

INSTRUCTIONS: This form must be completed for all consenting subjects at the time of entry into the Marfan Trial, at study drug initiation for subjects <18 months of age, and at the end of up-titration. If multiple labs were performed for a visit, report only the final labs.

Section A: KEY IDENTIFYING INFORMATION

- A1. Study Identification Number _____ - _____ - _____ - _____ - _____
- A2. Study visit
 BASELINE 0
 STUDY DRUG INITIATION* 5 (A3)
 END OF UPTITRATION 6 (A3)
- *All subjects <18 months of age at time of study drug initiation will be required to have a safety lab check prior to starting uptitration cycle 2
- a. What number screening is this? _____
- A3. Date of form completion
 _____ / _____ / _____
 M M D D Y Y Y Y
- A4. Name of person completing form

 PRINT FULL NAME INITIALS
- A5. Date of sample
 _____ / _____ / _____
 M M D D Y Y Y Y
- A6. Location where the labs were drawn
 PHN SITE 1
 OTHER CLINIC/MD 2

Section B: HEMATOLOGY

	a.	b.
	U.S. Units	International Units
B1. Platelet count	_____ x 10 ³ cells/mm ³ _____ x 10 ³ cells/uL _____ x 10 ⁹ cells/L K/uL	_____ x 10 ⁹ cells/L
B2. Hemoglobin	_____ g/dL	_____ g/L
B3. Hematocrit	_____ %	_____
B4. White blood cell count (WBC)	_____ x 10 ³ cells/mm ³ _____ x 10 ³ cells/uL _____ x 10 ⁹ cells/L K/uL	_____ x 10 ⁹ cells/L

Section C: BLOOD CHEMISTRY

	a.	b.
	U.S. Units	International Units
C1. Potassium (K ⁺)	____ . ____ meq/L mmol/L	____ . ____ mmol/L
C2. Creatinine (Cr)	____ . ____ mg/dL	____ ____ ____ umol/L
C3. ALT	____ ____ ____ u/L	____ ____ ____ umol/L
C4. AST	____ ____ ____ u/L	____ ____ ____ umol/L

If the study visit reported in question A2. > 0, skip section D and go to question Z1.

Section D: TRIAL ELIGIBILITY

		YES	NO	UNKNOWN
D1.	Based on the baseline safety lab results, does the subject have renal dysfunction (Creatinine > upper limit of age-related normal values)?	1	2	-8
D2.	Were any of the baseline safety lab results abnormal?	1	2	-8
D3.	Is the subject currently pregnant per results of serum HCG test?	1	2	-8

If YES or UNKNOWN to any D1 or D3, subject is NOT eligible for the Trial. **End Baseline Screening.**

D4. Is the subject eligible to proceed with screening? YES.....1
NO.....2

Section Z: TIME TO COMPLETE FORM

Z1. How long did it take to complete this form? ____ ____ ____ minutes

END OF FORM