Participant name:	
Hospital ID:	
CHI/Date of Birth:	

SOPHIST - SOtagliflozin in Patients with Heart failure Symptoms and Type 1 Diabetes

Sponsor	University of Dundee-NHS Tayside
Chief Investigator	Dr Ify Mordi
IRAS number	1007807

Principal Investigator	
Contact number	
Contact email	

Visit 8

Date of visit: | | Participant trial ID | | | | | |

Please tick to indicate the following have been completed:

Confirmed participant's identity	
Participant has verbally given their consent to continue in the trial	
Concomitant medications have been reviewed	
Adverse events have been reviewed	
Education/review of glucose and ketone management undertaken including hypoglycaemic and DKA events, glucose/ketone readings, and insulin doses	

NYHA Class	

The following must be filed in the participant's medical notes:

- Changes to concomitant medications since last visit
- Any adverse events since last visit
- Details of review of diabetes management including any changes to insulin or other diabetes medication
- Any hypoglycaemic and DKA events since last visit
- Any other notable findings and actions taken
- If the participant was withdrawn from the trial at this visit, document reason

Any further information of note:

Participant name:	
Hospital ID:	
CHI/Date of Birth:	

Visit has been carried out as per protocol

Signature:	
Name:	
Job title:	
Date:	