Discharge and readmission version 1.0

Discharge and readmission

Title: Discharge and readmission

Instructions:

DISCHARGE AND READMISSION FORM

Date of ICU readmission (dd-mm-yyyy)	Time of ICU readmission (hh:mm, 24 hours format)	Date of ICU discharge (dd-mm-yyyy)	Time of ICU discharge (hh:mm, 24 hours format)	Patient discharged to [info]	Has the patient been enrolled in other interventional trials during this ICU admission	Patient transferred to site Id
				○ General Ward ○ ICU participating in HOT-ICU trial ○ ICU not participating in HOT-ICU trial ○ Home (including nursing homes and similar) ○ Dead	○ Yes ○ No	