

SQUEEZE UK Patient Identification Coversheet for CRF

Confidential

This coversheet is intended to help site staff link local patient data to the study-specific patient identification code.

After completing follow-up, this coversheet should be saved separately from the CRF and filed in a secure place. The information on this coversheet will NOT be collected in the CRF.

This coversheet is for local use ONLY.

Patient Identifying Data	
Date paper CRF created	_ _ / _ _ / _ _ _ _ (dd/Mmm/YYYY)
Subject Date of birth	_ _ / _ _ / _ _ _ _ (dd/Mmm/YYYY)
Subject ID (OpenClinica eCRF Subject ID number)	0 4 4 - _ _ _ - _ _ _ <i>(Use the 3 digit code for the country, 3 digit code for the hospital and 3 digit individual patient number)</i>
Identification <i>Complete with available data</i>	Patient Hospital/local Identification Number (handwritten or sticker): First name: Last name:

Please cross the boxes below when data has been entered.

CRF number	Paper CRF	OpenClinica electronic CRF
CRF1: Pre/Intra/Post-Operative		
Section 1: Preoperative variables	<input type="checkbox"/>	<input type="checkbox"/>
Section 2: Surgery	<input type="checkbox"/>	<input type="checkbox"/>
Section 3: Operative	<input type="checkbox"/>	<input type="checkbox"/>
Section 4: Post-operative	<input type="checkbox"/>	<input type="checkbox"/>
Section 5: Outcomes	<input type="checkbox"/>	<input type="checkbox"/>
CRF2: Postoperative Vasopressor Infusion		
Section 1: PVI	<input type="checkbox"/>	<input type="checkbox"/>
Section 2: MAPs and vasopressors	<input type="checkbox"/>	<input type="checkbox"/>
CRF3: Atrial Fibrillation		