|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Randomization Date (dd/mm/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Treatment Group: | □CYCLING + ROUTINE PT | |
| Study Day 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Last Study Day: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | □ROUTINE PT ONLY | |
| **BASELINE** | | **ICU AWAKENING** | **ICU DISCHARGE**  **Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **3 DAYS POST ICU DISCHARGE**  **Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **HOSPITAL DISCHARGE**  **Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **90 DAYS POST RANDOMIZATION**  **Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **(1) Screening** | □ Complete | **Cognitive screen score ≥3**  □ Yes + deemed appropriate  Date:\_\_\_\_\_\_\_\_\_\_\_ | **(SF2) PT Ax: ICU Discharge**  □ Collected | **(SF3) PT Ax: 3 Days Post-ICU Discharge**  □ Collected | **(SF4) PT Ax: Hospital Discharge**  □ Collected | **(RC4) 90 Day Follow-up questionnaire**  □ Collected |
| Consent Form | □ Complete |
| Consent Discussion | □ N/A □ Y |
| Multimedia Consent | □ N/A □ Y |
| **(2) Randomization** | □ Complete | **(SF1) PT Ax: ICU Awakening**  □ Collected |  |  | **(RC3) RC Ax: Hospital Discharge**  □ Collected |  |
| **(3) Baseline** |  | **(RC1) RC Ax: IPAT**  □ Collected | **(RC2) RC Ax: ICU Discharge**  □ Collected |  | **(7) Final Status**  □ Complete |  |
| **3A** | □ Complete |
| 3B | □ Complete |
| APACHE II | □ Complete |
| **Clinical Note** | □ Complete |  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| # =  STUDY DAY | | | **4**= DAILY DATA (FORM 4) | | | | | | | | | | | | | **5C**= PT THERAPY: CYCLING (FORM 5C) | | | | | | | | | | | | |  | **(6) PT Post-Last Study Day** | |
| **4A**= DAILY DATA WHILE ON WARD (FORM 4A) | | | | | | | | | | | | | **5R**= PT THERAPY: ROUTINE PT (FORM 5R) | | | | | | | | | | | | |  |
| **5**= PT WORKSHEET (FORM 5) | | | | | | | | | | | | | **5S**= SAFETY EVENTS (FORM 5S) | | | | | | | | | | | | |  | □Week 1 | □Week 2 |
| 1 | □4 | □5C | | 2 | | □4 | □5C | 3 | | □4 | □5C | 4 | | □4 | □5C | | 5 | | □4 | □5C | 6 | | □4 | □5C | 7 | | □4 | □5C |  | □Week 3 | □Week 4 |
| □4A | □5R | | □4A | □5R | □4A | □5R | □4A | □5R | | □4A | □5R | □4A | □5R | □4A | □5R |  | □Week 5 | □Week 6 |
| □5 | □5S | | □5 | □5S | □5 | □5S | □5 | □5S | | □5 | □5S | □5 | □5S | □5 | □5S |  | □Week 7 | □Week 8 |
| 8 | □4 | □5C | | 9 | | □4 | □5C | 10 | | □4 | □5C | 11 | | □4 | □5C | | 12 | | □4 | □5C | 13 | | □4 | □5C | 14 | | □4 | □5C |  | □Week 9 | □Week 10 |
| □4A | □5R | | □4A | □5R | □4A | □5R | □4A | □5R | | □4A | □5R | □4A | □5R | □4A | □5R |  | □Week 11 | □Week 12 |
| □5 | □5S | | □5 | □5S | □5 | □5S | □5 | □5S | | □5 | □5S | □5 | □5S | □5 | □5S |  | □Week 13 | □Week 14 |
| 15 | □4 | □5C | | 16 | | □4 | □5C | 17 | | □4 | □5C | 18 | | □4 | □5C | | 19 | | □4 | □5C | 20 | | □4 | □5C | 21 | | □4 | □5C |  | □Week 15 | □Week 16 |
| □4A | □5R | | □4A | □5R | □4A | □5R | □4A | □5R | | □4A | □5R | □4A | □5R | □4A | □5R |  | □Week 17 | □Week 18 |
| □5 | □5S | | □5 | □5S | □5 | □5S | □5 | □5S | | □5 | □5S | □5 | □5S | □5 | □5S |  | □Week 19 | □Week 20 |
| 22 | □4 | □5C | | 23 | | □4 | □5C | 24 | | □4 | □5C | 25 | | □4 | □5C | | 26 | | □4 | □5C | 27 | | □4 | □5C | 28 | | □4 | □5C |  | □Week 21 | □Week 22 |
| □4A | □5R | | □4A | □5R | □4A | □5R | □4A | □5R | | □4A | □5R | □4A | □5R | □4A | □5R |  | □Week 23 | □Week 24 |
| □5 | □5S | | □5 | □5S | □5 | □5S | □5 | □5S | | □5 | □5S | □5 | □5S | □5 | □5S |  | □Week 25 | □Week 26 |
| FORM | | | | | FORM 4 | | | | FORM 4A | | | | FORM 5 | | | | | FORM 5C | | | | FORM 5R | | | | FORM 5S | | |  |  | FORM 6 |
| TOTAL # | | | | |  | | | |  | | | |  | | | | |  | | | |  | | | |  | | |  | TOTAL # |  |