

a. If subject is unwilling to continue, specify primary reason:

- BECAUSE OF TIME COMMITMENT..... 1 (C1)
- BECAUSE OF DISTANCE FROM CENTER..... 2 (C1)
- BECAUSE INSURANCE WILL NOT COVER
ECHOCARDIOGRAMS AT A STUDY CENTER 3 (C1)
- NO REASON GIVEN..... 4 (C1)
- OTHER..... 99

i. Specify other reason _____

If subject did NOT re-consent (question B2=2 'NO'), then subject must be withdrawn from the study drug and Trial. Please complete and data enter into ADEPT Forms A212 (Permanent Discontinuation of Study Drug) and A216 (Permanent Withdrawal From Trial).

Section C: MUSCULOSKELETAL ANCILLARY STUDY RE-CONSENT

C1. Is the subject participating in the Musculoskeletal Ancillary Study?

- YES..... 1 (C2)
- NO..... 2 (Z1)

C2. Did the subject provide informed consent for himself/herself on the original ancillary study consent form?

- YES..... 1 (Z1)
- NO..... 2

C3. Did the subject re-consent to be in the ancillary study?

- YES..... 1
- NO..... 2 (C4)
- SUBJECT IS NOT CAPABLE
TO RE-CONSENT 3 (Z1)

a. Date consent signed

____ / ____ / ____ (Z1)
M M / D D / Y Y Y Y

C4. Reason for NOT re-consenting to be in the ancillary study: (Circle the **primary** reason)

SUBJECT UNWILLING TO CONTINUE IN ANCILLARY STUDY..... 1 **(C4a)**

SUBJECT DID NOT RE-CONSENT TO MARFAN TRIAL 2 **(Z1)**

PRIMARY CARETAKER/PRIMARY CARDIOLOGIST/GENETICIST
DID NOT WANT SUBJECT TO CONTINUE IN ANCILLARY STUDY .. 3 **(Z1)**

LANGUAGE BARRIER 4 **(Z1)**

OTHER 99

i. Specify other reason _____ **(Z1)**

a. If subject is unwilling to continue in the ancillary study, specify the primary reason:

BECAUSE OF TIME COMMITMENT 1 **(Z1)**

BECAUSE OF DISTANCE FROM CENTER 2 **(Z1)**

BECAUSE OF PHYSICAL DEMANDS OF ANCILLARY STUDY 3 **(Z1)**

NO REASON GIVEN 4 **(Z1)**

OTHER 99

i. Specify other reason _____

If subject did NOT re-consent to the ancillary study (question C3=2 'NO'), then subject must be withdrawn from the ancillary study. If the subject did NOT re-consent to the main Marfan Trial (question B2=2 'NO'), the subject must be withdrawn from the ancillary study. Please complete and data enter into ADEPT Form A416 (Withdrawal from Ancillary Study).

Section Z: TIME TO COMPLETE FORM

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

END OF FORM