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| **Adverse Event Log** | |
| Study title | |
| **R&D ID:** | **IRAS number:** |
| **Chief Investigator:** | **Principal Investigator:** |
| **Site:** | **Participant ID:** |

| **Description of adverse event**  (provide additional information on notes pages if required) | **Date of onset** | **Date reported to Investigator/team** | **Severity**  1. Mild  2. Moderate  3. Severe | **Causality**  1. Unrelated  2. Possible  3. Probable  4. Definite | **Action taken – please list all that apply**  1. None  2. Hospitalisation  3. Intervention stopped  4.Con Meds commenced (record on Con Meds Log)  5. Other (specify) | **Outcome**  1. Recovered  2. Recovered with sequelae  3. Recovering  4. Not recovered  5. Unknown  6. Fatal | **Is this a Serious AE?**  **YES\***  **or NO** | **Date resolved**  (Enter date resolved or tick if ongoing at end of study) | **Signature and Date** |
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|  |  |  |  |  |  |  | \*complete an SAE form and email to the Sponsor  [tay.pharmacovigilance@nhs.scot](mailto:tay.pharmacovigilance@nhs.scot) | | |
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