|  |  |  |  |
| --- | --- | --- | --- |
|  | **Project Title:** {{study\_title}} ({{nct\_number}})  **Principal Investigators:** {{investigator\_names}}  **Institute/Center:** {{institute}} | | |
|  | | | |
| An organic shape**What is the goal of this study?** | |  | **Who can be in this study?** |
| {{simple\_summary}} | |  | **People who:**  {{FOR item IN who\_can\_participate}}   * {{$item}}   {{END-FOR item}} |
|  | |  |  |
| **What will happen during this study?** | |  | **How long will I be in this study?** |
| **You will:**  {{FOR item IN procedures}}   * {{$item}}   {{END-FOR item}} | |  | * {{timeline}} * {{visits\_required}} |
|  | |  |  |
| **What are some risks of this study?** | |  | **What are the benefits of this study?** |
| **You might:**  {{FOR item IN potential\_risks}}   * {{$item}}   {{END-FOR item}} | |  | **For you:**  {{FOR item IN potential\_benefits}}   * {{$item}}   {{END-FOR item}}  **For others:**  {{FOR item IN potential\_benefits\_others}}   * {{$item}}   {{END-FOR item}} |
|  | |  |  |
| **Do I have to be in this study?** | |  | **Will I be paid or have costs in this study?** |
| * **Your taking part in the study is voluntary** * **Withdrawal:** {{withdrawal}} * **Alternatives:**   {{FOR item IN alternatives}}   * {{$item}}   {{END-FOR item}} | |  | {{costs\_and\_compensation}} |
| **Please review more details on the next pages.**  If you have questions or want to join the study, contact {{contact\_name}}:  **Email:** {{contact\_email}} | **Phone:** {{contact\_phone}} | | | |