Yale University
Human Research Protection Program
410 Guidance: Recruitment of Patients or Use of Data from Patients for Research
July 19, 2021

A. Overview

The purpose of this document is to provide investigators conducting research under the purview of the Yale designated IRB1 (Yale IRB or an external IRB authorized by the Yale Human Research Protection program (HRPP) to provide review of Yale research on behalf of Yale), with an overview of the requirements regarding the recruitment of patients or use of data from patients who have received care at Yale University affiliated clinics, including research centers, or any hospital, clinic, or care center from the Yale New Haven Hospital System (YNHHS) and its affiliates. A table summarizing the requirements for various recruitment methods is included in Appendix 1.

The following recruitment methods are addressed in this guide regarding the recruitment of patients or use of data from patients for research:

1. Secondary Research
   o Secondary research using medical records conducted by investigators from HIPAA covered entities
   o Secondary research using medical records conducted by investigators from non-HIPAA covered entities
   o Secondary research using repositories of data obtained for other purposes

2. Direct contact with patients at care facilities

3. Recruitment of Participants Using Medical Records
   o Definitions - Direct vs. Indirect Treatment Relationship with a Patient
   o Identifying potential participants using medical records for researcher-clinicians with a direct treatment relationship
   o Identifying potential participants using medical records for researcher-clinicians with an indirect treatment relationship
   o Identifying potential participants using medical records for researchers and researcher-clinicians with no direct treatment relationship

4. Identifying potential participants using recruitment repositories or registries

5. Using a Third Party to Recruit Research Participants

This guide also includes the following additional sections as a reminder:

6. Targeted Recruitment of Students, Fellows, Trainees, Faculty, and Employees
7. Study-Specific Advertisements
8. Generic Advertisements
9. Number of direct contact attempts with a potential participant
10. Reporting Patient/Research Participant Complaints

The recruitment of patients receiving care at unaffiliated locations is outside of the scope of this guide as each location providing care may have its own policies regarding contacting their patients for research purposes or including data of their patients in research.

B. IRB Review and Approval of Recruitment Procedures

Like with all methods of recruitment, reviewing medical or research records to identify potential participants for a research project or using medical or research records to collect information for research must be described in the protocol and approved by the IRB. Written text or scripts that will be used for recruitment of participants identified via review of records must also be reviewed and approved by the IRB. The IRB may disapprove any method of recruitment if it is not deemed appropriate for the study population. Any modifications related to recruitment must also be reviewed by the IRB.

Even if a recruitment method is regulatorily permissible and approvable by the IRB, the institution (or a separate entity such as YNHHS) may have additional or more restrictive requirements or conditions that must be imposed regarding the recruitment of patients. For example, the institution holding the records has the right to refuse to allow investigators to use the medical or research records for recruitment purposes or dictate how records may be accessed. The institution may also impose additional restrictions regarding the patient populations, contact methods, and approved technologies.

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1 Currently, Yale IRB serves as the IRB of record for Yale and Yale New Haven Hospital investigators. Yale HRPP can also designate an external IRB to serve as the IRB of record for Yale and YNHH. In limited circumstances, Yale designated IRB serves as the IRB for other hospitals within Yale New Haven Health System. Guide on research at YNHH System locations is available in the IRES IRB Library.
that may be used for recruiting study patients. (Medical information officers regularly review and make recommendations on the clinical criteria, messaging and technology used for contacting their patients.)

Note: When a non-Yale IRB serves as the IRB of record for Yale research, the proposed recruitment plan is verified by the Yale HRPP office to ensure that it complies with institutional requirements. The verification takes place before the study is authorized by the HRPP to use an external IRB. Any modifications related to recruitment must also be reviewed by the HRPP office. The HRPP office also assists the Yale IRB in order to ensure institutional compliance.

C. Recruitment Methods

1. Secondary Data Research

Investigators who want to conduct secondary analysis of data that has been collected for another purpose (either research or clinical) and where no contact with participants is planned must obtain an IRB determination of exemption (or IRB approval) if research requires access to identifiable information by Yale agents. Investigators can request approval to include data from medical records or previously collected research data from all entities within Yale and all Yale New Haven Health System entities. Student and employment records are not considered medical or research records and cannot be released without written consent of the individual to whom the records pertain.

There are differences in what data can be provided for analysis depending on whether the research is conducted at HIPAA covered (e.g., School of Medicine) or non-HIPAA covered (e.g., School of Public Health) entities. Yale HIPAA covered components are listed on the Yale HIPAA website. Yale designated IRBs do not generally review requests for access to information from medical records for non-Yale or YNHH investigators unless Yale or YNHH is considered engaged in human subjects research conducted by the non-affiliated investigators. Otherwise, such access is generally not allowed.

1.1. Including Information from Medical Records for Research Without Contact with Participants for Investigators from HIPAA covered entities

Yale investigators from HIPAA covered Yale entities and YNH Hospital affiliated investigators can request to use identifiable and deidentified information from medical records. Investigators should submit an exemption request (category 4 iii) to the HRPP Office for IRB review. The exemption request must include the following:

- Description of PHI to be obtained from the medical records;
- Request for HIPAA waiver; and
- List of entities where the information is obtained from. An Exemption determination from only one Yale designated IRB is required unless investigators from multiple institutions are involved in conduct of the human subjects research.

Requests for information from EPIC must be submitted to the Joint Data Analytics Team (JDAT) by the investigator after the IRB determination with the applicable HIPAA waiver is obtained. Investigators are not permitted to pull information from medical records for research purposes without JDAT’s specific authorization.

Data from medical records will only include data from individuals who did not opt-out of research. Investigators who receive permission to review medical records without JDAT services must ensure that no data from individuals who specifically opted-out is included in the research data.

1.2. Including Information from Medical Records for Research Without Contact with Participants for Investigators from non-HIPAA covered entities

Yale investigators from non-HIPAA covered entities generally cannot use identifiable information obtained from medical records unless the IRB determines that the investigator has put in place appropriate privacy and security measures to protect the information (e.g., substantially equivalent to the HIPAA Security Rule safeguards and in compliance with Connecticut state law and other applicable regulatory requirements). The investigator must also complete appropriate HIPAA training. Additional institutional approvals may also be required. Yale may also approve research utilizing limited data set obtained from medical records when the following two conditions are met:

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2 Yale IRB can approve research or provide exemption determination and issue HIPAA waivers for research utilizing medical records from all of the YNHH System entities.
4 On rare occasions, Yale IRB, in its role as a Privacy Board, may be asked to grant HIPAA waivers to external researchers who request access or receive PHI from Yale/YNHH systems. Such as request is coordinated with Yale and YNHH authorities to confirm that the access may be approved and all appropriate agreements are place.
a. The information does not include any of the following HIPAA identifiers:
   - Names
   - Street addresses or postal address information with the exception of town/city, state, and zip code
   - Phone/Fax numbers
   - E-mail addresses
   - Social Security numbers
   - Medical records numbers
   - Health plan beneficiary numbers
   - Other account numbers
   - Certificate and license numbers
   - Vehicle identifiers and serial numbers, including license plates
   - Device identifiers and serial numbers
   - URLs and IP addresses
   - Biometric identifiers such as fingerprints, retinal scans, and voice prints
   - Full face photos and comparable images

b. The protocol includes the following:
   - List of limited allowable uses and disclosures of the information;
   - List of all recipients and users of the data;
   - An agreement from the investigator that the data will not be used to contact individuals or re-
     identify them;
   - Robust plan to ensure the confidentiality of data and prevent prohibited uses and disclosures; and
   - An agreement from the investigator that the discovery of improper uses and disclosures will be
     reported back to the HIPAA Privacy Office.

Investigators should submit the exemption request (category 4 ii) to the IRB office. The exemption request
must include the following:
   - Description of PHI to be obtained from the medical records;
   - Request for HIPAA waiver; and
   - List of entities where the information is obtained from. Exemption determination from only one
     Yale designated IRB is required unless investigators from multiple institutions are involved in
     conduct of the human subjects research.

Requests for information from EPIC must be submitted to JDAT after the IRB determination (with applicable
HIPAA waiver) is obtained. Investigators are not permitted to pull information from medical records for
research purposes without JDAT’s specific authorization.

Data from medical records will include data only from individuals who did not opt-out of research.
Investigators who received permission to review medical records without JDAT services must ensure that
no data from individuals who specifically opted-out is included in the research data.

1.3. Including data from Existing Registries or Repositories for Research Without Contact with
Participants

There are multiple national repositories that provide data for researchers conducting secondary data
research e.g., Framingham Heart Study (https://framinghamheartstudy.org/fhs-for-researchers/), or
GWAS. Researchers must apply directly to the data holder to receive access to the requested information.
Data Use Agreements may be necessary before the data is released to the investigators. Researchers at
both HIPAA covered and non-HIPAA covered entities can conduct research with data obtained from these
repositories.

Generally, if the data that is released to the investigator is deidentified, no IRB approval is needed.
However, if the data holder requires IRB determination of exemption or IRB approval, the researcher must
send the applicable submission to the IRB office for review.

Investigators will often create their own databases under IRB approved protocol where data is donated for
future research by patients with their consent. The investigators may make data available to others
according to the IRB approved protocol. If a researcher wishes to obtain data that is deidentified, no IRB
approval is required. If the data is identifiable, IRB determination of exemption under category 4 OR
approval with a waiver of consent is required. Researchers at both HIPAA covered and non-HIPAA covered
entities can conduct research with data obtained from investigator-held repositories.
Generally, the data from participants will be shared for the purposes that were specified in the consent signed by the patient donors. Under certain conditions, the IRB may issue a consent waiver if the purpose of the secondary research was not specifically included in the original consent form and where the secondary research is not contradicting allowable uses as listed in the original consent document.

2. Recruitment of Participants: Direct Contact with Patients at Care Facilities

Generally, only individuals known to the potential participant can approach the patient about a research study. Patients present in the waiting rooms or hospital rooms may not be approached by research staff who are not part of the patients’ direct care team unless the treatment care provider obtained specific permission from the patient for this activity.

Depending on where the initial contact takes place, specific approval from the facility or the department may be needed to ensure that clinical operations are not affected by the researcher’s presence or the research activities.

Yale New Haven Health System entities do not allow interaction with patients with the intent to enroll participants in research by investigators who otherwise do not have privileges at the specific hospital.

In all cases, researchers and study personnel initiating contact with potential participants must have sufficient knowledge of the study to answer questions. They must also be knowledgeable about where to refer a potential research participant should questions be raised about their research rights. All study personnel who contact potential participants must meet the human subjects protection, Good Clinical Practice, and HIPAA training requirements.

3. Recruitment of Participants Using Medical Records

3.1. Definitions - Direct vs. Indirect Treatment Relationship with a Patient

A provider with a direct treatment relationship is defined as a clinician who has a “reason to know” identifiable health information by virtue of the existing or newly established treatment relationship with a patient in situations where it would be reasonable to expect that the patient views the clinician as their treatment provider. In other words, a clinician who only provides care as part of an emergency or acute care visit and/or a ‘second opinion’, with no plan for ongoing management of the patient’s care, is not considered a provider with a direct treatment relationship. (In regard to the latter, it would not be reasonable to expect that the patient views that clinician as their treatment provider.)

Clinicians who do not have the direct treatment relationship but who are in the same practice or clinic may have an indirect treatment relationship.

Clinicians who provide ancillary care and who do not interact with patients or who only see them on a temporary basis are considered to have an indirect treatment relationship. Examples of what is considered an indirect treatment relationship include: clinicians who provide diagnostic services such as obtaining or interpreting laboratory tests, radiology scans, genetic testing, diagnostic imaging, etc.. Similarly, Emergency Room clinicians and staff who are not primarily responsible for providing ongoing care would be considered to have an indirect treatment relationship.

3.2. Investigators with a Direct Treatment Relationship with a Patient

A provider with a direct treatment relationship with a patient and who is also the Investigator on an IRB approved study may contact the patient regarding a potential non-therapeutic study unless the patient has opted out of being contacted about research opportunities. Exception would be a non-therapeutic study involving a disease or condition specifically relevant to the individual patient (that is, a study that would potentially be of interest to the patient).

A provider with a direct treatment relationship with a patient may contact the patient regarding potential investigational therapeutic studies even if the patient has opted out of being contacted about research opportunities.

Researchers and clinicians should carefully consider whether an individual who has not received care in the practice for many years is still considered a patient. Patients who changed providers may not wish to receive correspondence regarding research studies from their former healthcare providers.

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5 Ancillary care refers to the wide range of healthcare services provided to support the work of the direct treatment provider.

6 According to the American Medical Association (AMA), an established patient has received care by a healthcare provider in the same practice within the past 3 years. For purposes of this guidance, patient who has not been seen in the practice within the last 3 years is no longer considered a patient. New patient (not receiving care within the last 3 years but presenting to the healthcare provider for purposes of establishing a plan for ongoing management of the patient’s care) is considered a patient of the practice.
Correspondence with past patients should be justified in the protocol and will require specific approval by the IRB.

Researchers with a direct treatment relationship with a patient may follow-up with the patient if the patient does not contact the study team regarding their interest in participating in a study. Researchers may also request assistance from an approved recruitment service to contact patients. Methods of contact include:

- Phone
- Mail
- MyChart Recruitment (see section 3.4.1. for a description)

Both phone and mail contact can be initiated by the investigator or the investigator’s research staff, or as part of a service provided by centralized recruitment groups at Yale such as JDAT or the Yale Center for Clinical Investigation Recruitment and Marketing Unit (YCCI Recruitment and Marketing Unit). Investigators should work with YCCI to understand costs associated with such services. Note: Emails are generally not approved unless it is the patient’s specific request to receive all correspondence via email.

### 3.3. Investigators with an Indirect Treatment Relationship with a Patient

The primary methods for recruitment available to researchers with an indirect treatment relationship:

- MyChart recruitment (see section 3.4.1)
- Request the provider with a direct treatment relationship to contact the patient on behalf of the researcher (see section 3.4.2)

In some circumstances, researchers may discover that methods referenced above are not sufficient to recruit research participants. There are also situations where clinicians with an indirect treatment relationship believe that patients will benefit from participating in the research that may not be known to the provider with a direct treatment relationship. In such cases, clinicians with an indirect treatment relationship may obtain approval from the HRPP to contact the patients directly with appropriate permission from the providers with a direct treatment relationship allowing them the direct contact. JDAT will work with the researcher and the providers with a direct treatment relationship to ensure appropriate permissions are in place. Only individuals who have NOT opted out from research will be included on the list provided by JDAT.

Under limited circumstances, patients who have opted out of research may be contacted about the study if the treatment providers deem the study appropriate for the patient because of potential therapeutic benefit or specific interest. Under these circumstances, permission from the patient obtained by the provider may be required before contact is made.

This method of recruitment may be disapproved for sensitive research where contact by the direct treatment provider is viewed as more appropriate. Researchers and clinicians in the practice should carefully consider whether an individual who has not received care in the practice for many years is still considered a patient. Patients who changed providers may not wish to receive correspondence regarding research studies from their former healthcare providers. Methods of direct contact include:

- Phone
- Mail

Both phone and mail contact can be initiated by the investigator or the investigator’s research staff, or as part of a service provided by centralized recruitment groups at Yale (JDAT, YCCI Recruitment Unit). (Note: Emails are generally not approved unless it is the patient’s specific request to receive all correspondence via email.) The initial correspondence to the patients must explain that their care providers agreed to the contact for research purposes.

### 3.4. Investigators Without a Direct Treatment Relationship with a Patient: Use of Medical Records to Identify Potential Participants

Investigators without a direct treatment relationship generally may not contact a patient directly regarding a potential study. However, the following options are available:

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7 According to the AMA, an established patient has received care by a healthcare provider in the same practice within the past 3 years. For purposes of this guidance, patient who has not been seen in the practice within the last 3 years is no longer considered a patient. New patient (not receiving care within the last 3 years but presenting to the healthcare provider for purposes of establishing a plan for ongoing management of the patient’s care) is considered a patient of the practice.

July 19, 2021
3.4.1. **MyChart Recruitment**

The IRB may approve a recruitment method using messaging to potential participants to their MyChart accounts (or the MyChart account of the guardian in case of minors). JDAT will build an Epic query to identify all patients that meet study criteria and who have not opted out from research. Patients who have an Epic MyChart account and meet basic inclusion/exclusion criteria will be notified of the study through an IRB-approved MyChart message. Patients who are interested in hearing more about the study can either contact the researcher directly or indicate within MyChart that they wish to be contacted by the research staff. If a patient indicates that they are not interested in the study, they will not receive any additional messages about the study within Epic, and their information will not be shared with the research staff.

The text used for MyChart messaging must be approved by the IRB. It has to describe the study in general terms and indicate that no identifiable information was provided to the research team. The investigator must take special care in drafting messages for research studying conditions that are considered sensitive such as research on mental health. Instead of stating that the patient seems to be meeting eligibility criteria, the message can simply state that the study is looking for volunteers. See Appendix 2 for examples of the message templates.

3.4.2. **Request the Provider with a Direct Treatment Relationship to Contact the Patient**

JDAT can provide a list of patients potentially eligible for a study, including contact information in the form of a phone number and mailing address, to a clinician with a direct treatment relationship. Researchers from both HIPAA covered entities and non-HIPAA covered entities can request the provider with a direct treatment relationship to contact their patients to:

- obtain their permission to be contacted directly by the research team member, or
- provide the patient with the contact information to the researcher.

3.4.3. **Using Yale Recognized Centralized Recruitment Groups**

Yale offers several services to investigators to help with recruitment efforts. The YCCI Recruitment and Marketing Unit is a Yale service available to Yale investigators. Investigators should work with YCCI to understand costs associated with such services. If JDAT completes the initial mailing of the letters to the patients, investigators can utilize the recruitment group to conduct follow-up with those who have not responded. JDAT will coordinate with the group and the investigator to ensure the list is provided to the group.

4. **Recruitment of Participants Using Repositories, Registries, or Recruitment Databases**

Investigators may create and maintain a list or registry (also referred to as recruitment database or repository) of research participants who previously took part in, were screened for but deemed ineligible for other research studies, or who have expressed interest in future research participation. In each of these scenarios, the individual must provide consent for their information to be retained for recruitment for future research participation. In addition, investigators must provide such individuals the opportunity to remove their name and any information from the list or registry at any time.

The development of a recruitment list or registry requires IRB approval. The IRB must ensure the appropriateness of the data elements to be maintained on the individuals; the privacy, confidentiality, and security measures associated with the data set; and the scope of access related to the list or registry.

In general, investigators may directly contact individuals on IRB-approved recruiting lists or registries for future research consideration in accordance with the terms of the IRB approval. The ‘Help Us Discover’ project is one example. The Help Us Discover Volunteer Engagement registry (one of the Help Us Discover project aims) provides investigators with a resource of persons who have voiced a willingness to be contacted about participating in clinical trials at Yale through the registry. If an investigator wishes to recruit potential research participants from an established and IRB-approved recruitment list or registry, this must be clearly indicated in the IRB application.

The use of federally funded clinical trial registries (for example, Clinicaltrials.gov) is not considered by Yale to be a recruitment method requiring IRB approval. Therefore, copies of the information posted on Clinicaltrials.Gov need not be attached to the protocol submitted to the IRB.

5. **Using a Third Party to Recruit Potential Participants**

IRB review and approval is required when a third party is used for recruitment purposes such as to inform potential subjects about a research opportunity. IRB review and approval is also required of all materials used by the third party to inform potential research participants of the study, such as “Dear Patient” letters. Examples of a third party include community physicians or school administrators who are asked to provide their patients or students with information regarding a research study. Third parties may also include commercial entities.
hired to aid in recruiting research volunteers. Third party recruiters may provide the research contact information directly to the potential participant. The collection of additional research-related information used to determine eligibility cannot be conducted by the third party.

6. Targeted Recruitment of Students, Fellows, Trainees, Faculty, and Employees

Researchers cannot directly recruit students\(^8\), fellows, trainees, faculty, and employees\(^9\) to be research subjects as convenience sampling. Targeting students, fellows, trainees, faculty, and employees who are also patients is generally not allowed. However, indirect recruitment (e.g., through flyers, large-group emails in which all students in a department are included, etc.) and enrolling a patient who happens to be a student, fellows, trainee, faculty, or an employee is generally allowed.

Researchers wishing to recruit their own students, fellows, trainees, faculty, or staff to participate in research must submit a plan for IRB review and approval, or in an amendment for an ongoing study with the following information including:

- Description of the group or individual(s) to be enrolled;
- Rationale for inclusion of the group;
- Relationship of the group or individual(s) to the study team, including supervisory relationships;
- Importance of including the group or individual(s) in the study;
- The person who will consent the group or individual(s) and how the possibility of coercion will be minimized; and
- Process for ensuring objective analysis of study results.

In addition to IRB approval, the appropriate School or department approval may be required and must be obtained when the investigator intends to conduct recruitment among students (e.g., researchers specifically focusing on Yale School of Medicine students must obtain an approval from the departmental committee created to review and approve research targeting medical students). Similarly, investigators who wish to send a mass email to students, fellows, trainees, faculty, and employees about their research may be required to obtain specific departmental approvals from the Provost's Office, Office of Public Affairs, Internal Communications, Yale College Deans, YNHHS Section Chief or appropriate hospital administrator, and other applicable parties and departments, depending on the targeted audience.

Note: Research personnel directly involved in the conduct of a specific study cannot be enrolled into that study. In addition, special considerations or restrictions may apply in a situation where an individual is in a leadership role because of privacy, confidentiality, or other concerns. Additional requirements and considerations are outlined in the Yale HRPP Policy 350 - Participation of Yale Students, Fellows, Trainees or Employees in Research.

7. Study-Specific Advertisements

The IRB must review and approve the final copy of all study-specific advertisements including printed material, newsletters, social media, internet advertisements, telephone, email, video, and audio scripts. Any changes to the IRB approved advertisements must be submitted to the IRB as a modification for review and approval. The YCCI Recruitment and Marketing Unit is available to assist researchers with advertising material. Before placing the IRB approved recruitment materials in the locations where patients receive care, the investigator must obtain approval from the clinic or practice to do so.

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\(^8\) According to HRPP Policy 350, Investigators enrolling their own or their institution’s students or trainees in research must:
- Not directly interact for recruitment purposes with students, fellows and trainees who report directly to the investigator unless one of the special situations applies (see Special Situations below).
- Ensure that students understand that they may choose not to participate in the research and that their decision will not affect their grade/class standing. Avoid using class time to recruit or engage in the research.
- Limit the use of extra credit as compensation; it should not significantly increase a student’s overall grade.
- Provide students with an equal alternative to participation, which should be comparable in terms of effort, time commitment, and credit given.
- Outline procedures in the research protocol to ensure that students will not be subject to undue influence or coercion and to ensure that each student’s privacy will be respected.

\(^9\) According to HRPP Policy 350, Investigators enrolling their own or their institutions employees in research must:
- Not directly interact for recruitment purposes with employees that report directly to the investigator unless one of the special situations applies (see Special Situations below).
- Engage in recruitment and consent activities outside of the presence of the employee’s supervisor(s) whenever possible.
- Ensure that employees understand that they may choose not to participate in the research and that their decision will not affect their employment or performance evaluation.
- Outline procedures to ensure that employees will not be subject to undue influence or coercion and to ensure that each employee’s privacy will be respected.
- Ensure that steps are taken to avoid informing supervisors whenever possible of employees who decline participation.
- Conduct the research procedures out of sight of other employees whenever possible. For example, surveys or questionnaires could be given to employee participants to complete online or at home and mail back to the investigators instead of asking all employee participants to convene in a room on-site, which could identify them as research participants to their superiors and co-workers.
8. **Generic Advertisement or Press Releases (Announcement, Bulletin, News Release, etc.) and Newsletters**

Researchers who wish to use a non-study specific generic advertisement, press release, or newsletter may do so without IRB approval as long as the information contained in the document does not include the following:

- Name of the specific study
- Eligibility – inclusion and exclusion criteria
- Investigator or specific research study personnel names
- Sponsor of the study
- Payment information (compensation/reimbursement) for participation
- Specific contact information (name, telephone number, etc.)

General study newsletters that are not distributed as recruitment materials do not require IRB review, but researchers may consult with the IRB if there are questions about the generic materials. Researchers may also consult with the YCCI Recruitment and Marketing Unit for assistance.

9. **Number of Direct Contact Attempts with Potential Research Participants**

Researchers and staff allowed to directly contact potential research participants should plan for a maximum number of contact attempts to avoid a perception of harassment. Generally, no more than three (3) contact attempts should be made before considering the potential participant as not interested in research.

10. **Reporting Patient/Research Participant Complaints**

Complaints from patients/research participants about unwelcome recruitment calls must be submitted to the IRB-of-record as Reportable New Information (RNI).

**References**

The Joint Data Analytics Team (JDAT) website: [https://medicine.yale.edu/ycci/researchservices/systems/epic/datarequests/](https://medicine.yale.edu/ycci/researchservices/systems/epic/datarequests/)

YCCI Recruitment and Marketing Unit website: [https://medicine.yale.edu/ycci/researchservices/supportservices/recruitment/](https://medicine.yale.edu/ycci/researchservices/supportservices/recruitment/)

Yale Mass Email Approvals: [https://yale.service-now.com/it?id=service_offering&sys_id=f21f57b0db8b1300df80a5094b96195f](https://yale.service-now.com/it?id=service_offering&sys_id=f21f57b0db8b1300df80a5094b96195f)

**Revision History**

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<th>Description of Revision</th>
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<td>07/19/2021</td>
<td>1.0</td>
<td>New Document</td>
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Appendix 1

Summary of Recruitment Strategies: Direct Contact in Care Facilities, Recruitment of Participants Identified via Medical Record Review, Registries, Secondary Data Research

<table>
<thead>
<tr>
<th>Recruitment Strategy</th>
<th>Investigator from Yale HIPAA Covered Entities or YNHH with Direct Treatment Relationship</th>
<th>Investigator from Yale HIPAA Covered Entities or YNHH with an Indirect Treatment Relationship</th>
<th>Investigator from Yale HIPAA covered entity or YNHH without Direct Treatment Relationship</th>
<th>Investigator from Yale non-HIPAA covered entity</th>
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<tbody>
<tr>
<td><strong>1. Secondary Research</strong></td>
<td></td>
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<tr>
<td>Review of medical records to use identifiable data for secondary analysis research</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
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<tr>
<td>Review of medical records to use limited HIPAA identifiers for secondary analysis research</td>
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<td>Review of medical records to use de-identified data for secondary analysis research</td>
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<td>Secondary Research using Data from Repositories</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
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<tr>
<td><strong>2. Direct Contact with Patients at Care Facilities</strong></td>
<td></td>
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<tr>
<td>Approaching patient on the premises of the care facility e.g., waiting room, hospital room, Emergency Department</td>
<td>YES</td>
<td>YES but only after provider with a direct treatment relationship obtains permission from patient to be approached by the investigator without the treatment relationship</td>
<td>YES but only after provider with a direct treatment relationship obtains permission from patient to be approached by the investigator without the treatment relationship</td>
<td>NO</td>
</tr>
<tr>
<td><strong>3. Medical Record Review</strong></td>
<td></td>
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<tr>
<td>Using phone or mail to contact patients identified via medical record review with JDAT providing a list of patients and contact information to the researcher</td>
<td>YES</td>
<td>YES but only with approval from HRPP and provider with a direct treatment relationship to contact the patient</td>
<td>NO</td>
<td>NO</td>
</tr>
<tr>
<td>Using phone or mail to contact patients who provided permission to be contacted to their treatment provider/provider with direct treatment relationship</td>
<td>N/A</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
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<td>Using mail to contact patients identified via medical record review with JDAT providing a list of patients and contact information to the researcher with specific permission from the providers with direct treatment relationship</td>
<td>N/A</td>
<td>YES</td>
<td>NO</td>
<td>NO</td>
</tr>
<tr>
<td>Mailing letters to patients identified via medical record review with JDAT sending the letter and researchers NOT receiving any identifiable information</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
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</tr>
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<td>MyChart messaging</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
</tr>
<tr>
<td>Employing services of Yale recognized centralized recruitment group such as JDAT or YCCI's Study Recruitment and Marketing unit to help with recruitment or to conduct follow-up with patients who have not responded to initial mailing by JDAT</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
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<tr>
<td><strong>4. Recruitment Registries or Repositories</strong></td>
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<tr>
<td>Identifying potential participants using IRB approved recruitment registries such as the Help Us Discover Volunteer Registry where the patients have consented to contact about research</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
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<tr>
<td><strong>5. Use of Third Party</strong></td>
<td></td>
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<tr>
<td>Using sponsor or another third-party services for centralized recruitment to send letters to their mailing lists, conduct screening procedures, etc.</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
</tr>
<tr>
<td><strong>6. Targeted Recruitment of Students, Fellows, Trainees, Faculty, and Employees</strong></td>
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<tr>
<td>Targeting students, Fellows, Trainees, Faculty, and Employees especially those with a direct reporting relationship with a researcher or a member of the research team.</td>
<td>MAYBE</td>
<td>MAYBE</td>
<td>MAYBE</td>
<td>MAYBE</td>
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<tr>
<td><strong>7. Study Specific Advertisements</strong></td>
<td></td>
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<tr>
<td>Study-specific advertisements including printed material, newsletters, social media, internet advertisements, telephone, email, video, and audio scripts</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
</tr>
<tr>
<td><strong>8. Generic Advertisement or Press Releases (Announcement, Bulletin, News Release, etc.) and Study Newsletters</strong></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Non-study specific generic advertisement, press release, or newsletter</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
</tr>
</tbody>
</table>
Appendix 2
MyChart Messaging Templates

Suggested Language to describe MyChart recruitment in the Protocol:
For additional recruitment, we will utilize the Joint Data Analytics Team (JDAT) to identify potential (specify disease/condition) subjects via diagnostic codes (specify general categories) and laboratory codes (specify general categories), via Epic. Once identified, potential subjects will be sent a message via MyChart that provides information about our research study and information on how to contact study personnel if they are interested in participating. [Flyers, YCCI resources and] MyChart messages will contain (specify as appropriate for this study): contact telephone numbers (choose as appropriate- a password protected call-in hotline with voice messaging system, a password protected iPhone with voice messaging system), and a dedicated Yale email: XXX@Yale.edu. Each of these contact methods are accessible only to the following study personnel: (specify).

Adds if these resources will be used:
We will also use the YCCI resources to assist in subject recruitment. These resources include the YCCI recruitment center, the YCCI website, social media and Help Us Discover database to identify and notify patients.

Suggested Language for MyChart recruitment message:
Message 1
You are receiving this notification because you may qualify and be interested in a study looking at [X]. The Yale New Haven Health electronic health record system has searched medical conditions to find people who may be good matches for research studies. No one has looked at your record and no information has been shared with any research doctor or research team member. Just because you received this message does not mean that you are in a research study or that you have to decide to be in this or any study.

You may be interested and eligible to participate in a research study conducted by Yale University investigators to better understand [X].

To opt-out of research, including opting out of receiving future messages about research studies, please email optout@yale.edu or call 1-877-978-8348 and select option #3.

Title of study, Phase or type of study: [X]
Principal Investigator: [X]
Study Coordinator: [X]
Phone Number:

Message 2
Title of the study: [Title]
Name of the Principal Investigator: [Name of the PI]

Dear Yale Health families,
Yale is one of [x number] sites across the US and Canada to enroll children ages [x] months to [x] years in trial on [x]. You are receiving this message hoping you might be interested in allowing your child to participate. Here is a link to the Study website.

If you have interest or questions, just click on the "I'm interested" button and one of the Yale Center for Clinical Investigation's team will reach out to you. You can also email helpusdiscover@yale.edu or call 1-877-978-8343.

This communication is for informational purposes only. No action by you is required. You may ignore this message or click "No Thank You". Your privacy is protected and your information is only shared with a researcher if you are interested in the study.

Thank you.

Telephone Script for Calling Patients
The entire recruitment script must be reviewed and approved by the IRB. Below is a sample template for a format that the script may follow.

1. Introduction of Investigator or Research Staff
   Hello, (confirm that you have the correct person if you are contacting a specific patient or potential subject)
   Is this a good time for a call? My name is ____________. I am a [nurse, physician, study coordinator] at [Yale Medicine, Yale New Haven Hospital, etc.] and I am working on a research study with [name the PI].
   You received information about this study in/ from ______________ [describe how and when, i.e. in your admission packet the day you came to the hospital, from the brochure the admission nurse gave you, from your doctor during your pre-op visit yesterday, etc. ]

2. Immediate opportunity to opt-out
   I'm here to follow up on ________ [the brochure, the flyer, the conversation with your doctor, etc.] and to see if you are interested in hearing more about our study. Is it OK for me to continue?
   • If individual says "no, not interested", stop, thank the person for their time but do not continue.
   • If he/she says yes, then continue or make plans to revisit at a more convenient time.

3. Make a BRIEF statement about why they were selected. Make sure the individual understands that this research is separate from the clinical care the individual is receiving. For example:
   • Example: I'm calling you to see if you'd like to be in the research study. This study is not part of your care or treatment here at Yale New Haven. Whether or not you decide to hear more about the research won't affect your care.

4. Ask if he/she is interested in hearing more details.
   So, are you interested in hearing some details about the research study?
   • If not interested, thank the individual for taking the time to learn more about the study.
   • If interested, then move to the information from the consent form about the study.