



64196



Interviewer (initials)

[][][]

COPD Gene ID

[][][][][][]

Month

[][]

Day

[][]

Year

[][][][]

Center (eg, NJC)

[][][]

Safety Assessment

Coordinator: Ask the subject to answer each question below *before* you administer albuterol to the subject and *before* the subject performs the 6-min walk test.

1. Have you ever had albuterol (Ventolin or Proventil) prescribed by a physician?

Yes No

If **Yes**, when did you last use albuterol?

Month

[][]

Day

[][]

Year

[][][][]

2. Have you ever had an allergic reaction to albuterol or another bronchodilator?

Yes No

Coordinator: If **Yes**, do **not** administer albuterol. Contact the physician investigator.

* 3. Have you ever been diagnosed with an abnormal heart rhythm?

Yes No

Coordinator: If **Yes**, contact the physician investigator before you proceed with administering albuterol or the walk test.

4. Have you ever been told by a physician that you have heart disease?

Yes No

Coordinator: If **Yes**, contact the physician investigator before you proceed with administering albuterol or the walk test.

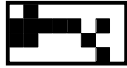
5. Have you had recent chest pain or discomfort?

Yes No

Coordinator: If **Yes**, contact the physician investigator before you proceed with administering albuterol or the walk test.

* **Answer only if have IRB approval to do so.**





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Actions and Outcomes: Coordinator Only

Based on the answers to the questions above, these actions were taken:

- Subject had no contraindications; albuterol given according to study protocol
- Study physician contacted; albuterol given according to study protocol
- Study physician contacted; albuterol not given according to study protocol *
- Subject declined to receive albuterol *

* Complete *Discontinuation* form.

