## Hydroxyurea Usage

Subject Study ID#:	
Hydroxyurea Usage	
Today's date	
Is the patient currently taking hydroxyurea right now?	○ Yes ○ No
What is their current dosage?	
Has the patient ever been on hydroxyurea at any time in the past 12 months?	○ Yes ○ No
Why did they stop?	<ul> <li>Side effect</li> <li>Bone marrow supression</li> <li>Other therpay indicated</li> <li>Patient choice</li> <li>Unknown</li> <li>Other reason</li> </ul>
If 'Other reason', please specify	
Why is the patient currently not taking hydroxyurea	<ul> <li>Patient declined</li> <li>hbSC or SB+ disease</li> <li>Parent declined</li> <li>Unknown</li> <li>Other reason</li> </ul>
If 'Other reason', please specify	

