



**Tier 0 - Rapid CRF Data Entry Checklist**

**Complete All Sections on data entry completion.**

**Participant ID: - |\_\_|\_\_|\_\_| - |\_\_||\_\_||\_\_||\_\_|**

**Enrolment date: |\_\_||\_\_| |\_\_||\_\_| |2||0||1||\_\_|**

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| --- | --- | --- | --- |
| **Section Title** | **√ on entry** | **Initials** | **Date entered** |
| Sprint- SARI Inclusion criteria |  |  |  |
| Demographics |  |  |  |
| Onset & admission |  |  |  |
| ICU or HDU admission or ( N/A if not admitted to ICU/HDU) |  |  |  |
| Infectious respiratory diagnosis |  |  |  |
| Outcome |  |  |  |