**Concomitant Medication Log**

|  |  |  |
| --- | --- | --- |
| **Site information** |  |  |
| **Project No:** |  | **Principal Investigator:** |  |
| **Site ID:** |  | **Patient ID:** |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **No.** | **Drug/Device** | **Generic name\*** | **Dose & Route****(e.g. 50 mg/iv)** | **Dosage form****(e.g. tablets)** | **Start Date** | **Stop Date** | **Indication****(e.g. AE#1 or COPD)** | **Ongoing at end of the study** |
|  |  |  |  |  |  |  |  | [ ]  Yes[ ]  No[ ]  Unknown |
|  |  |  |  |  |  |  |  | [ ]  Yes [ ]  No[ ]  Unknown |
|  |  |  |  |  |  |  |  | [ ]  Yes[ ]  No[ ]  Unknown |
|  |  |  |  |  |  |  |  | [ ]  Yes[ ]  No[ ]  Unknown |
|  |  |  |  |  |  |  |  | [ ]  Yes [ ]  No[ ]  Unknown |
|  |  |  |  |  |  |  |  | [ ]  Yes [ ]  No[ ]  Unknown |
|  |  |  |  |  |  |  |  | [ ]  Yes [ ]  No[ ]  Unknown |

\*Not applicable for medical devices