Patient number Date of v	visit	BPH FORM E01.1 October, 1993 Page 1 of 4 FORM NUMBER = (FORM) FORM VERSION = (VERS)
NIH - BPH CLINICAL TRIAL	: PILOT STUDY	
AUA SYMPTOM SCORE EVI	ENT REPORT	
This form should be completed if the patient experience	es either event in Section C.	
Part I / IDENTIFICATION		
A. Patient Identification		
1. Patient number (PATID)	clinic patient	
2. Patient's initials (INITS)	first last	
3. Patient's date of birth (DOB)	month day year	
B. <u>Initial Visit Information</u>		
1. Date of initial clinical event visit (AVSTDT)	month day year	
2. Week of initial clinical event visit (AIVWK)		
3. Type of visit (AIVTYP)	<sup>1</sup> Follow-up Visit	

## C. AUA Symptom Score Event Identification

1. Type of event (ASCEI)	1	AUA symptom score 4 point event (Complete Part II)
	2	AUA symptom score 8 point event (Complete Part III)

Initials of person completing form (FC	RMIN)	first	last	
Date form completed (FORMDT)	month	day	year	
Signature				,

<sup>2</sup> Interim Visit

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Part II / AUA SYMPTOM SCORE 4 POINT EVENT			
A. Initial 4 Point Event Visit			
Complete this section if the AUA symptom score is 4 or more baseline AUA symptom score (see label).	points greater	than the	
1. AUA symptom score (AI4SS)			
2. Is the value in A.1 greater than or equal to 4 points more than the baseline symptom score (see label)? (A14)	YES IGRT)	NO 2	
If YES, CONTINUE.			
If the patient was taking sinus medication, a new diuretic or had director should take corrective measures before continuing. A have been taken, and not less than 2 weeks or greater than 4 symptom score 4 point event visit, the patient should be sched	after corrective weeks from the	measures initial AUA	
3. Are corrective measures necessary? (AI4CM)  If YES:	YES 1	NO 2	
a. What is the reason for corrective measures? (Check only one) (AI4CMR)  2  3	Sinus medicate New diuretic Infection Other (Specif		
If there is no need for corrective measures, schedule the patie not less than 2 weeks or greater than 4 weeks from the initial 4 point event visit.		~	
The Interim Visit Checklist should also be completed during the	nis confirming v	visit.	
B. Confirming 4 Point Event Visit			
1. Date of visit (AC4DT)	nonth day	year	
2. Week of visit (AC4WK)			

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3. AUA symptom score (AC4SS)	
4. Is the value in B.3 greater than or equal to 4 points more than the baseline symptom score (see label)? (AC4GRT)  YES  NO  2	
If the symptom score in question B.3 is greater than or equal to 4 points more than the baseline AUA symptom score, this documents an AUA symptom score 4 point event. If the patient is on coded medication, DO NOT STOP CODED MEDICATION.	
5. AUA symptom score 4 point event declared? (AC4DEC)  YES  NO  2	_
Part III / AUA SYMPTOM SCORE 8 POINT EVENT  A. Initial 8 Point Event Visit	
Complete this section if the AUA symptom score is 8 or more points greater than the baseline AUA symptom score (see label).	
1. AUA symptom score (AI8SS)	
2. Is the value in A.1 greater than or equal to 8 points more than the baseline symptom score (see label)? (Al8GRT)  YES  NO  2	
If YES, CONTINUE.	
If the patient was taking sinus medication, a new diuretic or has an infection, the clinic director should take corrective measures before continuing. After corrective measures have been taken, and not less than 2 weeks or greater than 4 weeks from the initial AUA symptom score 8 point event visit, the patient should be scheduled for a confirming	3
3. Are corrective measures necessary? (AI8CM)  YES NO  2	
If YES:  a. What is the reason for corrective measures? (Check only one) (AI8CMR)  1 Sinus medication 2 New diuretic 3 Infection 4 Other (Specify below)	

Patient number		Date of visit	month	day	year	
	or corrective measures ks or greater than 4 we					sit in
The Interim Visit Ch	necklist should also be	completed during	g this con	firming	visit.	
B. Confirming 8 Po	oint Event Visit					
1. Date of visit	(AC8DT)		month	day	year	
2. Week of visit	(AC8WK)					
3. AUA sympton	n score (AC8SS)					
	.3 greater than or equal e baseline symptom sc	•	AC8GRT)	YES 1	NO 2	
baseline AUA symp	re in question B.3 is gr tom score, this docum ded medication, STOF	ents an AUA sym <sub>l</sub>	otom sco	re 8 poii		
5. AUA sympton	n score 8 point event d	eclared? (AC8DE	C)	YES	NO 2	
If YES, CONTI	NUE.			VEC	NO	
6. Is the patient	on coded medications	? <b>(AC8MED)</b>		YES 1	2	
If YES, STOP	ALL CODED MEDICATI	ONS AND CONTII	NUE.			
7. Date coded m	nedication discontinued	d (AC8DISC)	month	day	year	

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