FEATHER Patient Identification Log

Written consent for this research is included in FEATHER Informed Consent Form and Patient Information Sheet.

Hospital name: _____

[Host trial] Trial Number	Age	Sex	Level of education	Home location	Planned [Host trial] 30-day Follow-up	Maintenance of [Host trial] follow-up	Verbal consent to return for FEATHER interview	Preferred time and date for FEATHER interview
		□ Male □ Female	□ High school level or above □ Below high school level	□ Urban □ Rural	□ In-person □ Telephone	□ Lost to follow-up □ Challenging to follow-up (late/multiple attempts) □ Easy to follow-up (on-time/first contact)	□ Yes □ No	
		□ Male □ Female	□ High school level or above □ Below high school level	□ Urban □ Rural	□ In-person □ Telephone	□ Lost to follow-up □ Challenging to follow-up (late/multiple attempts) □ Easy to follow-up (on-time/first contact)	□ Yes □ No	
		□ Male □ Female	□ High school level or above □ Below high school level	□ Urban □ Rural	□ In-person □ Telephone	□ Lost to follow-up □ Challenging to follow-up (late/multiple attempts) □ Easy to follow-up (on-time/first contact)	□ Yes □ No	
		□ Male □ Female	□ High school level or above □ Below high school level	□ Urban □ Rural	□ In-person □ Telephone	□ Lost to follow-up □ Challenging to follow-up (late/multiple attempts) □ Easy to follow-up (on-time/first contact)	□ Yes □ No	
		□ Male □ Female	□ High school level or above □ Below high school level	□ Urban □ Rural	□ In-person □ Telephone	□ Lost to follow-up □ Challenging to follow-up (late/multiple attempts) □ Easy to follow-up (on-time/first contact)	□ Yes □ No	
		□ Male □ Female	□ High school level or above □ Below high school level	□ Urban □ Rural	□ In-person □ Telephone	□ Lost to follow-up □ Challenging to follow-up (late/multiple attempts) □ Easy to follow-up (on-time/first contact)	□ Yes □ No	
		□ Male □ Female	□ High school level or above □ Below high school level	□ Urban □ Rural	□ In-person □ Telephone	□ Lost to follow-up □ Challenging to follow-up (late/multiple attempts) □ Easy to follow-up (on-time/first contact)	□ Yes □ No	