### instructions

THIS IS REVISION 5, TO BE USED DURING AV06 TO RECORD HYDROXYUREA USAGE FROM FEB 2002 THROUGH DEC-2003.

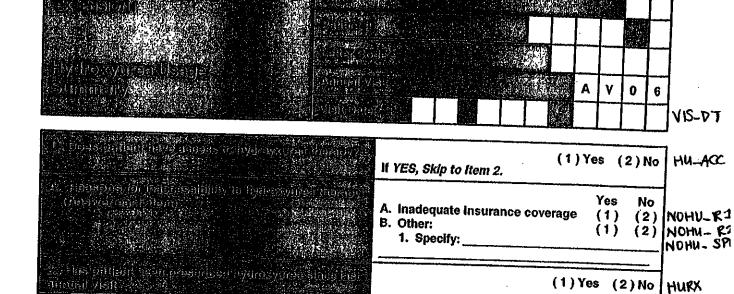
- The record of hydroxyurea usage history is an estimate of the amount of time and average dose the patient has been taking. Only in the case of absolute unreliability of the patient's recall can the information for a month be answered "Don't know." Even if a dose cannot be estimated, please try to answer at least whether any hydroxyurea was taken during each month. If none was taken, answer "None" for each month.
- 2. The entire record of hydroxyurea usage (Form 44) starts with February 1995, the first month after MSH Close-Out. Use

Rev 5 for the period Feb 2002-Dec 2003 (AV06), Rev 6 for the period Jan 2004-Dec 2004 (AV07), Rev 7 for the period Jan 2005-Dec 2005 (AV08), Rev 8 for the period Jan 2006-Dec 2006 (AV09), Rev 9 for the period Jan 2006-Jan 2007 (AV10),

WHENEVER A PATIENT COMPLETES **AV06**, PLEASE BE SURE THAT THE HYDROXYUREA USAGE RECORD IS COMPLETE FOR ALL MONTHS SINCE FEBRUARY 1995. REVIEW FORM 44 FOR AV01 (Rev 0), AV02 (Rev 1) and AV03 (Rev 2), AV04 (Rev 3) and AV5 (Rev4). PROVIDE INFORMATION FOR MONTHS THAT ARE STILL MISSING. MARK THESE ADDITIONAL MONTHS OF INFORMATION WITH AN ASTERISK ON THE SIDE TO INDICATE ADDITIONAL INFORMATION TO THE FORM (UNSOLICITED CORRECTIONS). MARK "ADDITIONAL INFORMATION" AT THE TOP OF THE CORRECTED PAGE(S), INITIAL AND DATE THEM, AND TRANSMIT TO THE MEDICAL COORDINATING CENTER. KEEP A COPY FOR YOUR RECORDS.

(1) Yes (2) No

HURX



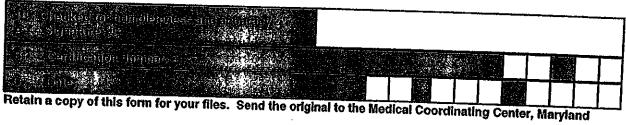
	i jó Tys-ok raszay	9. 29747001= presonkad 3. ceuty dose (noj)	i Estimated system James transport
: : : : : : : : : : : : : : : : : : :	□ 1 - None (Skip c.&d.) □ 2 - Daily HUTYPE85 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDOSE85 mg	HUCOMP85
M 3 2002	□ 1 - None (Skip c. & d.) □ 2 - Dally HUTYPE86 □ 3 - Other □ 4- Don't know (Skip c.&d.)	_H <u>VD0SE</u> 86_mg	HUMMPEL
2005 \$	□ 1 - None (Skip c. & d.) □ 2 - Dally HUTY PE 8 7 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDDSE87 mg	Нистья
	□ 1 - None (Skip c. & d.) □ 2 - Daily HUTYPE&8 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDOSE & mg	Hn10Hb&&
1002	□ 1 - None (Skip c. & d.) □ 2 - Dally HUTYPE 8 9 □ 3 - Other □ 4- Don't know (Skip c.&d.)	_HV_D05E89mg	HUCOHP89
	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other HUTYPE90 □ 4- Don't know (Skip c.&d.)	HUDOSE QD mg	HUCOMPOO



Make procession of	S/A			•
	ロ1 - None (Skip c. & d.) ロ2 - Dally HU17PE91 ロ3 - Other Gkip c.&d.)	HUDOSE91 mg	HNCOMPAI	
	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other □ 4- Don't know (Skip c.&d.)	HU DOSE 92 mg	HU <u>COHP9</u> 2	-
) 1002 <b>Side</b>	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other HUTYPE93 □ 4- Don't know (Skip c.&d.)	HUDDSE93 mg	Hucomp93	
7 (E) - 2016b	□1 - None (Skip c. & d.) □2 - Daily □3 - Other □4- Don't know (Skip c.&d.)	HUPPSE94 mg	ни <u>сом</u> Р94	-
Talunc and V	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDOSE 95 mg	HU <u>COM</u> P95	
	ロ1 - None (Skip c. & d.) ロ2 - Daily HUTYPE9ゆ ロ3 - Other ロ4- Don't know (Skip c.&d.)	HUDOSE96 mg	HU <u>(0MP</u> 96	
163 - Fre 2003	ロ1 - None (Skip c. & d.) ロ2 - Daily HUTYPE9구 ロ3 - Other ロ4- Don't know (Skip c.&d.)	HUDOSE 97 mg	HW <u>(0MP</u> 97	-
ers dun mossi.	ロ 1 - None (Skip c. & d.) ロ 2 - Daily HUTYPE98 ロ 3 - Other ロ 4- Don't know (Skip c.&d.)	HUDOSE98 mg	HU <u>COMP</u> 98	
	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDOSE99 mg	HU <u>(0M</u> P99	
	ロ1 - None (Skip c. & d.) ロ2 - Dally ロ3 - Other HUTYPE (Do ロ4- Don't know (Skip c.&d.)	_HW DOSE 100 mg	Ни <u>сонрі</u> оо	
	□ 1 - None (Skip c. & d.) □ 2 - Daily HUTYPE ID I □ 3 - Other HUTYPE ID I □ 4- Don't know (Skip c.&d.)	<u> HUDOSE 101</u> mg	Ни <u>юмР</u> юі	
	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other HUTYPEID2. □ 4 - Den't know (Skip c.&d.)	HUDOSE162 mg	HM@Wb105	
,		<del></del>		

Parties of the Partie			
312.008	□ 1 - None (Skip c. & d.) □ 2 - Dally HWTYPE103 □ 3 - Other □ 4- Don't know (Skip c.&d.)	_HNDOSE163 mg	HUCOMP103
	□ 1 - None (Skip c. & d.) □ 2 - Daily HMTYPE 104 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDGE 104 mg	ни <u>10м2</u> 1ин
	□ 1 - None (Skip c. & d.) □ 2 - Daliy HUTYPEIOS □ 3 - Other □ 4- Don't know (Skip c.&d.)	_HUDOSEIOS_ mg	HWCOMP105
ole de la companya d	ロ1 - None (Skip c. & d.) ロ2 - Daily HUTY PE 106 ロ3 - Other ロ4- Don't know (Skip c.&d.)	HUDOSE 106 mg	HU(OMPIO6
	□ 1 - None (Skip c. & d.) □ 2 - Daliy HUTYPEIO → □ 3 - Other □ 4 - Don't know (Skip c.&d.)	HUDOSEIO7 mg	HUCOMPIDA

15.	What was the main source of this information about hydroxyurea	usage?	
	huse_src	Patient recall (1 MSH Clinical Center staff (2	)
<u> </u>		Other health care provider (3	







### instructions

THIS IS REVISION 6, TO BE USED DURING AV07 TO RECORD HYDROXYUREA USAGE FROM JAN 2004 THROUGH DEC-2004.

- 1. The record of hydroxyurea usage history is an estimate of the amount of time and average dose the patient has been taking. Only in the case of absolute unreliability of the patient's recall can the information for a month be answered "Don't know." Even if a dose cannot be estimated, please try to answer at least whether any hydroxyurea was taken during each month. If none was taken,
- The entire record of hydroxyurea usage (Form 44) starts with February 1995, the first month after MSH Close-Out. Use

Rev 5 for the period Feb 2002-Dec 2003 (AV06), Rev 6 for the period Jan 2004-Dec 2004 (AV07), Rev 7 for the period Jan 2005-Dec 2005 (AV08), Rev 8 for the period Jan 2006-Dec 2006 (AV09), Rev 9 for the period Jan 2006-Jan 2007 (AV10),

WHENEVER A PATIENT COMPLETES AV07, PLEASE BE SURE THAT THE HYDROXYUREA USAGE RECORD IS COMPLETE FOR ALL MONTHS SINCE FEBRUARY 1995. REVIEW FORM 44 FOR AV01 (Rev 0), AV02 (Rev 1), AV03 (Rev 2), AV04 (Rev 3), AV5 (Rev4) and AV06 (Rev5). PROVIDE INFORMATION FOR MONTHS THAT ARE STILL MISSING. MARK THESE ADDITIONAL MONTHS OF INFORMATION WITH AN ASTERISK ON THE SIDE TO INDICATE ADDITIONAL INFORMATION TO THE FORM (UNSOLICITED CORRECTIONS). MARK "ADDITIONAL INFORMATION" AT THE TOP OF THE CORRECTED PAGE(S), INITIAL AND DATE THEM, AND TRANSMIT TO THE MEDICAL COORDINATING CENTER. KEEP A COPY FOR YOUR RECORDS.

Manager Property Control of the Cont	,	т
会。这个是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一	1	
Control of the Contro		<del> </del>
(Physhogylareactysymp)		
Summerly American	0	6
	DT	

la de est de la la la companda de la	HU_ACC (1) You start the start of the start	es (2)No
A. Mesaus for remonselbilly to long a guren tracion Christian and Maint	A. Inadequate insurance coverage     B. Other:     1. Specify:	Yes No (1) (2) (1) (2)
े सिंहर के समित्र होते के हैं। इसके सहस्य के सार्वेद हैं। इसके हैं। इसके हैं। इसके हैं। इसके हैं। सिर्वेद तिसे के सुरक्ष	(1)Ye	s (2)No

es Month?sais	Engradicing	t Avadoja prasojitac skilly dosa migj	ि ा भुद्रतिकासी अभ्यद्भी। स्त्रीतिकीको (pardent)
31 0001-2063	□ 1 - None (Skip c.&d.) □ 2 - Daliy HUTYPEI08 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HWPOSEID8 mg	HUCOHP 108
45 7 1 96 2 1624	□ 1 - None (Skip c. & d.) □ 2 - Dally HUTYPE109 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDOSE109 mg	" HUCOMPIOS
5-minacióga	□ 1 - None (Skip c. & d.) □ 2 - Daliy □ 3 - Other HUTYPE (10 □ 4 - Don't know (Skip c.&d.)	HWD05E110 mg	HUCOHPIID
£ A-15-2000	□ 1 - None (Skip c. & d.) □ 2 - Daliy HUTY PE III □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDOSEUL_ mg	Ни <u>фир</u> п)
17 (02,719)	□ 1 - None (Skip c. & d.) □ 2 - Dally HUTYPE 112 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDOSEUZ_ mg	н <u>июм</u> ріі2
B River page	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other HUTYPEII3 □ 4- Don't know (Skip c.&d.)	HUDDSE113_ mg	Hu <u>com</u> P113



			Page 20
	□ 1 - None (Skip c. & d.) □ 2 - Daily HUTYPE     4 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDOSEIIA mg	H <u>ucom</u> P(14
1 (4) (4) (4) (4) (4) (4) (4) (4) (4) (4)	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other HUTYPENS □ 4- Don't know (Skip c.&d.)	HUDOSEIIS mg	HU <u>(OMP</u> IIS
194 3 1 - 20ga/ 186	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other HUTYPEII6 □ 4 - Don't know (Skip c.&d.)	HUPOSEII6 mg	HUCOMPILE
(1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	□ 1 - None (Skip c. & d.) □ 2 - Daily HUTYPEII7 □ 3 - Other □ 4 - Don't know (Skip c.&d.)	HUPOSE 117 mg	нисонрат
	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other HUTYPEU8 □ 4- Don't know (Skip c.&d.)	HUDOSEN8 mg	HNCOMB(18
	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other HUTYPEII9 □ 4- Don't know (Skip c.&d.)	HUDDSEI19 mg	HUCOHPIIA
	□ 1 - None (Skip c. & d.) □ 2 - Dally HUTYPEIZO □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDOSE(20 mg	ни <u>сом</u> Ріго
	1 - None (Skip c. & d.) 2 - Daily 3 - Other HUTYPE \2\ 14- Don't know (Skip c.&d.)	HUDOSE121 mg	HUCOMP121
	11 - None (Skip c. & d.) 12 - Dally 13 - Other 14 - Don't know (Skip c.&d.)	HUDOSEIZZ mg	HU(OMPIZZ

15.	What was the main source of this information about hydroxyurea usage?	HUSE-SRC	<del></del>
		Patient recall	Cal
	MS	H Clinical Center staff	(2)
<u> </u>	Othe	er health care provider	(3)

	• *	
	•	į.
The state of the s		
	3.500	Control of the Contro
	(2) (2) (2) (2) (2) (2) (2) (2) (2) (2)	7
		1 1 1

Retain a copy of this form for your files. Send the original to the Medical Coordinating Center, Maryland Medical Research Institute, 600 Wyndhurst Avenue, Baltimore, Maryland 21210. By FAX transmission to 410/435-4232. Thank you.

* 10 (C-24)	7.	- 1	1 - 1 1 - 1	<u> </u>
	A	٧	0	7



MONT PAYS MYSON OF THE COLLEGE OF TH				
Light Code:			14	
Sermigrayiy Vancing	A	٧	0	8
	V	12	· V]	

ी : प्रेन्थक के प्रोमित हो एक सङ्ग्रह के अपने तफ लोटन विकास १५० व्याप्त है।	(1) Ye If YES, Skip to Item 2. HN-ACC	es (2)No
4) (Usasono (Grinagroadialla) e agaistearea tagany kanovereach agas		Yes No (1) (2) (1) (2)
. 2. trus terlien «bastrukasorikad tiveks vyuvaa altusu kist. Estimulati visit ku	(1) Yes	(2) No

Nohu\_R1 Nohu\_R2 Nohu\_SP

s (2) No HURX

_r Mg.ein/v≥ur	क्रिक्टिपुट्ट वर्गितावृत्ताकाः -	e. Avariga presinditiol Schily dosa (high)	d Estimated overall
9.3000.0005	□ 1 - None (Skip c.&d.) □ 2 - Daily HUTYPE123 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HWDOSE123 mg	Hu <u>comp123</u>
45 MAY 2505	□ 1 - None (Skip c. & d.) □ 2 - Daily HUTYPE124 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HU DOSE 124 mg	ни <u>сомр17</u> 4
escarón signica	□ 1 None (Skip c. & d.) □ 2 - Dally □ 3 - Other □ 4- Don't know (Skip c.&d.)	HM DOSE 125 mg	HU( <u>OHP12</u> 5
s un min	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other HUTYPE126 □ 4- Don't know (Skip c.&d.)	HIMDOSE 126 mg	HU (0MP126
7046-95	ロ1 - None (Skip c. & d.) ロ2 - Daily HUTYPE127 ロ3 - Other ロ4- Don't know (Skip c.&d.)	HUDOSE127 mg	HU <u>(04P 1</u> 27
	□ 1 - None (Skip c. & d.) □ 2 - Daliy HUTYPE12 8 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDOSE 128 mg	HUCOHPI28



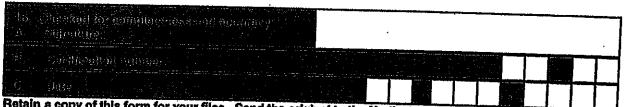
HUCDMP134

Page 2 of 2 □ 1 - None (Skip c. & d.) 🗆 2 - Dally HUTYPE129 HUDOSE129 mg HU COMPIZA 🗆 3 - Other □ 4- Don't know (Skip c.&d.) JU, 11(14) 1390年 ☐ 1 - None (Skip c, & d.) 2 - Daily HUDDSEL3O\_ mg HUTYPE130 HUCOMP130 □ 3 - Other □ 4- Don't know (Skip c.&d.) Throng Mes □ 1 - None (Skip c. & d.) □ 2 - Daily HUTYPEI31 □ 3 - Other HUDDSEL31\_ mg HUCOMPI31 □ 4- Don't know (Skip c.&d.) 据 经净担据 □ 1 - None (Skip c. & d.) 12 - Dally 13 - Other HUTYPE132 HUDOS<u>E132</u> mg HUCDMP132 4- Don't know (Skip c.&d.) 13、自己进场的 ☐ 1 - None (Skip c. & d.) □2 - Daily HUTYPE 133 HURDSE133 mg HUCOMP133 □ 4- Don't know (Skip c.&d.) 1 1 Sec. 2000 □ 1 - None (Skip c. & d.) □ 2 - Dally HUTYPE 134

4=	385		
19.	What was the main source of this information about hydroxyurea usage?	HUSE-SRC	7
		Patient recall (1)	ı
	MS	H Clinical Center staff (2)	I
	Other Control of the	er health care provider (3)	1

□ 4- Don't know (Skip c.&d.)

HUDDSEI34 mg



Retain a copy of this form for your files. Send the original to the Medical Coordinating Center, Maryland Medical Research Institute, 600 Wyndhurst Avenue, Baltimore, Maryland 21210. By FAX transmission to 410/435-4232. Thank you.



#### Instructions

THIS IS REVISION 8, TO BE USED DURING AV08 TO RECORD HYDROXYUREA USAGE FROM APR 2006 THROUGH MAR 2007.

- 1. The record of hydroxyurea usage history is an estimate of the amount of time and average dose the patient has been taking. Only in the case of absolute unreliability of the patient's recall can the information for a month be answered "Don't know." Even if a dose cannot be estimated, please try to answer at least whether any hydroxyurea was taken during each month. If none was taken, answer "None" for each month.
- The entire record of hydroxyurea usage (Form 44) starts with February 1995, the first month after MSH Close-Out. Use

Rev 5 for the period Feb 2002-Dec 2003 (AV06), Rev 6 for the period Jan 2004- Mar 2005 (AV07), Rev 7 for the period Apr 2005- Mar 2006 (AV08), Rev 8 for the period Apr 2006- Mar 2007 (AV09), Rev 9 for the period Apr 2007- Mar 2008 (AV10),

WHENEVER A PATIENT COMPLETES AV09, PLEASE BE SURE THAT THE HYDROXYUREA USAGE RECORD IS COMPLETE FOR ALL MONTHS SINCE FEBRUARY 1995. REVIEW FORM 44 FOR AV01 (Rev 0), AV02 (Rev 1), AV03 (Rev 2), AV04 (Rev 3), AV5 (Rev 4), AV06 (Rev 5), AV07 (Rev 6), AV08 (Rev 7) and AV09 (Rev 8). PROVIDE INFORMATION FOR MONTHS THAT ARE STILL MISSING. MARK THESE ADDITIONAL MONTHS OF INFORMATION WITH AN ASTERISK ON THE SIDE TO INDICATE ADDITIONAL INFORMATION TO THE FORM (UNSOLICITED CORRECTIONS). MARK "ADDITIONAL INFORMATION" AT THE TOP OF THE CORRECTED PAGE(S), INITIAL AND DATE THEM, AND TRANSMIT TO THE MEDICAL COORDINATING CENTER. KEEP A COPY FOR YOUR RECORDS.

MSH Patients' Follow Up - Extension I Form 44 KEY Rev 8 (FOR AV09) 02/16/2006 Page 1 of 2

Maille Ar Epirsk and Low op 25 gains a shino a second a shino a second a shino a second a sec			1000	
Survingary	А	V	0	9
Record Average Control of the Contro	Ŋ	15-	PT	

(1) Yes (2) No HW-ACC	If YES, Skip to Item 2.	tion pallion in verigines to hydroxylean therapy?
Yes No overage (1) (2) (1) (2)	A. Inadequate Insurance of B. Other:     1. Specify:	ddadis for Indesassiothy to their aviden tracaby Sweet each ham)
(1) Yes (2) No		s pakeni keen prescribed nyikor yasebelake bisi Yiyishi?

a Morthylkear	in ityge attifiaejby,	elajty dosemne) Lagity dosemne)	g. Estreitad overali Gorallande (pareanti
3. AP462005	□ 1 - None (Skip c.&d.) □ 2 - Dally HUTVPE135 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDDSE135_ mg	HUE <u>OMPI</u> 35
a we yatide	□ 1 - None (Skip c. & d.) □ 2 - Daily HUTYPE I3⊌ □ 3 - Other □ 4- Don't know (Skip c.&d.)	HUDOSE136 mg	ни <u>сьмь</u> 136
4: 31/11- 2004 2: 31/11- 2004 2: 31/11- 2004	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other HUTYPEIS7 □ 4- Don't know (Skip c.&d.)	HUDOSE137 mg	ни <u>сомрі</u> з7
8. 017. 2008	□ 1 - None (Skip c. & d.) □ 2 - Dally HUTYPEI38' □ 3 - Other □ 4- Don't know (Skip c.&d.)	<u>HUDOSE 138</u> mg	Hn <i>cowb1</i> 3&
1 2 3 2 10 E	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other HUTY PEI39 □ 4- Don't know (Skip c.&d.)	<u>HUDOSE139</u> mg	HUCOMP139
	□ 1 - None (Skip c. & d.) □ 2 - Daily HUTYPE140 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HNDDSE HD mg	HUCOMP140





A CAMPANIAN AND A			Page 2 of
	ロ1 - None (Skip c. & d.) ロ2 - Daily ロ3 - Other HUTYPE 14( ロ4- Don't know (Skip c.&d.)	HUDOSEIAL mg	HU( <u>OMP</u> 141
je, novjenia ve	ロ 1 - None (Skip c. & d.) ロ 2 - Daliy ロ 3 - Other HUTYPE(42 ロ 4- Don't know (Skip c.&d.)	HUDOSE 142 mg	HU <u>(0MP</u> 142
11. aug 2007	□ 1 - None (Skip c. & d.) □ 2 - Daliy HMTYPE (43 □ 3 - Other □ 4- Don't know (Skip c.&d.)	HWDoSE143 mg	Ни <u>сомР</u> 143
tz (bivk.)607	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other HUTYPE144 □ 4- Don't know (Skip c.&d.)	HUDOSEL44_ mg	ни <u>фмр</u> ј44
13. 513.2067	□ 1 - None (Skip c. & d.) □ 2 - Daily HUTYPE195 □ 3 - Other HUTYPE195 □ 4- Don't know (Skip c.&d.)	_HU <u>POSE145</u> _ mg	HW@MP145
14. MAR 2017/	□ 1 - None (Skip c. & d.) □ 2 - Daily HUTYPEHL □ 3 - Other □ 4- Don't know (Skip c.&d.)	_HUDOSE146_ mg	HUCOHPI46

15. What was the main source of this information about hydroxyurea usage? HUSE\_SKC
Patient recall (1)
MSH Clinical Center staff (2)
Other health care provider (3)

	i i
The Control of the Co	

Retain a copy of this form for your files. Send the original to the Medical Coordinating Center, Maryland Medical Research Institute, 600 Wyndhurst Avenue, Baltimore, Maryland 21210. By FAX transmission to 410/435-4232. Thank you.



Section of the second		}	Page 2 o
37/A 7	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	
10) plo)/2016/39	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	
11, 10, 15, 2003 	□ 2 - Dally	mg	
2 50M2057	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	
SIS PERFORMAN	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	
4. junii 2007	□ 1 - None (Skip c. & d.) □ 2 - Daliy □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	

(1)
( ' ' ' '
(2)
~~/
(3)
i

	To Observation and amounts and accurate the contract of the co		 -
:			
	ika. Sanitaganar agamar kalangan kalangan kalangan kalangan kalangan kalangan kalangan kalangan kalangan kalang Tamban kalangan kalan	100	7
	Contact Contac		 ┪

Retain a copy of this form for your files. Send the original to the Medical Coordinating Center, Maryland Medical Research Institute, 600 Wyndhurst Avenue, Baltimore, Maryland 21210. By FAX transmission to 410/436-4232. Thank you.



#### Instructions

THIS IS REVISION 8, TO BE USED DURING AV08 TO RECORD HYDROXYUREA USAGE FROM APR 2006 THROUGH MAR 2007.

- 1. The record of hydroxyurea usage history is an estimate of the amount of time and average dose the patient has been taking. Only in the case of absolute unreliability of the patient's recall can the information for a month be answered "Don't know." Even if a dose cannot be estimated, please try to answer at least whether any hydroxyurea was taken during each month. If none was taken,
- The entire record of hydroxyurea usage (Form 44) starts with February 1995, the first month after MSH Close-Out. Use

Rev 5 for the period Feb 2002-Dec 2003 (AV06), Rev 6 for the period Jan 2004- Mar 2005 (AV07), Rev 7 for the period Apr 2005- Mar 2006 (AV08), Rev 8 for the period Apr 2006- Mar 2007 (AV09), Rev 9 for the period Apr 2007- Mar 2008 (AV10),

WHENEVER A PATIENT COMPLETES AV09, PLEASE BE SURE THAT THE HYDROXYUREA USAGE RECORD IS COMPLETE FOR ALL MONTHS SINCE FEBRUARY 1995. REVIEW FORM 44 FOR AV01 (Rev 0), AV02 (Rev 1), AV03 (Rev 2), AV04 (Rev 3), AV5 (Rev 4), AV06 (Rev 5), AV07 (Rev 6), AV08 (Rev 7) and AV09 (Rev 8). PROVIDE INFORMATION FOR MONTHS THAT ARE STILL MISSING. MARK THESE ADDITIONAL MONTHS OF INFORMATION WITH AN ASTERISK ON THE SIDE TO INDICATE ADDITIONAL INFORMATION TO THE FORM (UNSOLICITED CORRECTIONS). MARK "ADDITIONAL INFORMATION" AT THE TOP OF THE CORRECTED PAGE(S), INITIAL AND DATE THEM, AND TRANSMIT TO THE MEDICAL COORDINATING CENTER. KEEP A COPY FOR YOUR RECORDS.

23   1   2   2   2   2   2   2   2   2   2
Visit date :

id. Dans iktinindeva gadas is hydrovinina djaz jaya	If YES, Skip to Item 2.	Yes (2)No
A. Describe for the coestantsy deligned symmetric representations. (ACOMORE SERVE)	A. Inadequate insurance coverage     B. Other:     1. Specify:	Yes No (1) (2) (1) (2)
innumprajt: Troumprajt:	(1)Y	es (2)No

i Langitorikin/Kaaje	u. Tapo di Engrapy-	s Ayaniga prasa hadi Anin hada eus	il Estimitei verilli
2 ASSEMBE	□ 1 - None (Skip c.&d.) □ 2 - Dally □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	Somalieres (assaut)
36 MAY 2008	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	
5. Auminulionis	□ 1 - None (Skip c. & d.) □ 2 - Dally □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	
2, 31.2, 2005	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	
A han a dinast A	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	
4. 7 <u>5</u> - 37 de	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	





Acceptable to		T	Page 2 of
97 (100)	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	
to story gardaling	1 - None (Skip c. & d.)   2 - Dally   3 - Other   4 - Don't know (Skip c.&d.)	mg	
	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	
12. Pest 2007	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	
ich Sitaysino.	□ 1 - None (Skip c. & d.) □ 2 - Daliy □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	
id Maradijan	□ 1 - None (Skip c. & d.) □ 2 - Daily □ 3 - Other □ 4- Don't know (Skip c.&d.)	mg	

15.	What was the main source of this information about hydroxyurea usage?	
	Patient recall  MSH Clinical Center staff  Other health care provider	(2)

	territak begai atau mendenan mendenan diak pada beraikan diak beraikan d	_
	Agricultural Section 1	-
	and the nation of the second o	
(c).		٦

Retain a copy of this form for your files. Send the original to the Medical Coordinating Center, Maryland Medical Research Institute, 600 Wyndhurst Avenue, Baltimore, Maryland 21210. By FAX transmission to 410/435-4232. Thank you.

