\*Date information collected:

Answer the following items on this form about the participant’s /subject’s functional status *prior to the subarachnoid hemorrhage (SAH) event*.

1. \*\*Modified Rankin Scale score:

1. \*\*\*Cranial nerve score:

## General Instructions

This case report form (CRF) is intended to collect data about the participant’s/ subject’s functional status prior to the SAH event. However, the data elements may be appropriate to collect at subsequent time points to assess the participant’s/ subject’s function status after the SAH event.

Important note: The elements on this CRF are considered Supplemental – Highly Recommended or Exploratory, as indicated by asterisks below:

\*\*Element is classified as Supplemental – Highly Recommended

\*\*\*Element is classified as Exploratory

## Specific Instructions

Please see the Data Dictionary for definitions for each of the data elements included in this CRF Module.

The data elements on this form may be obtained from the participant/subject, family and/or the medical record/chart. The CRF includes all other instructions available for the data elements at this time.