RANDOMIZATION FORM

ID NUMBER: ☐☐☐☐☐☐ FORM CODE: R A N

DATE: 10/03/2017
Version 1.0

ADMINISTRATIVE INFORMATION

0a. Completion Date: ☐☐ / ☐☐ / ☐☐☐☐
                  Month   Day   Year

0b. Staff ID: ☐☐☐

Instructions: Complete this form to randomize a participant on the day of their study visit. If the participant is part of a partner pair, the partner's RAN form must be completed on the day of their study visit.

A. INCLUSION AND EXCLUSION CRITERIA

1. Is the participant enrolling with a spouse or cohabiting partner?

               1=Yes

               0=No **[Save form and run eligibility report]**

    1a. What is the cohabiting partner's participant ID number? _____

B. ELIGIBILITY DETERMINATION

    SAVE this form.

    CLICK the link below to determine the eligibility of the participant AND/OR cohabiting partner pair. Partner pairs will be randomized together from 1 RAN form.

C. RANDOMIZATION

    SAVE & CLOSE this form.

    Mark this form as Complete and LOCK it in the form grid.

    Open this form (RAN) in VIEW mode and then CLICK the link below to randomize the participant OR cohabiting partner pair. Partner pairs will be randomized together from 1 RAN form.