

**BSPAR Etanercept Cohort Study**

**Eligible and not included in the study**

**(not asked/refused)**

**Today’s Date: \_\_\_/\_\_\_/\_\_\_\_\_\_**

|  |  |
| --- | --- |
| Year of Birth |  |
| Gender |  |
| Ethnicity |  |
| Diagnosis |  |
| Reason for  non‐recruitment |  |

*Please* ***do not*** *enter any identifiable information about the patient above.*

**Thank you!**

If you have any questions about this please don’t hesitate to contact Emily Sutton

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