Participant ID: _____. Date: _____/_____/_____.

Termination Vaccination Status
Group 2 Non-randomized Participants

Date of Study Exit: _____/_____/_____
DD MMM YYYY

For Group 2 participants who were terminated because "Participant limit has been met for 15-month group", please answer the questions below:

1. Did participant receive the **Nimenrix** vaccine as part of the study termination procedures?
   - NO. List reason in comment section
   - **YES**

     Date Nimenrix vaccine given____/_____/_____
     DD MMM YYYY
2. Did participant receive the **Measles-Rubella** vaccine as part of the study termination procedures?
   - NO. List reason in comment section
   - **YES**

     Date Measles-Rubella vaccine given____/_____/_____
     DD MMM YYYY

COMMENTS: (max 200 characters):

_____
_____
_____
_____
_____

Completed by: _____ Date Completed: _____/_____/_____
Print Name **DD MMM YYYY**

Termination Vaccination Status:

Use only when the primary termination reason for a participant is "Participant limit has been met for 15-month group" on the Study Termination form.

Purpose:
This form documents Nimenrix and Measles-Rubella vaccination status for Group 2 participants who would like to continue in the study but were terminated because the participant limit was met for Group 2 Step 2 randomization.

General Instructions:
When a Group 2 participant's "Primary reason for completion/discontinuation" on the Study Termination form is "Participant limit has been met for 15 month group" complete this form. Provide date of exit from the study and complete the fields for each vaccine. Additional relevant information can be recorded in the Comments section.

Field-specific Instructions:

Field	Instructions
Date of Study Exit	The date participant terminated from the study. A complete date is required and should match date entered on Study Termination form
Did participant receive the **Nimenrix** vaccine as part of the study termination procedures?	If "**No**": record reason why participant did not receive **Nimenrix** vaccine in Comments section If "**Yes**": record date **Nimenrix** vaccine was given to participant, a complete date is required
Did participant receive the **Measles-Rubella** vaccine as part of the study termination procedures?	If "**No**": record reason why participant did not receive **Measles-Rubella** vaccine in Comments section If "**Yes**": record date **Measles-Rubella** vaccine was given to participant, a complete date is required
Comments	Provide any pertinent details in this field, if applicable. A maximum of 200 characters are allowed.