

ADVERSE EVENT FORM

Line	Date of onset (mm/dd/yy)	Event Type (code)  Specify event on back of form	Serious adverse event?  Y N	Severity		Relationship to study drug		Effect on study drug dosing		Action taken (other than study drug dose changes) 1=none 2=additional therapy 3=hospitalization 4=re-eval lab results 5=other	Outcome date (mm/dd/yy)	Outcome Status  1=resolved 2=continuing 3=controlled 4=evolved into SAE
				1=mild 2=moderate 3=severe 4=life threatening	Initial	Most severe	1=unrelated 2=unlikely 3=possible related 4=probably related 5=definitely related	Rib	Int			
1	/ /		Y N								/ /	
2	/ /		Y N								/ /	
3	/ /		Y N								/ /	
4	/ /		Y N								/ /	
5	/ /		Y N								/ /	
6	/ /		Y N								/ /	
7	/ /		Y N								/ /	
8	/ /		Y N								/ /	
9	/ /		Y N								/ /	
10	/ /		Y N								/ /	

Event type:

- |                                |                             |                      |                 |                           |                       |
|--------------------------------|-----------------------------|----------------------|-----------------|---------------------------|-----------------------|
| 1 Overdose of study medication | 9 Depression                | 17 Leukopenia        | 25 Cardiac      | 32 Allergy/immunology     | 40 Tinnitus           |
| 2 Myocardial infarction        | 10 Other neuropsychological | 18 Thrombocytopenia  | 26 Pulmonary    | 33 Epistaxis (nose bleed) | 41 Gynecological      |
| 3 Stroke                       | 11 Severe respiratory       | 19 Neutropenia       | 27 Angina       | 34 Sexual dysfunction     | 42 Neurological       |
| 4 Seizure                      | 12 Hepatic encephalopathy   | 20 Dehydration       | 28 Carcinoma    | 35 Urological             | 43 Infection          |
| 5 Sepsis                       | 13 Variceal hemorrhage      | 21 Fatigue           | 29 Pancreatitis | 36 Orthostasis            | 99 Death, specify COD |
| 6 Abscess                      | 14 Ascites                  | 22 Flu-like symptoms | 30 Dermatologic | 37 Oral                   |                       |
| 7 Immune mediated disease      | 15 Jaundice                 | 23 Muscular skeletal | 31 Ophthalmic   | 38 Sleep disorder         |                       |
| 8 Renal impairment/failure     | 16 Anemia                   | 24 Gastro-intestinal |                 | 39 Headache               |                       |

Specify event type:

Line 1. \_\_\_\_\_

Line 2. \_\_\_\_\_

Line 3. \_\_\_\_\_

Line 4. \_\_\_\_\_

Line 5. \_\_\_\_\_

Line 6. \_\_\_\_\_

Line 7. \_\_\_\_\_

Line 8. \_\_\_\_\_

Line 9. \_\_\_\_\_

Line 10. \_\_\_\_\_