DASH trial
Desmopressin for reversal of Antiplatelet drugs in Stroke due to Haemorrhage

ISRCTN 67038373

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Day 1 follow-up form v1.1

Section A: Participant details			
A1	Date of data collection *(dd-mmm-yyyy)*	D ____ / M _____ / Y _____	
A2	Dominant hand	☐ Right ☐ Left ☐ Ambidextrous	☐ Not known
A3	Ethnic group	☐ White ☐ Black ☐ Asian ☐ Other	☐ Not known
A4	Date/time first seen upon arrival at hospital *(dd-mmm-yyyy hh:mm 24hr)* *Note: This may be in ED, at CT scanner or stroke unit*	D ____ / M _____ / Y _____ H _____ : M _____	
A5	Date/time of first CT scan after onset *(dd-mmm-yyyy hh:mm 24hr)*	D ____ / M _____ / Y _____ H _____ : M _____	☐ Not done ☐ Not known
A6	Haematoma location *Please tick all that apply*	☐ Supra-tentorial Lobar (frontal, parietal, temporal, occipital) ☐ Supra-tentorial Deep (thalamus, basal ganglia) ☐ Infra-tentorial (cerebellar, brainstem, midbrain, pons)	☐ Not known
A7a	Has advanced imaging been performed (e.g. CTA, contrast-enhanced CT)?	☐ Yes ☐ No	☐ Not known
A7b	If yes, what was the result?	☐ Spot positive ☐ Spot negative	☐ Not applicable ☐ Not known
Estimated volume of largest haematoma			
A8a	Maximum haematoma length 'A' *(up to 4 decimal places)*	_____ cm	☐ Not known
A8b	Maximum haematoma width 'B' *(up to 4 decimal places)*	_____ cm	☐ Not known
A8c	Number of slices where haematoma visible	_____ slices	☐ Not known
A8d	Scan slice thickness *(up to 3 decimal places)*	_____ mm	☐ Not known

Section B: Risk factors			
B1	History of ischaemic stroke or transient ischaemic attack (TIA)?	☐ Yes ☐ No	☐ Not known
B2	History of ischaemic heart disease?	☐ Yes ☐ No	☐ Not known
B3	History of hypertension?	☐ Yes ☐ No	☐ Not known
B4	History of diabetes?	☐ Yes ☐ No	☐ Not known
B5	History of atrial fibrillation?	☐ Yes ☐ No	☐ Not known
B6	History of haemorrhagic stroke?	☐ Yes ☐ No	☐ Not known
B7	History of hyperlipidaemia?	☐ Yes ☐ No	☐ Not known
B8	History of statin use prior to admission?	☐ Yes ☐ No	☐ Not known
B9	History of peripheral arterial disease?	☐ Yes ☐ No	☐ Not known
B10	History of smoking	☐ Current ☐ Past ☐ Never	☐ Not known
B11	Alcohol intake prior to randomisation?	☐ None ☐ Moderate (1-21 units per week) ☐ High (over 21 units per week)	☐ Not known

Section C: Baseline investigations			
C1	ECG	☐ Sinus rhythm ☐ AF ☐ Other	☐ Not done ☐ Not known
C2	Sodium	_____ mmol/L	☐ Not done ☐ Not known
C3	Potassium	_____ mmol/L	☐ Not done ☐ Not known
C4	Urea	_____ mmol/L	☐ Not done ☐ Not known
C5	Creatinine	_____ µmol/L	☐ Not done ☐ Not known
Pre-treatment study samples			
C6a	P-selectin sample taken?	☐ Yes ☐ No	☐ Not known
C6b	Factor VIII (FVIII) and von Willebrand factor (vWF) sample taken and frozen as per protocol?	☐ Yes ☐ No	☐ Not known
C6c	If these blood sample(s) were not taken prior to treatment, please give the reason		☐ Not applicable

Section D: NIHSS (baseline)			
D1a	Level of consciousness (LOC)	☐ 0 - Alert; keenly responsive ☐ 1 - Not alert; but arousable by minor stimulation ☐ 2 - Not alert; requires repeated stimulation ☐ 3 - Responds only with reflex motor or totally unresponsive	☐ Not done ☐ Not known
D1b	LOC questions (month and age)	☐ 0 - Answers both questions correctly ☐ 1 - Answers one question correctly ☐ 2 - Answers neither question correctly	☐ Not done ☐ Not known
D1c	LOC commands (open and close eyes; grip and release hand)	☐ 0 - Performs both tasks correctly ☐ 1 - Performs one task correctly ☐ 2 - Performs neither task correctly	☐ Not done ☐ Not known
D2	Best gaze (horizontal only, for isolated CN paresis score 1)	☐ 0 - Normal ☐ 1 - Partial gaze palsy ☐ 2 - Forced deviation	☐ Not done ☐ Not known
D3	Visual	☐ 0 - No visual loss ☐ 1 - Partial hemianopia ☐ 2 - Complete hemianopia ☐ 3 - Bilateral hemianopia	☐ Not done ☐ Not known

D4	Facial palsy	☐ 0 - Normal symmetrical movements ☐ 1 - Minor paralysis ☐ 2 - Partial paralysis ☐ 3 - Complete paralysis of one or both sides	☐ Not done ☐ Not known
D5a	Motor arm - left	☐ 0 - No drift ☐ 1 - Drift ☐ 2 - Some effort against gravity ☐ 3 - No effort against gravity ☐ 4 - No movement	☐ Not done ☐ Not known
	Explanation if untestable (e.g. amputation or joint fusion)	_____	
D5b	Motor arm - right	☐ 0 - No drift ☐ 1 - Drift ☐ 2 - Some effort against gravity ☐ 3 - No effort against gravity ☐ 4 - No movement	☐ Not done ☐ Not known
	Explanation if untestable (e.g. amputation or joint fusion)	_____	
D6a	Motor leg - left	☐ 0 - No drift ☐ 1 - Drift ☐ 2 - Some effort against gravity ☐ 3 - No effort against gravity ☐ 4 - No movement	☐ Not done ☐ Not known
	Explanation if untestable (e.g. amputation or joint fusion)	_____	
D6b	Motor leg - right	☐ 0 - No drift ☐ 1 - Drift ☐ 2 - Some effort against gravity ☐ 3 - No effort against gravity ☐ 4 - No movement	☐ Not done ☐ Not known
	Explanation if untestable (e.g. amputation or joint fusion)	_____	
D7	Limb ataxia	☐ 0 - Absent ☐ 1 - Present in one limb ☐ 2 - Present in two limbs	☐ Not done ☐ Not known
	Explanation if untestable (e.g. amputation or joint fusion)	_____	
D8	Sensory	☐ 0 - Normal ☐ 1 - Mild-to-moderate sensory loss ☐ 2 - Severe to total sensory loss	☐ Not done ☐ Not known
D9	Best language	☐ 0 - No aphasia ☐ 1 - Mild-to-moderate aphasia ☐ 2 - Severe aphasia ☐ 3 - Mute, global aphasia	☐ Not done ☐ Not known
D10	Dysarthria	☐ 0 - Normal ☐ 1 - Mild-to-moderate dysarthria ☐ 2 - Severe dysarthria	☐ Not done ☐ Not known

	Explanation if untestable (e.g. intubated or other physical barrier)	_____	
D11	Extinction and inattention	☐ 0 - No abnormality ☐ 1 - Visual, tactile, auditory, spatial, or personal inattention ☐ 2 - Profound hemi-inattention or extinction to more than one modality	☐ Not done ☐ Not known

Section E: Day 1 post-treatment details

E1a	Was all randomised treatment received as per protocol?	☐ Yes ☐ No	☐ Not known
E1b	Date/time of treatment *(dd-mmm-yyyy hh:mm 24hr)*	D _____ / M _____ / Y _____ H _____ : M _____	☐ Not done ☐ Not known
E1c	Explanation if treatment not given as per protocol or data missing		☐ Not applicable

If any randomised treatment was not given due to a Serious Adverse Event, please remember to submit an SAE form.

Measures taken during infusion

		Systolic / Diastolic	
E2a	Blood pressure during infusion – reading 1	_____ / _____ mmHg	☐ Not done ☐ Not known
E2b	Blood pressure during infusion – reading 2	_____ / _____ mmHg	☐ Not done ☐ Not known
E2c	Heart rate during infusion – reading 1	_____ bpm	☐ Not done ☐ Not known
E2d	Heart rate during infusion – reading 2	_____ bpm	☐ Not done ☐ Not known

Measures/blood samples taken 1 hour after infusion

		Systolic / Diastolic	
E3a	Blood pressure after infusion – reading 1	_____ / _____ mmHg	☐ Not done ☐ Not known
E3b	Blood pressure after infusion – reading 2	_____ / _____ mmHg	☐ Not done ☐ Not known
E3c	Heart rate after infusion – reading 1	_____ bpm	☐ Not done ☐ Not known

E3d	Heart rate after infusion – reading 2	_____ bpm	☐ Not done ☐ Not known
E4a	Factor VIII (FVIII) and von Willebrand factor (vWF) sample taken and frozen as per protocol?	☐ Yes ☐ No	☐ Not known
E4b	If this blood sample was not taken 1 hour after treatment, please give the reason		☐ Not applicable

Please ensure that the follow-up CT scan and U+Es have both been requested to be taken on day 2

Are any values missing due to tests not done (or measures not taken), or because data are unknown and every effort has been made to find the data – i.e. 'Not done' / 'Not known'?	○ Yes ○ No
Comments If any values are missing, please provide a full explanation	