CYCLE

CYCLE RCT 90-Day Follow-Up – Call Log

Patient ID ☐☐ ☐ ☐☐☐
(site#) (patient#)

Call Attempts

Call #1	Date:		Time:	
	☐ Home	☐ Cell	☐ Other	☐ Alternate Contact
	Voicemail Left ☐ Yes ☐ No			
	Interview Completed ☐ Yes ☐ No			
	Comments: Caller Initials: _____			
Call #2	Date:		Time:	
	☐ Home	☐ Cell	☐ Other	☐ Alternate Contact
	Voicemail Left ☐ Yes ☐ No			
	Interview Completed ☐ Yes ☐ No			
	Comments: Caller Initials: _____			
Call #3	Date:		Time:	
	☐ Home	☐ Cell	☐ Other	☐ Alternate Contact
	Voicemail Left ☐ Yes ☐ No			
	Interview Completed ☐ Yes ☐ No			
	Comments: Caller Initials: _____			
Call #4	Date:		Time:	
	☐ Home	☐ Cell	☐ Other	☐ Alternate Contact
	Voicemail Left ☐ Yes ☐ No			
	Interview Completed ☐ Yes ☐ No			
	Comments: Caller Initials: _____			

Call #5	Date:		Time:	
	☐ Home	☐ Cell	☐ Other	☐ Alternate Contact
	Voicemail Left ☐ Yes ☐ No			
	Interview Completed ☐ Yes ☐ No			
	Comments: Caller Initials: _____			
Call #6	Date:		Time:	
	☐ Home	☐ Cell	☐ Other	☐ Alternate Contact
	Voicemail Left ☐ Yes ☐ No			
	Interview Completed ☐ Yes ☐ No			
	Comments: Caller Initials: _____			
Call #7	Date:		Time:	
	☐ Home	☐ Cell	☐ Other	☐ Alternate Contact
	Voicemail Left ☐ Yes ☐ No			
	Interview Completed ☐ Yes ☐ No			
	Comments: Caller Initials: _____			

E-mail/Mail Attempts

Date:	Comments: Initials: _____
Date:	Comments: Initials: _____
Date:	Comments: Initials: _____

Additional pages can be attached to this log if necessary.