



British Society for Rheumatology

Rheumatoid Arthritis Register

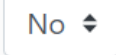
Registering a New Patient

Comorbidity

Continue to **Comorbidity** via the side menu bar.

Patient	Comorbidity
Patient summary	Please confirm whether the patient has <u>ever</u> reported any of the comorbidities below <input type="button" value="↕"/>
CBQ	High blood pressure <input type="checkbox"/>
Consent	Angina <input type="checkbox"/>
Disease Activity	Heart attack (Myocardial infarction) <input type="checkbox"/>
Biologic Targeted Therapy	Stroke <input type="checkbox"/>
Other Current Therapy	Epilepsy <input type="checkbox"/>
Previous Biologics / DMARDs / Steroids	Asthma <input type="checkbox"/>
Comorbidity	Chronic bronchitis/emphysema (COPD) <input type="checkbox"/>
Additional Info	Peptic Ulcer <input type="checkbox"/>
COVID-19 Vaccine	Renal disease <input type="checkbox"/>
HRQoL	Liver disease <input type="checkbox"/>
HAQ	Tuberculosis <input type="checkbox"/>
EuroQOL	Demyelination <input type="checkbox"/>
Other	Diabetes <input type="checkbox"/>
Preview Queries	Hyperthyroidism <input type="checkbox"/>
	Depression <input type="checkbox"/>
	Cancer <input type="checkbox"/>
	Pulmonary Embolism / DVT <input type="checkbox"/>
	Heart Failure <input type="checkbox"/>
	<input type="button" value="TUTORIAL"/> <input type="button" value="SAVE AND ADVANCE"/>

If the patient has no comorbidities select **No comorbidities** and **Save and Advance**.

Patient	Comorbidity
Patient summary	Please confirm whether the patient has <u>ever</u> reported any of the comorbidities below
CBQ	No 
Consent	High blood pressure <input type="checkbox"/>
Disease Activity	Angina <input type="checkbox"/>
Biologic Targeted Therapy	Heart attack (Myocardial infarction) <input type="checkbox"/>
Other Current Therapy	Stroke <input type="checkbox"/>
Previous Biologics / DMARDs / Steroids	Epilepsy <input type="checkbox"/>
Comorbidity	Asthma <input type="checkbox"/>
Additional Info	Chronic bronchitis/emphysema (COPD) <input type="checkbox"/>
COVID-19 Vaccine	Peptic Ulcer <input type="checkbox"/>
HRQoL	Renal disease <input type="checkbox"/>
HAQ	Liver disease <input type="checkbox"/>
EuroQOL	Tuberculosis <input type="checkbox"/>
Other	Demyelination <input type="checkbox"/>
Preview Queries	Diabetes <input type="checkbox"/>
	Hyperthyroidism <input type="checkbox"/>
	Depression <input type="checkbox"/>
	Cancer <input type="checkbox"/>
	Pulmonary Embolism / DVT <input type="checkbox"/>
	Heart Failure <input type="checkbox"/>
	TUTORIAL SAVE AND ADVANCE
	1 Select No
	2 Click Save and Advance

→ Continue to Additional Info

If the patient has comorbidities please select **Yes** and click on all comorbidities that apply.
Click **Save and Advance** to continue.

Patient	Comorbidity
Patient summary	Please confirm whether the patient has <u>ever</u> reported any of the comorbidities below <input type="text" value="Yes"/> 1 Select Yes comorbidity
CBQ	High blood pressure <input checked="" type="checkbox"/>
Consent	Angina <input type="checkbox"/>
Disease Activity	Heart attack (Myocardial infarction) <input type="checkbox"/>
Biologic Targeted Therapy	Stroke <input type="checkbox"/>
Other Current Therapy	Epilepsy <input type="checkbox"/>
Previous Biologics / DMARDs / Steroids	Asthma <input checked="" type="checkbox"/>
Comorbidity	Chronic bronchitis/emphysema (COPD) <input type="checkbox"/>
Additional Info	Peptic Ulcer <input type="checkbox"/>
COVID-19 Vaccine	Renal disease <input type="checkbox"/>
HRQoL	Liver disease <input type="checkbox"/>
HAQ	Tuberculosis <input type="checkbox"/>
EuroQOL	Demyelination <input type="checkbox"/>
Other	Diabetes <input type="checkbox"/>
Preview Queries	Hyperthyroidism <input type="checkbox"/>
	Depression <input type="checkbox"/>
	Cancer <input type="checkbox"/>
	Pulmonary Embolism / DVT <input type="checkbox"/>
	Heart Failure <input type="checkbox"/>
	<input type="button" value="TUTORIAL"/> <input type="button" value="SAVE AND ADVANCE"/> 3 Click Save and Advance

2 Click all that apply

→ Continue to Additional Info