

Randomisation Program

Call +44 800 138 5451 to contact the RECOVERY team for **URGENT** problems using the Randomisation Program or for medical advice (in English). All **NON-URGENT** queries should be emailed to **recoverytrial@ndph.ox.ac.uk** (for users in the UK, Asia and Africa) or **recovery@ecraid.eu** (for users in the EU).

Logged in as: **Centre 101 (RECOVERY demo) [GB - EN] (City 101)**

Section A: Baseline and Eligibility

Date and time of randomisation: 7 Jul 2025 09:22

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?

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/

A5. What is the patient's sex?

Inclusion criteria

A6. Has consent been taken in line with the protocol?  
If answer is No patient cannot be enrolled in the study  
NB current PIS/ICF version is V26.0 (adults) or V15.0 (children)

A6.0.1 How was consent obtained?

direct from patient (or parent)  
witnessed  
personal legal representative (i.e. relative)  
professional legal representative

A6.5 Does this patient have pneumonia?  
See protocol for typical features. If answer is No patient cannot be enrolled in the study

Yes

A7.1 Does the patient have proven influenza infection?

Yes

A7.1.1 What was influenza rapid antigen (eg, lateral flow) test result?

positive  
negative/inconclusive  
not done

A7.1.2 What was influenza PCR test result?

positive  
negative/inconclusive  
pending  
not done

A7.1.3 Does the patient have suspected or confirmed SARS-CoV-2 infection?

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. Symptom onset date:

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/

A10. Date of hospitalisation:

/

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A11. Does the patient require oxygen?

A12.0 Please select one of the following to describe the current level of ventilation support

none  
CPAP alone  
non-invasive ventilation (e.g. BiPAP)  
high-flow nasal oxygen (e.g. AIRVO)  
mechanical ventilation (intubation/tracheostomy)  
ECMO

A12.1 Enter latest oxygen saturation measurement (%)

A12.1.1 Enter latest respiratory rate (breaths/min)

A12.1.2 Enter latest systolic / diastolic blood pressure (mmHg)

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A12.1.3 Is the patient receiving vasopressors?

A12.1.4 Does the patient have new or acutely worsened confusion?

A12.1.5 Does the patient have presumed infective changes on chest imaging (e.g. consolidation or ground glass opacification on plain X-ray, CT or ultrasound)?

Yes-unilateral  
Yes - bilateral  
No-infective changes not present  
No imaging performed

A12.2.0 Enter latest CRP measurement since admission to hospital (if tested).  
Please ensure correct units (mg/dL or mg/L) are selected.  
Enter 0 if below the limit of measurement

mg/dL

☐ Tick if not measured  
☐ Tick if greater than limit of measurement

A12.2.1 Enter latest procalcitonin measurement since admission to hospital (if tested). (ng/mL or µg/L) (note units are equivalent)  
Enter 0 if below the limit of measurement

☐ Tick if not measured  
☐ Tick if greater than limit of measurement

A12.3.0 Enter latest creatinine measurement since admission to hospital

µmol/L

☐ Tick if not measured

A12.3.1 Enter latest urea (or blood urea nitrogen) measurement since admission to hospital

mmol/L

☐ Tick if not measured

A12.6 Has the patient received an influenza vaccine in the last 9 months?

Does the patient have any CURRENT comorbidities or other medical problems or treatments (present before the current illness)?

A13.1 Diabetes

A13.2 Heart disease

A13.3 Chronic lung disease

A13.4 Active tuberculosis

A13.5 HIV

A13.6 Severe liver disease

A13.7 Severe kidney impairment (eGFR<30 or on dialysis)

A13.9.0 Does their clinician consider the patient to be severely immunocompromised?

A13.19 Has the patient received a neuraminidase inhibitor (NAI, eg oseltamivir, zanamivir) during this illness, or is NAI treatment considered definitely indicated by the managing doctor?

A13.20 Has the patient received baloxavir during this illness, or is baloxavir treatment considered to be definitely indicated by the managing doctor?

A13.22 Has the patient received systemic corticosteroids (glucocorticoids) for >24h during the current illness at a dose of >=10 mg prednisolone/day (or >=1.5 mg dexamethasone/day, or >=40 mg hydrocortisone/day), or is corticosteroid treatment at this dose considered to be definitely indicated by the managing doctor?

Is randomisation to the following treatments UNSUITABLE for the patient (either because the treatment is indicated or contraindicated)?  
If you answer **Yes** it means you think this patient should **NOT** be randomised to potentially receive this treatment.

A14G.1 Baloxavir marboxil

A14H.1 Oseltamivir

A14I.1 Dexamethasone  
Or alternative corticosteroids if pregnant or a neonate.

Are the following treatments available?

A15G.1 Baloxavir marboxil

A15H.1 Oseltamivir

A15I.1 Dexamethasone  
Or alternative corticosteroids if pregnant or a neonate.

Please sign off this form once complete

Surname:

Forename:

Professional email:

Continue

Cancel

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