PRE-SCREENING POTENTIAL SUBJECTS TO DETERMINE ELIGIBILITY USING REDCAP

One critical but time-intensive task in clinical research recruitment is phone screening. Typically this involves providing a scripted overview to potential subjects who inquire about the study, and methodically asking a series of questions to see if the individual might meet inclusion criteria to qualify for participation.

The Center for Clinical and Translational Science (CCTS) came to ORI/IRB regarding a feature in ResearchMatch that would provide a link to a Pre-screening REDcap Survey that potential participants could access and complete rather than calling the research site. This method can be efficient for the investigator and convenient for the potential participant.

**IRB Review Considerations:**

Pre-screening of potential subjects to determine initial eligibility and interest in a study is considered part of the recruitment process and therefore requires IRB review. Since the self-disclosed information may be collected and retained in the investigator’s Redcap survey, informed consent may be needed to inform potential subjects the purpose of the survey, how the information will be used/stored, confidentiality protections, and if applicable, obtain permission to contact him/her with future study opportunities. The IRB may apply the criteria to waive documentation (signature) of informed consent as commonly done with online minimal risk surveys.

ORI has developed guidance for investigators choosing to use REDCap for pre-screening potential participants including:

- Steps related to IRB review;
- Sample Research Description Language;
- Sample REDCap Eligibility Survey Consent (and request for waiver of documentation); and
- Sample Questions to allow potential subjects to permit or opt-out of future contact.

The guidance is attached and is available to investigators on the CCTS Participant Recruitment webpage [http://www.ccts.uky.edu/ccts/participant-recruitmentmarketing](http://www.ccts.uky.edu/ccts/participant-recruitmentmarketing).