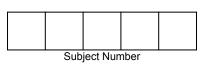


Sit	te Numb	er



## CM = 'Concomitant/Prior Medications'

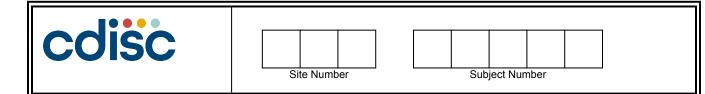
Form CM - Concomitant Medications		
1 CM - Concomitant Medications Header		
41	Not Submitted  Yes	
2 CM - Concomitant Medicati	ons	
2.1 Medication/Therapy <i>IT.CMTRT</i>	CMTRT	
2.2 Indication IT.CMINDC	CMINDC	
Dose IT.CMDSTXT	If numeric then CMDOSE  If character then CMDOSXT	
2.4 Unit IT.CMDOSU	Percent Volume per Volume   Percent Vo	



Sit	te Numb	ωr

_	_		
Sub	ject Nun	nber	

Form CM - Concomitant Medications		
2 CM	l - Concomitant Medicati	ons
2.5	Dose Form	[AEROSOL] Aerosol Capsule
	IT.CMDOSFRM	CREAM Cream  GAS GAS  GEL GEL  GINHALANT Inhalant  GINJECTION Injectable  GLIQUID Liquid  GOINTMENT Ointment  GPATCH Patch  GEPRAY Spray  GSUPPOSITORY Suppository  GSUSPENSION SUSPENSION  GITABLET Tablet  Other, Specify  IT.DOSFRMO
2.6	Frequency  IT.CMDOSFRQ	☐ [BID] Twice Daily ☐ [ONCE] Once ☐ [PRN] As Needed ☐ [OD] Daily ☐ [OOD] Every Other Day
		Three Times Daily  [UNKNOWN] Unknown  [OTHER] Other  Dose Frequency Other, Specify  IT.DOSFRQO



Form	Form CM - Concomitant Medications		
2 CM	/ - Concomitant Medicati	ons	
2.7	Route  IT.CMROUTE	[INTRALESIONAL] Intralesional	
		☐ [TOPICAL] Topical ☐ [TRANSDERMAL] Transdermal ☐ [VAGINAL] Vaginal ☐ [OTHER] Other ☐ Other, Specify ITROUTEO	
2.8	Start Date IT.CMSTDAT (DD-MMM-YYYY)	CMSTDTC	
2.9	Ongoing IT.CMONGO	No If Yes then CMENRTPT = 'ONGOING'  Yes If Yes then CMENTPT = 'DATE OF LAST ASSESSME	
2.10	End Date (DD-MMM-YYYY) IT.CMENDAT	CMENDTC CMENDTC	