

ISRCTN71327395  
HTA 09/22/136



Participant End of Study

**Participant End of Study Form**

Randomisation number		Participant initials	

Enter screening number if participant withdraws after consent but before randomisation:

Screening number			
	Site Code	ID number	

Withdrawal or completion date	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (dd/mm/yy)
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**Tick one box only**

		Reason for withdrawal
Participant decides to withdraw completely from study	<input type="checkbox"/>	
Participant decides to withdraw partially from study (withdrawal from the allocated investigation protocol but will continue to provide follow-up data)	<input type="checkbox"/>	
Participant is withdrawn from the study by investigator	<input type="checkbox"/>	
Participant has completed study follow up as planned	<input type="checkbox"/>	

Completed by:

Name:	Signature:	Participant End of Study
		Version 1.0, 28-04-11
Date	<input type="text"/> <input type="text"/> <input type="text"/>	
	Day                      Month                      Year	