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| **ENROLMENT LOG** |

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| Study Protocol title: | | |
| Clinical Trials Registry ID/number: | Site Name: | Investigator Name: |

| **Enrolment Date**  **(dd/mm/yyyy)** | **Enrolment number** | **Participant’s Name and Surname** | **Date of Birth**  **(dd/mm/yyyy)** | **Gender** | **Contact Number** | **Address** | **Screening Number** | **Name and contact number of Next of Kin** | **Outcome (termination/completed study/withdrawal/loss to follow-up/death)** |
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