Patient ID: **M01-004-2299**

SECTION: MEDICATIONS	(Medication_b_06)

BM4: tblMTS1Medication.dbo.ColumnName_Property_Not_Set_In_Template If treatment is for a pre-existing medical condition or adverse event, a PreExisting Medical Condition Form or Adverse Event Form must be completed before the medication is entered.

BM2: tblMTS1Medication.dbo.ColumnName_Property_Not_Set_In_Template When you are updating a previously entered medication, if the medication dose or frequency has changed, enter the stop date for the current medication dose and then enter a new record for the new dose.

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1. Medication Name: tblMTS1Medication.dbo.ParentRxNormDrugListID

Tylenol Severe Allergy

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2. Dose per administration (include unit):

Dose: tblMTS1Medication.dbo.MedDose   **Unit:** tblMTS1Medication.dbo.MedUnit   tblMTS1Medication.dbo.MedDoseUnk

or ☑   Unknown

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3. Route: tblMTS1Medication.dbo.MedRoute

P.O.-by mouth

3a. If _Other_, describe: tblMTS1Medication.dbo.MedRouteOthDs

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4. If treatment is for eye or ear, complete: tblMTS1Medication.dbo.MedLocSide

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5. Frequency: tblMTS1Medication.dbo.MedFreqType

As Needed

5a. If _Fixed_, complete the following:

Frequency: tblMTS1Medication.dbo.MedFreqNum per tblMTS1Medication.dbo.MedFreqPer   tblMTS1Medication.dbo.MedFreqUnk

or ☐

Unknown

BM3: tblMTS1Medication.dbo.ColumnName_Property_Not_Set_In_Template

6. Indication: tblMTS1Medication.dbo.MedInd

Medical condition prior to enrollment

6a. If medical condition prior to enrollment (i.e. pre-existing), select condition(s): tblMTS1Medication.dbo.ParentLogInIDPreExisting

Asthma (Respiratory, thoracic and mediastinal disorders)

tblMTS1Medication.dbo.ParentLogInIDPreExisting2

or tblMTS1Medication.dbo.PreExistCondNotReqd **Condition not required to be reported on pre-existing condition form**

☐

6b. If 'Treatment for Adverse Event', select adverse event(s): tblMTS1Medication.dbo.ParentLoginIDAdvEvent

or tblMTS1Medication.dbo.AdvEventNotReqd **Condition not required to be reported on**

tblMTS1Medication.dbo.ParentLoginIDAdvEvent2   ☐

adverse event form

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7. Start Date of Treatment: tblMTS1Medication.dbo.MedStartTrtCat

On treatment at time of enrollment

7a. If on treatment at time of enrollment:

Start date: tblMTS1Medication.dbo.MedStartPreEnrRange

3 months to < 6 months

7b. If treatment started after enrollment:

Start date:

Please enter exact date (Month, Day, Year) if known, otherwise estimate the month and year:

tblMTS1Medication.dbo.MedStartDt *OR if exact date not known, estimate:* [month: tblMTS1Medication.dbo.MedStartMonth] [year:

tblMTS1Medication.dbo.MedStartYear] *(if month unknown and cannot be estimated just enter year)*

tblMTS1Medication.dbo.MedStartDtUnk

	Unknown
☐	

8. Stop Date *(or mark box if ongoing):*
Please enter exact date (Month, Day, Year) if known, otherwise estimate the month and year.
tblMTS1Medication.dbo.MedStopDt *OR if exact date not known, estimate:* [month: tblMTS1Medication.dbo.MedStopMonth] [year:

tblMTS1Medication.dbo.MedStopYear] *(if month unknown and cannot be estimated just enter year)*

tblMTS1Medication.dbo.MedStopDtUnk   tblMTS1Medication.dbo.MedOngoing
☐   Unknown ☑   Ongoing