Randomization Log  
Approval form

|  |  |
| --- | --- |
| EORTC Study Number |  |

|  |  |
| --- | --- |
| ORTA step number |  |
| Date:  Number of patients: |  |
| Findings:  **:** normal.  **:** abnormal (specify) | *(specify all abnormal findings and actions taken)* |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Name | Date of approval | Signature |
| Study Statistician (Author) |  |  |  |
| Senior Statistician (if not Author) |  |  |  |