|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Subject ID #** | **Enrollment/Consent**  **Date** | **Screening Date** | **Eligible** | **Ineligible Reason**  ***(if applicable)*** | **Randomized**  ***(if applicable)*** | **Study Arm / Group (if applicable)** | **Status (on study, on treatment, off study)** | **Off Study Reason**  **(completed, withdrawn)** | **Comments** |
| 1 |  |  |  | Y /  N |  | Y /  N |  |  |  |  |
| 2 |  |  |  | Y /  N |  | Y /  N |  |  |  |  |
| 3 |  |  |  | Y /  N |  | Y /  N |  |  |  |  |
| 4 |  |  |  | Y /  N |  | Y /  N |  |  |  |  |
| 5 |  |  |  | Y /  N |  | Y /  N |  |  |  |  |
| 6 |  |  |  | Y /  N |  | Y /  N |  |  |  |  |
| 7 |  |  |  | Y /  N |  | Y /  N |  |  |  |  |
| 8 |  |  |  | Y /  N |  | Y /  N |  |  |  |  |
| 9 |  |  |  | Y /  N |  | Y /  N |  |  |  |  |
| 10 |  |  |  | Y /  N |  | Y /  N |  |  |  |  |
| 11 |  |  |  | Y /  N |  | Y /  N |  |  |  |  |
| 12 |  |  |  | Y /  N |  | Y /  N |  |  |  |  |