

Enrollment and Randomization

Name of Clinic: _____

Group C [] GROUP01
EF less than .50 [] EJCODE01 Value EJECFR01
Vessel Disease VESSEL01

Information given or taken during phone call:

Patient Name: _____

Patient Study No.: _____

Scheduled Surgical Date: DVSURG01

Name of Caller: _____

Randomization Assignment: ASSIGN01

To be filled in after phone call:

Date: DATE01

Person Taking the Call: _____

Randomization Number: _____

CODE01 - (1) Enrollment
 (2) Randomization
 (3) Lost to Follow-up
 (4) Crossover Randomization
 (5) Withdrawal from Follow-up

WITHDRW01 - Withdrawal (0) No
 (1) Yes

NORMLS01 - (0) NTNORM
 (1) NORMAL