UW ADAI Sound Data Source

Study Blind Integrity

Protocol Number: XXXX-XXX-XXXX

1. Were you informed of this Participant's group assignment?  
   (e.g., Was the study blind broken for this Participant?)  
   Yes □ 1  
   No □ 2

   If NO, skip to Staff ID box.  
   If YES, answer question 2.

2. If YES, to which group was the Participant assigned?  
   Experimental □ 3  
   Control □ 4

Completed by (Staff #): ___ ___ ___ ___ ___
Reviewed by (Staff #): ___ ___ ___ ___ ___
Entered by (Staff #): ___ ___ ___ ___ ___