Sample Form (v14.05 - 21/01/21)

Randomisation Program

Call Freefone 0800 138 5451 to contact the RECOVERY team for URGENT problems using the Randomisation Program or for medical advice. All NON-URGENT queries should be emailed to recoverytrial@ndph.ox.ac.uk

	Log
	Section A
	Date and time
Treating clinician A1. Name of treating clinician	
Patient details A2. Patient surname	
Patient forename	
A3. NHS number	☐ Tick if not available
A4. What is the patient's date of birth?	01 v / March v / 2019 v Age: 2y
A4.3 What is this child's weight? Use estimated weight if necessary	kg
A5. What is the patient's sex?	V
Inclusion criteria	
A6. Has consent been taken in line with the protocol? If answer is No patient cannot be enrolled in the study	
A7. Does the patient have proven or suspected SARS-CoV- 2 infection? If answer is No patient cannot be enrolled in the study	~
A7.5 Does the patient have probable PIMS-TS syndrome?	Yes v
A8. Does the patient have any medical history that might, in the opinion of the attending clinician, put the patient at	~
significant risk if they were to participate in the trial?	
A9. COVID-19 symptom onset date:	v/ v/ v
A10. Date of hospitalisation:	v/ v/ v
A11. Does the patient require oxygen?	
A12. Please select one of the following to describe the current level of ventilation support	~
A12.1 Enter latest oxygen saturation measurement (%)	
A12.2 Enter latest CRP measurement since admission to hospital (mg/L) Enter 0 if below the limit of measurement	☐ Tick if not measured ☐ Tick if greater than limit of measurement
A12.3 Enter latest creatinine measurement since admission to hospital (µmol/L)	☐ Tick if not measured
A12.4 Enter latest D-dimer measurement since admission	☐ Tick if not measured
to hospital (ng/mL) Enter 0 if below the limit of measurement	Tick if greater than limit of measurement
A12.5 Has the patient received a COVID-19 vaccine? Does the patient have any CURRENT comorbidities or	v
Does the patient have any CURRENT comorbidities or a A13.1 Diabetes	other medical problems or treatments?
A13.2 Heart disease	
A13.3 Chronic lung disease	
A13.4 Tuberculosis	
A13.5 HIV	
A13.6 Severe liver disease	
A13.7 Severe kidney impairment (eGFR<30 or on	
dialysis) A13.8 Known long QT syndrome	~
A13.9 Current treatment with macrolide antibiotics	
which are to continue Macrolide antibiotics include clarithromycin, azithromycin and erythromycin	
A13.10 Antiplatelet therapy	
Includes aspirin, clopidogrel, ticagrelor, prasugrel, dipyridamole	
A13.12 Has received tocilizumab therapy during this admission	~
Are the following treatments UNSUITABLE for the parties of the par	atient? uld <mark>NOT</mark> receive this drug.
A14.1 High-dose corticosteroids (methylprednisolone)	~
A14.2 Intravenous immunoglobulin	~
A14D.1 Baricitinib NB Baricitinib is NOT suitable if patient (i) is pregnant; (ii) has	Yes v
eGFR <15 ml/min or is on dialysis/haemofiltration; (iii) has active TB; or (iv) has neutrophil count <0.5 Must be Yes if patient has probable PIMS-TS syndrome	
Are the following treatments available?	
A15.1 High-dose corticosteroids (methylprednisolone)	
A15.2 Intravenous immunoglobulin	<u> </u>
A15D.1 Baricitinib Current medication	•
A16.1 Is the patient currently prescribed remdesivir?	v
A16.2 Is the patient currently prescribed systemic corticosteroids (dexamethasone, prednisolone, hydrocortisone, methylprednisolone)? Please do not include topical or inhaled treatments	
A16.25 Has the patient received high-dose (10 mg/kg methylprednisolone or equivalent) corticosteroids on this admission?	
A16.3 Has the patient received intravenous immunoglobulin on this admission?	~
A16.4 Is the patient currently on warfarin or a direct oral anticoagulant?	
Includes apixaban, rivaroxaban A16.5 What venous thromboembolism prophylaxis is the	
patient receiving? Standard = usual for hospitalised patients (not increased due to COVID-19); Higher dose = treatment dose or increased	· ·
prophylaxis due to COVID-19 Please sign off this form once complete	
Surname:	
Forename:	
Professional email:	
	Cancel