

PATIENT:

BADBIR ID:

HRN:

DOB:

BIOLOGIC / CONVENTIONAL TREATMENT:



**BIR**  
Biologic Interventions Register

**Event of Special Interest: Hepatitis B Reactivation**

Any further  
Event Details

Peak ALT:

Hepatitis B DNA titre	Please complete the following relating to the current event and prior hepatitis if known:					
	Current			Pre registration with BADBIR		
Positive/Negative.Not tested:	+ve	-ve	Not tested	+ve	-ve	Not tested
HBcAb (core antibody)						
HBsAb (surface antibody)						
HBsAg (surface antigen)						
HBeAg (envelope antigen)						

**If you have any questions please call the Register office on: 0161 306 1911**

Form completed

By: \_\_\_\_\_

On: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Please note this ESI form needs to be entered directly onto the BADBIR database in the adverse section