- GAD7 screened/score
- PCPTSD screened/score
- Exclusion Criteria check
- Recruitment outcome

Consent Tracking Form

Patient has 14 days to sign the consent form.

- Record ID (auto)
- MRN
- Consenter Name
- Type of Consent (e* or paper)
- Choice/Email, Text, Both
*E-Consent invites/reminders to patient by email/text/or both.
Reminder emails to BHCM/Consenter.*
- Date consent obtained
- Reconsent sent date (>14dys)
- Consenter Attestation
- Date consent signed
- Paper consent uploaded
- Patient did not consent

E- Consent Form

- Name of staff/date
- Name of subj/date
- Patient (e)signature

HIPAA Form

- Name of health org
- Permission initials
- Patient name/date
- Patient DOB
- Patient (e)signature
- Patient submits*
*Email goes to BHCM/Consenter
If Patient's email on file, email goes to
Patient with copy of signed consent*

CHAMP Registration & Adverse Event Project

Registration Form

Completing this form triggers the baseline survey window to open. Patient has 14 days to complete.

- Study ID (auto)
- MRN
- CMTS ID (clinic staff enters)
- Date consent signed
- Patient first Name
- Patient last name
- Patient address
- Phone# (home)
- Phone #(cell)
- Email address
- language
- Back up Contact 1/phone
- Backup Contact 2/phone
- Consent to text and/or email*
Web survey invite to patient by text/email
- Survey pref: home/cell

For use by the CHAMP UW PI

- Patient withdrew from survey
- Date of withdrawal
- Reason for withdrawal

Reportable Events Form

- Study ID (auto)
- Event Date
- Category of event
Adverse Event
Serious Adverse Event*
Protocol Violation*
- Degree of study relatedness
- Nature of event
- Event description
- Update/Resolution description
- Name of reporter (staff)
- Email of Staff
- Phone of Staff
- Save Form*
Email to CHAMP research team