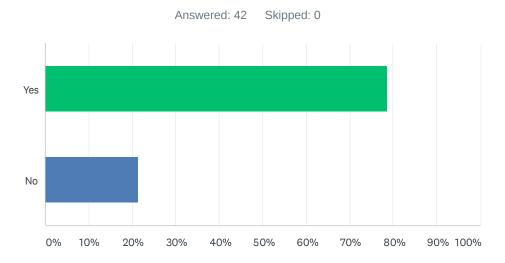
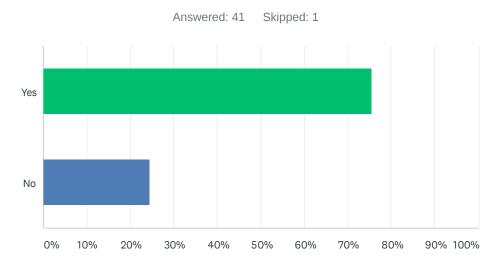
## Q1 Do you have a CDTM agreement or work with someone who does?



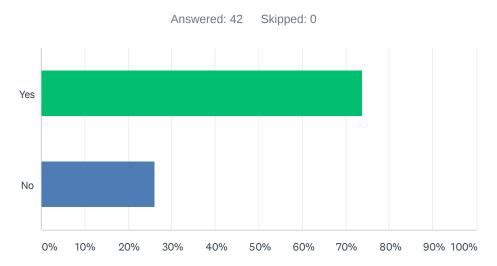
ANSWER CHOICES	RESPONSES	
Yes	78.57%	33
No	21.43%	9
TOTAL		42

## Q2 Have you experienced/become aware of any issue enrolling patients into CDTM agreements due to written consent requirement?



ANSWER CHOICES	RESPONSES	
Yes	75.61%	31
No	24.39%	10
TOTAL		41

## Q3 Have you used telehealth in the last 3 months whereas you had not done so previously?



ANSWER CHOICES	RESPONSES	
Yes	73.81%	31
No	26.19%	11
TOTAL		42