ARISTOTLE

Trial Number: A R I — ☐☐☐ **Patient Initials:** ☐☐☐

CHANGE OF STATUS FORM

NB *All dates should be in DD-MM-YYYY format*

CoS-1/1

Complete the relevant section(s) below to document the change(s) in the patient's trial status.
This form may be submitted multiple times as required.

Please tick which change(s) this form is documenting:

☐ **Lost to Follow Up**
Please complete Section A

☐ **Withdrawal from trial activities**
Please complete Section B

☐ **Withdrawal of Biological Samples**
Please complete Section C

A: Lost to Follow Up:

Every effort should be made to obtain patient data if s/he is discharged or moves away. If the patient has not attended clinic and his/her whereabouts are unknown please complete this section

Date the patient was last known to be alive: ☐☐ / ☐☐ / ☐☐☐☐

B: Withdrawal from trial activities

Please specify for which aspects of the trial the patient has withdrawn consent and enter a date:

1. **Trial Activities:** Patient does not want to engage in anymore trial activities (e.g. protocol defined visits and scans). Outcome data will continue to be collected unless indicated below.
   ☐ Yes—Please provide date: _____/_____/_____
   ☐ No

2. **Data Collection:** Patient has withdrawn consent for collection of any further data for the trial. Essential safety data will still be collected.
   ☐ Yes—Please provide date: _____/_____/_____
   ☐ No

3. **Use of data:** Patient has withdrawn consent to include their data in analyses for trial publications and presentations
   ☐ Yes—Please provide date: _____/_____/_____
   ☐ No

C: Withdrawal of consent to use biological samples

1. Patient has withdrawn consent for storage and any use of samples for research.
   ☐ Yes—Please provide date: _____/_____/_____
   ☐ No

2. Patient has withdrawn consent to genetic testing (continue to store samples for research but no genetic testing may be done).
   ☐ Yes—Please provide date: _____/_____/_____
   ☐ No

Completed by (print name):	**Signature:**	**Date Completed:**
		☐☐ ☐☐ ☐☐☐☐

Site:

For UCL CTC use only: Date Checked: _____ Initials: _____ Date entered: _____ Initials: _____