



EXACERBATION SUBSTUDY WITHDRAWAL FORM

ID NUMBER:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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FORM CODE: EWF
VERSION: 2.0 05/14/2019

Event: _____

0a) Date of Collection / /

0b) Staff Code

Instructions: This form should be completed when the participant withdraws from the SPIROMICS II Exacerbation Substudy.

1a) Did the participant complete the exacerbation substudy visit 1 prior to withdrawing?

- No₀
 Yes₁

1b) Did the participant complete the exacerbation substudy visit 2 prior to withdrawing?

- No₀
 Yes₁

2) Date of substudy withdrawal

 / /

3) What is the reason the participant is withdrawing from the substudy?

- Participant no longer wishes to participate; withdrawal of consent₁
 Participant is too sick to participate₂
 Participant is lost to follow-up₃
 Participant died₄
 Other₅

3a) If Other, please specify: _____

4) Describe the reason for substudy withdrawal in more detail: _____

5) What are the participant's wishes regarding SPIROMICS II exacerbation substudy data and biospecimens?

- No change; keep data collected and biospecimens collected in repositories₁
 Keep data collected, but remove all biospecimens collected from repositories₂
 Remove all data collected and remove all biospecimens collected from repositories₃

Note: If the participant wishes to also withdraw from the main SPIROMICS II study (Visit 5 and FU phone calls), please complete the RSW form.

END OF FORM