

Note to File – Template

Date: [include date of NTF creation]	
Protocol Title/IRB Number: [Include short title and IRB number]	
Participant Number (if applicable): [Add participant number or N/A]	
RE: [Topic of NTF i.e., ICF process change, missing signatures on DOA]	
[Body of NTF: include a detailed description of the observation or occurrence reason for the observation or occurrence, the outcome including the correct the observation or occurrence from happening again and planned actions problem.	ctive action to prevent
Include dates of corrective action (can be the same or different date as N7 comments or information not covered above.	F) and any additional
The format of this section can be in a paragraph, numbered list or bulleted	list.]
[Type name of CRC or Research Nurse; signature line]	Date
[Type name of PI; signature line]	Date