



BRONCHOSCOPY SUBSTUDY WITHDRAWAL FORM

ID NUMBER:

FORM CODE: **BWF**
VERSION: 1.0 12/20/11

Visit
Number

SEQ #

0a) Form Date: / /

0b) Initials.....

Instructions: This form should be completed when the participant withdraws or completes SPIROMICS. If the participant withdraws early, please answer each question.

1) Did participant complete the sputum induction visit?
Yes Y
No N

2) Did participant complete the bronchoscopy visit?
Yes Y
No N

3) What was the date of study withdrawal? / /

4) What was the reason the participant withdrew from the study?
Participant no longer wishes to participant; withdrawal of consent . 1
Participant is too sick to participant 2
Participant lost to follow-up 3
Participant died 4
Other 5

5) Describe reason for study withdrawal in detail: _____

ID NUMBER:								
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6) What are patient's wishes regarding bronchoscopy substudy data?

- No change, leave already collected data
and specimens in repositories 1
- Keep collected medical records data,
but remove all specimens from repositories 2
- Remove all data collected and
remove all specimens from repositories 3

7) Is the participant withdrawing from the main SPIROMICS study?

Yes Y → **Complete RSW Form**
No N