



Clinical Trials Investigator Profile Survey

ABC member ___ Yes ___ No

Last Name _____ First Name _____ M.I. _____

Mailing Address _____

City _____ State _____ Zip _____

Phone () _____ Alternate Phone () _____

Fax () _____ Email _____

Research Coordinator _____ Phone () _____

Coordinator Email _____

Credentials

(Check all that apply)

- M. D.
- D. O.
- D. P. M.
- P. A.
- Ph. D.
- _____
(Specify)

Specialty

(Check all that apply)

- Cardiology
- Family Practice
- Internal Medicine
- _____
(Specify)

1. Practice Type: ___ Solo ___ Single Specialty ___ Multi-specialty

2. Community Type: ___ Urban ___ Suburban ___ Rural

3. How many clinical trials have you participated in to date? ___ None ___ 1-2 ___ 3-5 ___ 6-10 ___ >10

4. Do you have to use a local IRB? ___ Yes ___ No If yes, IRB turn around time (weeks): ___ 2-4 ___ 5-6 ___ >6

5. Please check the types of trials in which you have experience:

___ Hypertension ___ Diabetes ___ CHF ___ Dyslipidemia ___ CAD ___ Arrhythmia ___ Other
(Specify)

6. Please check the types of trials you would like to participate in the future:

___ Hypertension ___ Diabetes ___ CHF ___ Dyslipidemia ___ CAD ___ Arrhythmia ___ Other
(Specify)

7. Average number of patients seen per month: _____

8. Total number of patients in practice: ___ <1,000 ___ 1,000-1,999 ___ 2,000-2,999 ___ 3,000-3,999 ___ >4,000

9. What percentage of your patients have the following conditions?

___% Hypertension ___% Diabetes ___% CHF ___% Dyslipidemia ___% CAD ___% Arrhythmia

10. Patient population by age (total must equal 100%):

___% Under 18 ___% Under 25 ___% 25-34 ___% 35-49 ___% 50-65 ___% Over 65

11. Patient population by gender (total must equal 100%): ___% Male ___% Female

12. Patient population by race (total must equal 100%):

Black ___% White ___% Asian ___% Latino ___% Other ___%

_____ **Please contact me about participating in future clinical trials.**

_____ **Please contact me about clinical trials training and development.**

_____ Do not contact me about clinical trials.

Please fax to 678-302-4223
Attn: Epidemiology and Clinical Trials Center