

Comprehensive Sickle Cell Centers

# Study Drug Hospital Log

Ongoing  
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Dexamethasone for ACS

CSCC ID: {subject.name}  
Center Code: {center.name}  
Hospital Code: {center.hospital.name}

For each scheduled dose of study drug, **from study entry to hospital discharge**, record the date, time, and dose of study drug. Please be sure information is recorded for **each dose** (even if missed), to ensure accurate and complete information. If a dose was missed, record the date and time that the dose should have been taken.

Date	Time (24-hour clock)	Dose	Route	Comments	Delete Event
<input type="text" value="HPSD:DOSEDA"/> / <input type="text" value="HPSD:DOSEMO"/> / <input type="text" value="HPSD:DOSEYR"/> DD                    MMM                    YYYY	<input type="text" value="HPSD:DOSEHR"/> : <input type="text" value="HPSD:DOSEMI"/> Hour                    Min	<input type="text" value="HPSD:DOSE"/> mg OR <input type="checkbox"/> (HPSD:MISSED) Missed dose	<input type="text" value="HPSD:ROUTE"/>	<input type="text" value="HPSD:COMM"/>	

Add Event

Comments for page:

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