

HOLD RESTART

PART I: IDENTIFYING INFORMATION

1. Patient's ID Number: ^{ID}
2. Current Clinic: ^{SITE}
3. Patient's Letter Code: ^{INITS}
4. Visit: - ^{sequence #} ^{VISIT} ^{0 0} ^{SEQNO}
5. Visit Restart Date: - - ^{Month} ^{Day} ^{Year} ^{VIS_DT}

PART II: STUDY TREATMENT

1. Is this study restart visit concurrent with a routine study visit? Yes No
(1) (2) **CONCUR**

If **NO**, answer 1A-C
 If **YES**, Skip to Part III

- A. Record bottle number dispensed. ^{TXBOTNO}
- B. Daily dose (use treatment recommendation sent after hold was lifted).
1. . mg ^{TXDDOSMG}
2. . ml ^{TXDDOSML}
- C. Volume dispensed cc ^{VOLDISP}

PART III: COORDINATION

1. Checked for completeness and accuracy:
- A. Certification number: - ^{CERT_NO}
- B. Signature: _____ ^{CERT_SIG}
- C. General Comments: ^{GEN_CMNT}
2. Individual who prescribed or withheld study treatment - ^{SCERT_NO}