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| Study title  |
| Participant ID  | Protocol version number  |
| Principal investigator  | Study site  |

**Visit Type < Insert Visit Type > Treatment Group < insert Treatment Group >**

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| **Name of examiner** Signature \_\_\_\_\_\_\_\_\_\_\_\_\_Name \_\_\_\_\_\_\_\_\_\_\_\_Designation \_\_\_\_\_\_\_\_\_\_\_\_ | **Date & time of examination** Date \_\_/\_\_/\_\_\_\_ dd/mm/yyyy**Time \_\_. \_\_ 24 hours**  |

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| **Before examination check**  |
| Study related consent has been taken Examiner is listed in the delegation of authority log Examination is carried out in the examination room with patient privacy protected |

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| **Examination finding** | **Description of the finding**  |  **Body system code\***  |  **Dates**  | **Currently taking medicines****If yes** ✓ |
| **Start date**\_\_/\_\_/\_\_\_\_dd/mm/yyyy | **End date** \_\_/\_\_/\_\_\_\_dd/mm/yyyy |  **ongoing if yes**✓ |
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| **Body system code**  |
| 01 = General Appearance02 = Gastrointestinal03 = head and neck 04 = Neurological05 =Ear nose throat  | 06 = Eye 07 = Chest08 = Respiratory09= Cardiovascular | 10 = Abdominal11 = upper limbs12= Lower limbs 13 = Integumentary14 = Genitourinary  | 15 = Musculoskeletal16 = Lymphatic17 = Other  |