**BSRBR-RA**
Arthritis Research UK Centre for Epidemiology
The University of Manchester
BSGPharmacovigilance@manchester.ac.uk
**01616 275 1613**

**23 March 2017**

| | |
|---|---|
| **Study ID:** | **Gender:** |
| **HRN:** | **NHS Number:** |
| **Patient Initials:** | **Patient Date of Birth:** |

One of the primary objectives of BSRBR-RA has been to study the long-term safety of anti-TNF therapy and one of the most important outcomes has been death. We would be very grateful if you could provide the register with more details, where available, about the events leading up to and including the patient's death.

**Date of Death**:

**Please confirm cause of death:**

Did the event occur in hospital? Yes ☐ No ☐ Unknown ☐

If Yes please provide admission reason/date:

**Biologic/biosimilar at time of event (or last taken):**

Please provide start/stop dates & batch number if known:

Do you believe there is a possibility that this adverse event was related to the biologic drug used to treat RA? Yes ☐ No ☐ Unknown ☐

If **yes** please confirm biologic drug:

Please also complete any additional events of special interest forms relating to the patients cause of death e.g. MI ESI form. If you have no further information, please let us know so that we do not repeatedly trouble you for information that you do not have. Please contact the office if you have any queries about completing ESI forms (0161 275 1652/7390). Many thanks for your ongoing assistance and support.

Yours sincerely

The Pharmacovigilance Team