

Participant identifier

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Participant initials

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Discontinuation CRF

Discontinuation

Date of discontinuation: **DSSTDTC** __ __ / __ __ __ / __ __ __ __

A) WITHDRAWAL **DSCAT**

- ☐ Withdrawal by the investigator **1**
- ☐ Withdrawal by the participant **2**

B) SPECIFIC REASON(S) FOR WITHDRAWAL **DSTERM**

- ☐ Ineligibility (retrospectively in case of having been overlooked at screening) **1**
- ☐ Not satisfied with randomisation allocation **2**
- ☐ IMP side-effects **4**
- ☐ Feels recovered and no longer wishes to continue **5**
- ☐ Person reasons e.g. family issues, other medical problem **6**
- ☐ Received negative test result for Covid-19 and no longer wishes to continue **7**
- ☐ In hospital and no longer wishes to continue **8**
- ☐ No reason provided **9**
- ☐ **Passed away after the 28 day follow-up 10**
- ☐ Other **3**

Further details: **DSTERM_OTH**

C) PLEASE INDICATE PERMITTED FOLLOW-UP: **DSCONT**

- ☐ Withdrawal from intervention - participant follow-up to continue as per study schedule **1**
- ☐ Withdrawal from follow-up calls and further contact **4**
- ☐ **Withdrawal from long-term follow-up calls 6**
- ☐ Withdrawal of consent to access medical notes and/or data linkage **5**

D) PLEASE INDICATE ANALYSIS STATUS: **ANALYSISYN**

- ☐ Included in analysis **1**
- ☐ Not included in analysis **2**

Completed by: Print nameSignDate __ / __ / __