HALT-C Trial Q x Q

Randomization Checklist

Form # 21 Version B: 03/19/2001

Purpose of Form #21: This form is to be completed for all Lead-In patients in the HALT-C Trial between the week 20 (W20) and week 24 (W24) visits. Depending on the answers to the questions on this form, a patient will fall into one of the following four categories:

1) Patients willing and eligible for randomization will be randomized to the treatment or control arm of the trial.

2) W20 responders will be placed on the W20 responder protocol.

3) A patient eligible but unwilling or inappropriate for randomization will have no further study visits scheduled.

4) Patients who are ineligible for randomization will have no further study visits scheduled.

The Randomization Checklist is intended to expedite the randomization process. It provides a quick way of entering the data needed for determining patient eligibility for randomization in the HALT-C Trial. **Once randomization status is assigned for a patient, randomization may not be repeated or undone.**

When to complete Form #21: The Randomization Checklist (Form #21) should be completed and data entered after the W20 visit and before the W24 visit. **Data entering the Randomization Checklist triggers the HALT-C Data Management System (DMS) to either randomize a patient to the treatment group or to the control group, place the patient on the W20 Responder protocol, or schedule no further visits.**

Results from the Central Pathology Biopsy Review (Form #51), W20 Central Lab - HCV RNA result (Form #31), W20 ultrasound (Form #22), W12 and W20 CTP scores (Form #15), and W20 Local Lab results (Form #30), and W20 AFP result (Form #34) are needed to complete the Randomization Checklist (Form #21). **Form #51 (Central Review of Pathology) from the Screening visit and the W20 Form #31 (Central Lab) must be data entered in the DMS prior to entering Form #21.**

SECTION A: GENERAL INFORMATION

A1. Affix the patient ID label in the space provided.
- If the label is not available, record the ID number legibly.

A2. Enter the patient's initials exactly as recorded on the Trial ID Assignment form.

A3. The visit number, W20, is pre-printed on the form, and does not need to be data entered.

A4. Record the date this form is completed using MM/DD/YYYY format.

A5. Enter the initials of the person completing the form.

SECTION B: RANDOMIZATION CHECKLIST

B1. Circle the Ishak fibrosis score range reported from the central reading of the liver biopsy submitted for the Screening visit (S00). These results are sent in an email message from the DMS once they are data entered into the system. These results may also be reviewed in the DMS on Form #51, Central Pathology Biopsy Review.

- Note: It is expected that Ishak fibrosis scores will be in the range of 3 to 6, but patients with a score of 2 from the Central Pathology Committee's reading of the screening biopsy may still be randomized.

- **Note: Form #51 must be data entered in the DMS before entering Form #21. There is a cross check in the DMS to validate completeness and accuracy of the data.**

B2a. Enter the total CTP score (question B6 on W12 Form #15), based on week 12 visit lab and physical exam results.

- If there is no total CTP score recorded at W12, use laboratory values and physical exam findings to determine an appropriate CTP score.

B2b. Enter the total CTP score (question B6 on W20 Form #15), based on week 20 visit lab and physical exam results.

- If there is no total CTP score recorded at W20, use laboratory values and physical exam findings to determine an appropriate CTP score.

- If both CTP scores are >= 7, the patient is **not** eligible for randomization.
- If only one CTP score is >= 7, the patient **is** eligible for randomization.

B3. Circle the patient's HCV RNA status, based on the week 20 (W20) central virology lab HCV RNA results. These results should arrive in an email message from the DMS once they are data entered by the Central Virology Lab. These results may also be reviewed in the DMS on Form #31, Central Lab – HCV RNA.

- Patients must be HCV RNA positive to be eligible for randomization.

- **Form #31 must be data entered in the DMS before entering Form #21. There is a crosscheck in the DMS to validate completeness and accuracy of the data.**

B4. Enter the serum alpha-fetoprotein (AFP) level based on the week 20 AFP results (Form #34).

- AFP level must be less than or equal to 1000 ng/mL to be eligible for randomization.

B5. Circle YES or NO based on information from the week 20 ultrasound results (W20 Form # 22).

- For a patient to be eligible for randomization there must be no evidence of hepatocellular carcinoma (HCC) on ultrasound.

B6. Circle YES or NO based on the results of the week 20 local lab values (W20 Form #30).

B7. Circle YES or NO based on the answers to questions B1 through B6. In order for the patient to be eligible for randomization at this time, all of the following must be true:

- One or both of the patient's CTP scores must be less than 7, and
- Central HCV RNA result(s) must be positive, and
- The AFP result must be less than or equal to 1000 ng/ml, and
- There must be no evidence of HCC on ultrasound.

- If the patient **is** eligible for randomization, circle 1 for YES and continue to question B8.

A patient is not eligible for randomization at this time if any of the following is true:

- Both of the patient's CTP scores are 7 or higher, or
- Central HCV RNA result(s) is negative, or
- The AFP result is greater than 1000 ng/ml, or
- There is evidence of HCC on ultrasound.

- If the patient is **not** eligible for randomization at this time, circle 2 for NO. Please add a field level comment that briefly explains why the patient is not eligible. See the next page of this QxQ for instructions on how to add a field level comment.

  - If the patient is not eligible for randomization because HCV RNA was negative at week 20, then the patient will be assigned "**Responder**" status by the DMS. Visit windows will be set for week 30 to week 72 (W30–W72) study visits, and the patient will follow the Week 20 Responder protocol. The appointment windows for these visits will be generated based on the baseline (W00) visit date.

  - If the patient is ineligible for randomization for another reason, then the DMS will assign the status "**Ineligible After Lead In**", and no further HALT-C study visits will be scheduled or expected for the patient.

B8. Circle 1 for YES if the patient is willing and appropriate for randomization. Continue to Question B9.

Circle 2 for NO if the patient is unwilling to be randomized or is inappropriate for randomization. Provide a brief explanation in the space provided. The form is complete

B9. When this form is data entered, Question B9 confirms that the patient should be randomized. If YES is data entered, the DMS will automatically randomize the patient to the "**Treatment Group**" or the "**Control Group**".

- Once the patient is randomized, visit windows will be set for the study visits month 9 to month 54 (M09 – M54), and the patient will follow the Randomization Phase protocol. The visit windows for these visits will be generated based on the baseline (W00) visit date.

- The randomization status will always be visible in this patient's record in the DMS. You will receive email notifying you of the patient's status. Print out the email and file it in the patient's research notebook.

Form #21 instructions when patient is “not eligible” for randomization and there is not a possibility of stating why: