



Hospital Discharge Form

Patient Forename: Patient Surname: D.O.B (dd-mon-yyyy)/...../19.....	Hospital Hospital No: NHS Number: Date of surgery:/...../20.....	CReST Trial No: Date of Discharge: (date fit for discharge)/...../20..... Date form completed:/...../20.....
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Complications – Please complete for ALL patients

Did the patient experience any complications that required intervention? Yes No
 Did these require or prolong hospitalisation? Yes No
 If 'Yes', please complete SAE form.

Haemorrhage

(Defined as requiring transfusion)

Primary	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Reactionary	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Secondary	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If 'Yes', number of units transfused?

Anastomotic leak	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Intra-abdominal abscess	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Pulmonary complications	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes:	Atelectasis <input type="checkbox"/>	
	Bronchopneumonia <input type="checkbox"/>	
	Pulmonary embolus <input type="checkbox"/>	

Deep vein thrombosis	Yes <input type="checkbox"/>	No <input type="checkbox"/>
MI – Heart failure	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Urinary tract infection	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Stoma related complications	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Death (If 'yes', please complete SAE form)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Other	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Was further abdominal surgery required? Yes No
 If 'Yes', please specify:

Was the patient transferred to critical care? HDU ICU No
 If 'Yes', the number of days in critical care?days

Was mechanical ventilation required? Yes No

Name of person completing the form:.....

Signature..... Telephone Number.....

Please return form to CReST Study Office, University of Birmingham Clinical Trials Unit, FREEPOST RRKR-JUZR-HZHG, Robert Aitken Institute, Edgbaston, Birmingham B15 5TT