



<p>STUDY DRUG ADMINISTERED</p> <p>DATE AND TIME GIVEN</p> <p>VITAL SIGNS</p> <p>ADVERSE EFFECTS</p> <p>COMMENTS</p>	<p>Peter Whittington Scale:</p> <table border="1"> <thead> <tr> <th>Stage</th> <th>Clinical</th> <th>Asterixis/Reflexes</th> <th>Neurological signs</th> </tr> </thead> <tbody> <tr> <td>Early (I and II)</td> <td>Inconsolable crying, sleep reversal, inattention to task</td> <td>Unreliable/ normal or hyperreflexic</td> <td>Untestable</td> </tr> <tr> <td>Mid (III)</td> <td>Somnolence, stupor, combativeness</td> <td>Unreliable/hyperreflexic</td> <td>Most likely untestable</td> </tr> <tr> <td>Late (IV)</td> <td>Comatose, arouses with painful stimuli (IVa) or no response (IVb)</td> <td>Absent</td> <td>Decerebrate or decorticate</td> </tr> </tbody> </table> <p>Check "Yes" or "No" to indicate whether or not study drug was given through a dedicated IV line throughout the entire study period. If the study drug was always administered via a dedicated line, check "Yes". If any other drug was ever administered through the same IV line, check "No".</p> <p>Record the dates and times the study drug was actually given to the patient. If the dates and hours exactly match the pre-calculated excel fields, you may indicate same as above. otherwise record the dates and times study drug was administered.</p> <p>Record vital signs from measurements taken closest to but after the scheduled time.</p> <p><b>GENERAL INSTRUCTIONS:</b></p> <p>Circle "Y" (yes) or "N" (no) to indicate whether or not the adverse effect was present during the interval, from the time of the previous set of vital signs to the current set of vital signs.</p> <p><b>SPECIFIC INSTRUCTIONS:</b></p> <p><u>Arrhythmias:</u> confirmed by 12-lead EKG</p> <p><u>Infection:</u> If infection occurred, specify the site of infection.</p> <p>Record additional comments or provide more detail on the related adverse effects.</p>	Stage	Clinical	Asterixis/Reflexes	Neurological signs	Early (I and II)	Inconsolable crying, sleep reversal, inattention to task	Unreliable/ normal or hyperreflexic	Untestable	Mid (III)	Somnolence, stupor, combativeness	Unreliable/hyperreflexic	Most likely untestable	Late (IV)	Comatose, arouses with painful stimuli (IVa) or no response (IVb)	Absent	Decerebrate or decorticate
Stage	Clinical	Asterixis/Reflexes	Neurological signs														
Early (I and II)	Inconsolable crying, sleep reversal, inattention to task	Unreliable/ normal or hyperreflexic	Untestable														
Mid (III)	Somnolence, stupor, combativeness	Unreliable/hyperreflexic	Most likely untestable														
Late (IV)	Comatose, arouses with painful stimuli (IVa) or no response (IVb)	Absent	Decerebrate or decorticate														