UNIVERSITY OF LEICESTER

UoL Sponsored Multi Centre Non CTIMP
Serious Adverse Event Listing Table

Sponsor Reference Number		**Principal Investigator:**
Study Title		

Study Centre	**Date of SAE**	**Patient Study ID**	**Date Study Team Aware**	**Brief Description of Event**	**Assessment of relationship to procedure/intervention Related/Unrelated**	**Assessment of relationship to Investigational device Related/Unrelated**	**Outcome**	**Date of event resolution**