Date of birth

atien	t	
	Identification	number

Sex at birth

TREATMENT REVIEW

(dd/mm/yy)

Age

Interview Date	/	

male \square

female

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TREATMENT PROVIDER

Patient

initials

Health Unit										
Clinician				Patie	ent I	File nun	nher			
Interview site Hospital Out-patient center Phone interview Home visit Other Other										
MEDICAL DETAILS										
Weight (kg)				He	ight	(cm)				
Indication for anti-TB therapy	Pulm	nonary T	B □ Extra				ИDR-	TB □ XDR-	ТВ П	
EVENTS Record all NEW EV	ENIS	S or CHA		4			ion sii	nce last inter	view	
Events	I	Date onse	t Dat		Out	come*	Sev	erity [†] Se	riousness [‡]	Rechallenge§
			16801	veu						
Measures taken for treatment	of	Date				Desc	riptio	on		Result
adverse event						2 650				
LABORATORY TESTS										
Test	Da	ate	Result (u	ınits)			est		Date R	esult (units)
Sputum smear						T (SGPT				
Sputum culture						T (SGO	Γ)			
CD4 count					LD					
ESR Haemoglobin					GG AL					
WBC				Bilirubin total						
Eosinophils						c acid	tai			
Platelets						icose				
α - amylase						tassium				
Creatinine						lcium				
CFR						gnesium	1			
Urea					TS	H				
Albumin (serum)										
Other tests										
Audiogram										
Ophthalmologist examination Neurologist examination										
EEG (with value of QT interval)										
ELG (with value of Q1 interval)										
X-ray examination			Tick	off		If	ves. s	pecify localiza	ation, character	. dvnamic
- Infiltrative changes		no		yes			J, 2	. ,	,	, , ,
- Cavities of destruction		no		yes						
- Pleural involvement		no	00	yes						
- Conclusion			Without	Residu		Posit		Without	Aggravation	Other
		pe	eculiarities	sympto	oms	dyna	mic	changes	<u> </u>	<u> </u>

MEDICINES

	Anti-TB medicen since last in		v	Dosage	Freque	ncy 1	Route	Star	t date	Stop d	late	Co	ntinue	Rea sto	son for pping [#]	Adhe	rence ^{**}
Other med	r medicines, tı dicines, food a	aditior dditive:	nal s	Dosage	Freque	ncy	Route		tart late	Stop da	ate	Con	tinues	Rea sto	son for pping [#]	Indica	ation
D .	I D 1: 1:	_ ~		. 1 -			eptibil			G I		1	D (D. C			
Date sample	Result date	S	Н	R	Е	Z	Kı	n	Am	Cm	Fo	1	Pro/ Eto	PAS	Cs		
collected																	

TREATMENT OUTCOME

Result	Date
Cured	
Died	
Treatment failed	
Lost to follow-up	

Please give this form to t	the CEM Focal Person
Focal Person	Phone

CODE PANEL

OUTCOME* OF ADR (AE)

R1 Recovered/resolved

R2 Recovering/ resolving

S Recovered with sequelae

N Not recovered/ not resolved

D Died

U Unknown

SEVERITY[†]

- 1 Mild
- **2** Moderate
- 3 Severe
- 4 Life threatening

SERIOUSENESS[‡]

N Not serous

H Hospitalization (caused or prolonged)

P Permanent disability

C Congenital abnormality

L Life threatening

D Death

RECHALLENGE§

- 1 No rechallenge
- 2 Recurrence of event
- 3 No recurrence
- 4 Result unknown

REASON FOR STOPPING#

- 1 Adverse event
- 2 Poor adherence
- 3 Course completed
- 4 Planned interruption
- 5 Planned medication change
- 6 Prophylaxis completed
- 7 No longer needed
- 8 Treatment failure
- 9 Pregnancy
- 10 Drug out of stock
- 11 Cost
- 12 Patient decision
- 13 Died
- 14 Lost to follow-up
- **15** Other (please specify)

ADHERENCE**

A > 80% doses taken

 $N \le 80\%$ doses taken – please specify reason for poor adherence^{δ}

REASON FOR POOR ADHERENCE^δ

N1 Adverse drug reaction related to antituberculosis therapy

N2 Alcohol abusing

N3 Drug abusing

N4 Comorbidity affected compliance (e.g. depression)

N5 Emergence of new disease (e.g. more serious from patient's point of view)

N6 Fear of adverse drug reactions and doubts in importance of antituberculosis treatment

N7 Problem of accessibility to antituberculosis drugs

N8 Daily life difficulties (e.g. working schedule, staying out of home, vocation)

N9 "Tablets fatigue" (too many tablets)

N10 Personality characteristics (e.g. forgetfulness)

N11 Unstable or low social status (e.g. unemployment, homeless, undernourishment)

N12 Social environment negative influence

N13 Other reason (please specify)