Complete this form at the **second follow-up visit.** All questions relate to events that have occurred **since the first follow-up visit.**

Was the assessment completed? ☐ (FLU2:COMPLET) Yes ☐ (FLU2:COMPLET) No

    If No, indicate the reason (check one):

    ☐ (FLU2:REASON) Subject is still an in-patient at the hospital   ☐ (FLU2:REASON) Lost to follow-up

    ☐ (FLU2:REASON) Serious Adverse Event   ☐ (FLU2:REASON) Other, specify [FLU2:OTHSP]

    ☐ (FLU2:REASON) Subject or parent/guardian decision

Has the subject experienced:

1. Acute Painful Episode ☐ (FLU2:PAIN) Yes ☐ (FLU2:PAIN) No

    If Yes, record number of events below. Record only the **final** location if a single pain crises was treated at multiple locations.

Since the first follow-up visit, how many pain crises:

    1. Were treated at home? [FLU2:HOME] *(enter 0 for none)*

    2. Were treated in a clinic or doctor's office, not hospital? [FLU2:CLINIC] *(enter 0 for none)*

2. Hospitalization? ☐ (FLU2:HSPVST) Yes ☐ (FLU2:HSPVST) No

    If Yes, press the "Add Event " button to record details for <u>each</u> hospitalization.

Primary and Secondary Reason: [Delete Event]

[HOSP:REASON1 ▼]

Other, specify: [HOSP:REAS1S ▲▼]   Date admitted: [HOSP:ADMITDA] / [HOSP:ADMITMO] / [HOSP:ADMITYR]
                                            DD   MMM   YYYY

[HOSP:REASON2 ▼]

Other, specify: [HOSP:REAS2S ▲▼]   Date discharged: [HOSP:DISCDA] / [HOSP:DISCMO] / [HOSP:DISCYR]
                                            DD   MMM   YYYY

[Add Event]

3. Emergency Room Visit (if not hospitalized)? ☐ (FLU2:ERVISIT) Yes   ☐ (FLU2:ERVISIT) No

    If Yes, press the "Add Event " button to record details for <u>each</u> emergency room visit.

Primary and Secondary Reason:

[Delete Event]

EMER:EREASN1 ▼

Other, specify: EMER:ERV1S ▲▼

Date admitted: EMER:ERVADDA / EMER:ERVADMO / EMER:ERVADYR
                DD   MMM   YYYY

EMER:EREASN2 ▼

Other, specify: EMER:ERV2S ▲▼

Date discharged: EMER:ERVDSDA / EMER:ERVDSMO / EMER:ERVDSYR
                DD   MMM   YYYY

[Add Event]

Comments for page:

FLU2:COMMENT ▲▼

[Submit Query]   [Cancel]   Form Completion Help   [Print]