

CRF Report for Study E7694105D

Report run by Brian Saari at 22-FEB-2013 11:08:16

Report Parameters

Site: CP_001

Discrepancy status choice: All statuses

Approval status choice: All statuses

Verification status choice: All statuses

Starting patient: R3024

Ending patient: R3024

Legend: How different values appear in the report

Prompt	Abc 123
Data value	Abc 123
Data value with discrepancy	Abc 123

All time stamps displayed in this report are in the timezone of the database server.

The data contained in this report is current at the time of printing (time as shown above)

Initials:

(b)

Subject #:

R3024

WEEK 1

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion: 18-MAY-2009

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Page Version No. WEEK_1 (v1, 25-MAR-2009)

Document Number R253885613

Initials:

(b)

Subject #:

R3024

WEEK 2

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion: 25-MAY-2009

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average 5 cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g) 10

Small (0.5g) 0

6. I have experienced the following Adverse Events:

NONE

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Page Version No. WEEK_2 (v1, 25-MAR-2009)

Document Number R253885713

Links to Discrepancy and Audit Sections

[Click here to navigate to audit history for this CRF](#)

[Click here to navigate to discrepancy details for this CRF](#)

Initials:

(b)

Subject #:

R3024

WEEK 3

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Page Version No. WEEK_3 (v1, 25-MAR-2009)

Document Number R253885813

Initials:

(b)

Subject #:

R3024

WEEK 4

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Page Version No. WEEK_4 (v1, 25-MAR-2009)

Document Number R253885913

Initials:

(b)

Subject #:

R3024

WEEK 5

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Document Number R253886013

Initials:

(b)

Subject #:

R3024

WEEK 6

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Page Version No. WEEK_6 (v1, 25-MAR-2009)

Document Number R253886113

Initials:

(b)

Subject #:

R3024

WEEK 7

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)
Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct
 Incorrect
 Don't Know
 I have not experienced an Adverse Event

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Page Version No. WEEK_7 (v1, 25-MAR-2009)

Document Number

Initials:

(b)

Subject #:

R3024

WEEK 8

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Page Version No. WEEK_8 (v1, 25-MAR-2009)

Document Number R253886313

Initials:

(b)

Subject #:

R3024

WEEK 9

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Initials:

(b)

Subject #:

R3024

WEEK 10

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Initials:

(b)

Subject #:

R3024

WEEK 11

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Document Number R253886613

Initials:

(b)

Subject #:

R3024

WEEK 12

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Page Version No. WEEK_12 (v1, 25-MAR-2009)

Document Number R253886813

Initials:

(b)

Subject #:

R3024

WEEK 13

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Document Number R253886913

Initials:

(b)

Subject #:

R3024

WEEK 14

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Document Number R253887013

Initials:

(b)

Subject #:

R3024

WEEK 15

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Page Version No. WEEK_15 (v1, 25-MAR-2009)

Document Number R253887113

Initials:

(b)

Subject #:

R3024

WEEK 16

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

5. I have consumed on average the following number of snus sachets per day:

Sachet Size:

Large (1g)

Small (0.5g)

6. I have experienced the following Adverse Events:

7. I think the Adverse Event is related to the snus product:

Correct

Incorrect

Don't Know

I have not experienced an Adverse Event

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Page Version No. WEEK_16 (v1, 25-MAR-2009)

Document Number R253887213

Initials:

(b)

Subject #:

R3024

FOLLOW-UP WK 17

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

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Page Version No. WEEK_17 (v1, 25-MAR-2009)

Document Number R253887313

Initials:

(b)

Subject #:

R3024

FOLLOW-UP WK 18

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

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Page Version No. WEEK_18 (v1, 25-MAR-2009)

Document Number R253887413

Initials:

(b)

Subject #:

R3024

FOLLOW-UP WK 19

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

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Page Version No. WEEK_19 (v1, 25-MAR-2009)

Document Number R253887513

Initials:

(b)

Subject #:

R3024

FOLLOW-UP WK 20

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

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Page Version No. WEEK_20 (v1, 25-MAR-2009)

Document Number R253887613

Initials:

(b)

Subject #:

R3024

FOLLOW-UP WK 21

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

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Page Version No. WEEK_21 (v1, 25-MAR-2009)

Document Number R253887813

Initials:

(b)

Subject #:

R3024

FOLLOW-UP WK 22

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

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Document Number R253887913

Initials:

(b)

Subject #:

R3024

FOLLOW-UP WK 23

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

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Document Number R253888013

Initials:

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Subject #:

R3024

FOLLOW-UP WK 24

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

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Page Version No. WEEK_24 (v1, 25-MAR-2009)

Document Number R253888113

Initials:

(b)

Subject #:

R3024

FOLLOW-UP WK 25

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

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Page Version No. WEEK_25 (v1, 25-MAR-2009)

Document Number R253888213

Initials:

(b)

Subject #:

R3024

FOLLOW-UP WK 26

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

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Page Version No. WEEK_26 (v1, 25-MAR-2009)

Document Number R253888313

Initials:

(b)

Subject #:

R3024

FOLLOW-UP WK 27

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

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Page Version No. WEEK_27 (v1, 25-MAR-2009)

Document Number R253888413

Initials:

(b)

Subject #:

R3024

FOLLOW-UP WK 28

Is Blank

STUDY PRODUCT USE DIARY

During the past week:

Date of completion:

1. I have not smoked any cigarettes at all during the past week (1 or 2 puffs = 1 cigarette)

Correct Incorrect

2. I have smoked on average cigarettes per day

3. I have smoked tobacco products other than cigarettes:

No Yes-please specify:

4. Did you use smokeless tobacco products, nicotine-containing products (e.g., gum or patch), or other smoking cessation products this week?

Yes No

If yes, what type (smokeless tobacco, pharmaceutical nicotine replacement products [gum / patch / other], other nicotine products [e.g., lozenges])?

Verified Approved Locked Frozen

Page Version No. WEEK_28 (v1, 25-MAR-2009)

Document Number R253888513

Appendix: Audit and Discrepancy Information

Audit History Report

This section lists audited data that meets the parameters set when the report was run. It may not include all of the audited data in a particular CRF. Refer to the documentation for a complete description of the parameters that can affect this report.

Document #: R253885713

Patient Site	Visit Visit Date	CRF CRF Page
R3024 CP_001	Week 2	Week_2 02

Section Section Date	Qualifying Prompt	Qualifying Value	Section Visit
Study Diary	Page number	2	Week 2

Group #	Group Name
1	DRUGSCR

Field Row	Changed From Changed To	Impact on On resequence By	Reason Comment
6. (3) 1	I have experienced the following AEs NONE	11-FEB-2010 11:36:51 Tricia Hunt	Data Entry Error

Deleted CRFs Report