***General instructions: Highlighted wording indicates a section where study-specific text is required. This general wording is meant to assist researchers but must be tailored to the specific study. Some of the example text below may not apply and should be removed. Participants should be provided with a copy of the completed “Documentation of Verbal Consent” in the format of their preference. Please do not provide a copy of this first page/introductory script.***

***Template version date: April 8 2020***

***Please delete this instructional text from the version submitted to the REB.***

***Adapted with permission from Sunnybrook Health Sciences Centre***

**Supplementary Verbal Consent Script**

**COVID-19 Procedures**

Study Title: [Insert Study Title]

Hello, may I please speak to [state participant name or name of Substitute Decision Maker (SDM)]

***When speaking to participant:***

Hi, this is [state caller name] from the Bloorview Research Institute at Holland Bloorview Kids Rehabilitation Hospital. You’re currently a participant in a research project called [insert title]. Do you have about [specify anticipated call length e.g., 10 minutes] to speak with me about the study?

**If no:**

Is there another time when I can call you? It is important that we speak before your next study visit on [state date].

Date/time to call:

*If participant did not complete the “Documentation of Verbal Consent”, please note call attempts in the following log (this instruction to be removed from version submitted to REB)*

|  |
| --- |
| Telephone Log – Call attempts |
| Date and Time Called | Caller Name | Comments (if applicable) |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

***If yes, continue by reading the Documentation of Verbal Consent.***