



## Hillside Adverse Events Form (5/24/01)

STUDY # \_\_\_\_\_ GRID # \_\_\_\_\_ ID # \_\_\_\_\_ RATER # \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_  
DQC approved rater #'s only mm mm dd dd yy yy yy yy

Catalogue of Symptoms		Intensity					Relationship				
		Not assessed/ Not applicable	Not present	Mild	Moderate	Severe	None	Remote	Possible	Probable	Definite
Behavioral	Delirium/Confusion	0	1	2	3	4	1	2	3	4	5
	Disorientation	0	1	2	3	4	1	2	3	4	5
	Excitement/Agitation	0	1	2	3	4	1	2	3	4	5
	Restlessness	0	1	2	3	4	1	2	3	4	5
	Increased motor activity	0	1	2	3	4	1	2	3	4	5
	Decreased motor activity	0	1	2	3	4	1	2	3	4	5
	Malaise	0	1	2	3	4	1	2	3	4	5
	Insomnia	0	1	2	3	4	1	2	3	4	5
	Hypersomnia	0	1	2	3	4	1	2	3	4	5
	Drowsiness	0	1	2	3	4	1	2	3	4	5
Neurological	Myoclonus	0	1	2	3	4	1	2	3	4	5
	Cramps	0	1	2	3	4	1	2	3	4	5
	Rigidity	0	1	2	3	4	1	2	3	4	5
	Tremor	0	1	2	3	4	1	2	3	4	5
	Seizures	0	1	2	3	4	1	2	3	4	5
	Dystonia	0	1	2	3	4	1	2	3	4	5
	Akathisia	0	1	2	3	4	1	2	3	4	5
	Paresthesia	0	1	2	3	4	1	2	3	4	5
	Dyskinesia	0	1	2	3	4	1	2	3	4	5
	Tinnitus	0	1	2	3	4	1	2	3	4	5
Cardiovascular	Vertigo	0	1	2	3	4	1	2	3	4	5
	Hypotension	0	1	2	3	4	1	2	3	4	5
	Hypertension	0	1	2	3	4	1	2	3	4	5
	Syncope/Dizziness	0	1	2	3	4	1	2	3	4	5
	Palpitations	0	1	2	3	4	1	2	3	4	5
	Tachycardia	0	1	2	3	4	1	2	3	4	5
	Peripheral edema	0	1	2	3	4	1	2	3	4	5
Autonomic	Cold extremities	0	1	2	3	4	1	2	3	4	5
	Dry mouth	0	1	2	3	4	1	2	3	4	5
	Nasal congestion	0	1	2	3	4	1	2	3	4	5
	Blurred vision	0	1	2	3	4	1	2	3	4	5
	Constipation	0	1	2	3	4	1	2	3	4	5
	Increased salivation	0	1	2	3	4	1	2	3	4	5
	Fever	0	1	2	3	4	1	2	3	4	5
	Sweating	0	1	2	3	4	1	2	3	4	5
	Nausea	0	1	2	3	4	1	2	3	4	5
	Vomiting	0	1	2	3	4	1	2	3	4	5



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DQC approved rater #'s only mm mm dd dd yy yy yy yy

		Intensity					Relationship				
		Not assessed/ Not applicable	Not present	Mild	Moderate	Severe	None	Remote	Possible	Probable	Definite
<b>Catalogue of Symptoms (cont.)</b>											
<b>Autonomic (cont.)</b>	Diarrhea	0	1	2	3	4	1	2	3	4	5
	Urinary retention	0	1	2	3	4	1	2	3	4	5
	Nocturia/Enuresis	0	1	2	3	4	1	2	3	4	5
	Menstrual disturbance	0	1	2	3	4	1	2	3	4	5
	Decreased interest in sex	0	1	2	3	4	1	2	3	4	5
	Impaired sex performance (e.g., anorgasmia, erectile dysfunction)	0	1	2	3	4	1	2	3	4	5
<b>Other</b>	Dermatological	0	1	2	3	4	1	2	3	4	5
	Joint pain/stiffness	0	1	2	3	4	1	2	3	4	5
	Muscle pain/stiffness	0	1	2	3	4	1	2	3	4	5
	Decreased appetite	0	1	2	3	4	1	2	3	4	5
	Increased appetite	0	1	2	3	4	1	2	3	4	5
	Headache	0	1	2	3	4	1	2	3	4	5

NOTES:

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be a standard notebook page or a sheet of stationery. There is no handwriting or other markings on the page.