	I	I	I	I	
Protocol Title					
Protocol number:					
Lead Investigator:					
Lead Node:					
Protocol development Team					
Protocol coordinator:					
Protocol training director:					
c. Data Collection Phase					
	CTD1/Nodo	CTD2/Node	CTD2/Nodo	CTDN/Node	Total
	CTP1/Node	CTP2/Node	CTP3/Node	CTPN/Node	Total
Blue text = item is part of subset for OCC report to SC					
Start date (first participant randomized)					
Target stop date (last participant completes final follow-up	p				
Recruitment, treatment, and follow-up					
Number screened (past month)					
Number screened (cumulative)					
Total randomizations (targeted N per CTP)					
Total actual randomizations (past month)					
Total actual randomizations (cumulative)					
Actual mean # of subjects randomized per week (to date)					
Target mean # of subjects randomized per week					
Estimated time to endinglast pt randomized (weeks)					
Estimated time to ending (last patient randomization)					
Percent final follow ups complete (follow-ups completed/eligible)	*Lis may add	interim follow-up	rates if desire	d	
Percent of randomized participants who are female					
Percent of randomized participants who are African Americ	an 💮				
Percent of randomized participants who are Hispanic					
Percent of randomized participants who are Asian American					
Percent of randomized participants who are Native America	in I				
Percent of randomized participants who are 17 or younger					
Quality appurance					
Quality assurance SAEs-Past month					
SAEs-Cumulative					
Number of QA visits-past month					
Number of QA visits-Cumulative Number of QA reports-Past month					
Number of QA reports-Past month Number of QA reports-Cumulative					
Number of QA reports: completed/protocol specified					
Number of protocol violations-Past month (specify type below)					
Informed consent procedures					
Inclusion/exclusion criteria					
Concomitant medication/therapy					
Laboratory assessment or procedures					
Study procedures					
Serious adverse event					
Randomization procedure					
Study drug dosing					
Behavioral intervention compliance					
Visit schedule/interval					
Number of protocol violations-Cumulative (specify type below)					
Informed consent procedures					
Inclusion/exclusion criteria					
Concomitant medication/therapy					
Laboratory assessment or procedures					
Study procedures					
Serious adverse event					

Randomization pro	cedure							
Study drug dosing				\				
Behavioral interventi								
Visit schedule/interva								
Data:								
Completion rate: % of collected CRFs= Total # CRFs collected/# of CRFs expected								
Timeliness: % of collected CRFs entered within 7 days of collection= # CRFs entered within 7 day timeframe/Total # of CRFs collected								
Date accuracy: % of errors deterated=# of errors generated on CRFs/Total # of fields on CRFs								
Training								
# of staff trained/certified								
# of staff requiring tra	ining/certification							
IRB expiration date								
Any new staff-past month								
Number of fidelity checks-past month (behavioral trials)								
Number of fidelity checks-cumulative								
Regulatory								
IRB expiration date								
CTP withdrawal?								