

# ABCD NATIONWIDE EXENATIDE AUDIT - DATA COLLECTION PROFORMA

<b>Clinic Date</b>	
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<b>Unique ID (Database use only)</b>	
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<b>Clinic Location</b>	
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<b>Exenatide Start Date</b>	
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Affix Patient Label Here

<b>NHS Number</b>	
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<b>Consultant</b>	
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<b>GP</b>	
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	Ethnicity (NHS official UK)	Please Tick
A	British	
B	Irish	
C	Any Other White Background	
D	White and Black Caribbean	
E	White and Black African	
F	White Asian	
G	Any Other Mixed Background	
H	Indian	
J	Pakistani	
K	Bangladeshi	
L	Any Other Asian Background	
M	Caribbean	
N	African	
P	Any Other Black Background	
R	Chinese	
S	Any Other Ethnic Group	
Z	Unknown	
<b>Ethnic Origin Other: Specify</b>		

Sex	BP Systolic	BP Diastolic	Weight	Height	Waist Measurement
	/		Kg	m                  cm	cm

Medication					
Oral Diabetes	Insulin / Exenatide	Blood Pressure	Lipid	Aspirin / Clopidogrel	Other

Result Type	Result	Date Result	GI Side Effects (Tick)
<b>HbA1c</b>			Not as far as I am aware
<b>Creatinine</b>			Yes but transient
<b>Cholesterol</b>			Yes – Patient discontinued Exenatide temporarily
<b>Triglycerides</b>			Yes – Patient discontinued Exenatide permanently
<b>HDL - Cholesterol</b>			Uncertain

Is the patient a professional driver? (Tick)	Pancreatitis (Tick)
Not as far as I am aware	Not as far as I am aware
LGV / PSV licence holder	Yes
CI licence holder	Possibly
Taxi and other occupational driver	Uncertain
Uncertain	

Other Exenatide Side Effects	What was the patient's opinion about Exenatide? (Tick)
	Extremely pleased                  Unhappy
	Very pleased                                  Very unhappy
	Pleased    Extremely unhappy
	Ambivalent                                      Uncertain

<b>Patients comments on Exenatide</b>	
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<b>Treatment Changes / Recommendations / Other Comments</b>

<b>Sign:</b>	<b>Date:</b>
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