

A1. Site/Study ID #: _____ / _____ / _____ A2. Discharge Date: _____ / _____ / _____ A3. Staff Initials: _____
Month Day Year
 To DCC

SECTION B: Hypertension

B1. Blood pressure: ZBHB01SY V2(10)/ ZBHB01DI V2(10)/ mmHg Date (mm/dd): ZBHB01MM V2(2)/ ZBHB01DD V2(2)/ ZBHB01DT

B2. Repeat blood pressure (after 24 hours): ZBHB02SY V2(10)/ ZBHB02DI V2(10)/ mmHg Date (mm/dd): ZBHB02MM V2(2)/ ZBHB02DD V2(2)/
 ZBHB02DT 1. ZBHB02ND

B3. Repeat blood pressure (after 48 hours): ZBHB03SY V2(10)/ ZBHB03DI V2(10)/ mmHg Date (mm/dd): ZBHB03MM V2(2)/ ZBHB03DD V2(2)/
 ZBHB03DT 1. ZBHB03ND

B4. Medication for hypertension 1. No → **Go to B5** ZBHB04ME V2(2) 2. Yes

a. Start Date (mm/dd): ZBHB4SMM V2(2)/ ZBHB4SDD V2(2)/ ZBHB4SDT End Date (mm/dd): ZBHB4EMM V2(2)/ ZBHB4EDD V2(2)/
 ZBHB4EDT 1. Continuing ZBHB04AC V2(2)

b. Medication(s) prescribed: ZBHB04BM V2(300) _____

If study medication is still being given:

B5. Dose reduction of study medication implemented 1. No ZBHB05ME V2(2) 2. Yes
 Date (mm/dd): ZBHB05MM V2(2)/ ZBHB05DD V2(2)/ ZBHB05DT

B6. Study medication tapered for discontinuation 1. No ZBHB06MD V2(2) 2. Yes
 Date (mm/dd): ZBHB06MM V2(2)/ ZBHB06DD V2(2)/ ZBHB06DDT

B7. Other repeated blood pressures (when clinically indicated) ZBHB07ND V2(2) 8. ND
 a. Repeat blood pressure: ZBHB7ASY V2(10)/ ZBHB7ADI V2(10)/ _ mmHg Date (mm/dd): ZBHB7AMM V2(3)/_ ZBHB7ADD V2(3)/_
 ZBHB7ADT
 b. Repeat blood pressure: ZBHB7BSY V2(10)/ ZBHB7BDI V2(10)/ _ mmHg Date (mm/dd): ZBHB7BMM V2(3)/_ ZBHB7BDD V2(3)/_
 ZBHB7BDT
 c. Repeat blood pressure: ZBHB7CSY V2(10)/ ZBHB7CDI V2(10)/ _ mmHg Date (mm/dd): ZBHB7CMM V2(3)/_ ZBHB7CDD V2(3)/_
 ZBHB7CDT
 d. Repeat blood pressure: ZBHB7DSY V2(10)/ ZBHB7DDI V2(10)/ _ mmHg Date (mm/dd): ZBHB7DMM V2(3)/_ ZBHB7DDD V2(3)/_
 ZBHB7DDT
 e. Repeat blood pressure: ZBHB7ESY V2(310)/ ZBHB7EDI V2(10)/ _ mmHg Date (mm/dd): ZBHB7EMM V2(3)/_ ZBHB7EDD V2(2)/_
 ZBHB7EDT

If last recorded blood pressure is elevated (SBP ≥ 112)

B8. Condition is known to have resolved: 1. No → **File Protocol Deviation Form 40** 2. Yes ZBHB08YN V2(2)

a. Date of resolution (mm/dd): ZBHB8AMM V2(2)/ ZBHB8ADD V2(2)/ ZBHB8ADT

b. Source: ZBHB08SO V2(300)

c. Blood pressure after resolution: ZBHB8CSY V2(2)/ ZBHB8CDI V2(2)/ mmHg 9. Unknown ZBHB8CUN V2(2)

Investigator Signature: ZBHINSIG V2(2) Date: ZBHSIGMM V2(2)/ ZBHSIGDD V2(2)/ ZBHSIGYY V2(4)/ ZBHSIGDT
Month Day Year

ZBHCMMNT V2(800) Comment