## DISCHARGE AND READMISSION

Hotline: +45 48296773

| \# | Date of ICU readmissi on (dd-mmyyyy) | Time of ICU readmissio n (hh:mm, 24 hours) | Date of ICU discharge (dd-mm-yyyy) | Time of ICU discharge (hh:mm, 24 hours) | Patient discharged to | Has the patient been enrolled in other interventiona\| trials during this ICU admission? | Name(s) of interventional trials the patient has been enrolled in | Further comments to data manager |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DC1 |  |  |  | $\text { \|___\| } \mid$ | General ward Other ICU participating in the GODIF trial Other ICU not participating in the GODIF trial Home Dead | $\begin{aligned} & \square \mathrm{YES} \\ & \square \mathrm{NO} \end{aligned}$ |  | If the patient is dead the date should automatically be transferred to 90 days and 1 year Followup, and no additional hospital admission may be added. |
| DC2 |  | I__I_I: |  |  |  |  |  | Default: <br> This date may not lie before the date in question 1. |
| DC3 |  |  |  | \|__|_|: | General ward Other ICU participating in the GODIF trial Other ICU not participating in the GODIF trial Home | $\square$ YES <br> $\square \mathrm{NO}$ |  | Default: <br> This date may not lie before the date in question 2. <br> If the patient is dead see above. |


|  | DIF | DISCHARGE AND READMISSION |  | 6 |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  | $\square$ Dead |  |
| COVID-19 |  |  |  |  |
| DC4 | Positive test for coronavirus? |  | Any sample of airway secretions or nasopharyngeal swab positive for SARS-CoV-2 / COVID-19 at any time leading to or during current ICU admission | required |

