**Frequently asked questions for the GODIF trial and the eCRF**

**The eCRF:**

The fluid balance on day form 1 is what your chart say for the end of this day (do not calculate for the included hours), but fluid balance on the last day form must be calculated to fit the time of discharge.

Diuresis must be calculated for the included hours on day form 1 and the last day form, since these days are shorter than 24 hours.

When a patient gets discharged or die - fill out the discharge form before the last day form. This will set the timestamp for the last day correct.

**Frequently asked questions:**

*If a patient does not reach the daily goal for fluid removal even max trial drug is running – can I give extra furosemide or other diuretics*?

Open label diuretics is only allowed if the escape criteria are fulfilled and the treating team finds it necessary to administer extra diuretics. If the patient receives diuretics at home before admittance, these may be restarted. Remember that only furosemide as tablet can be converted to IV in equivalent dose (50% reduced dose). In case the patient develops hypernatremia, thiazides are allowed on the indication to treat hypernatremia alone. This must be noted in the file.

*If a patient with respiratory failure is on an open system and I want to see if the patients fulfill the escape criterion how should I calculate it?*

On the homepage under trial documents -> instructions or use this link <http://www.cric.nu/godif-fio2-conversion-table-for-open-systems-danish/> the conversion table is only in Danish for now. An English version will follow.

*What do I do if a patient experiences a SAE/SAR?*

Report it in the day form and send a mail to [godif@cric.nu](mailto:godif@cric.nu) and describe if it had any impact on the trial (as stopping the trial or pausing the medicine) and how it was handled (e.g. watchful waiting, treated the condition with xxx and continued the trial, paused the medicine, stopped the trial ect.). You are always welcome to phone us on the hotline +45 48296773 if you would like to discuss the case or ask for advice according to the trial.