Table of trial procedures

	Screening phase	Treatment phase				Follow up phase		
		Study Day 1	Morning of Study Day 2	Morning of Study Day 3	Morning of Study Day 4	Discharge	Re-admission	3 Months after study start dose
Informed consent	X							
In- and exclusion criteria	X							
Randomization	X							
Demographics[1]	X							
Medical history	X							
Vitals[2]	X		X	X	X			X
Weight[12]	X		X	X	X	X		X
EQ5D	X				X		X[11]	X
Volume assessment	X		X	X	X	X		X
Study treatment		X[3]	X[4]	X[4]				
Urinary collection[5]		X	X					
Local lab	X[6]		X[7]	X[7]	X[7]			X[7]
Laboratory sub-study[13] blood	X				X[14]			X
Laboratory sub-study[13] Urine		X	X					
Plasma BNP or NT-proBNP[8]	X				X			X
Urine pregnancy testing[9]	X							
Dose of neurohumoral blockers	X				X	X		X
Dose of diuretics	X					X		X
Concomitant medication	X	X	X	X	X			
Adverse Events[10]	X	X	X	X	X	X	X	X

1) Age, race and ethnicity
2) Arterial blood pressure and heart rate
3) Start dose (IV) = 2 x orally daily maintenance dose of loop diuretics and 500 mg acetazolamide or placebo (see section 8)
4) As long as patient is volume overloaded, Treatment dose (IV) = half of start dose of loop diuretics and 500 mg acetazolamide or placebo between 8:00 and 12:00 and a second dose minimum 6 hours later with half of the start dose of loop diuretics (see section 8)
5) See appendix 4
6) Serum hemoglobin, hematocrit, electrolytes (Na, K, Cl, HCO_3), serum osmolality, serum urea, serum Cr, total protein, serum albumin, Fe, ferritin, TSAT, LDH and troponin
7) Serum hemoglobin, hematocrit, electrolytes (Na, K, Cl, HCO_3), serum urea, serum Cr and serum albumin
8) Protocol requires that plasma levels of BNP or NT-proBNP are collected. In case the patient is on succubutril/valsartan, it is mandatory that NT-proBNP plasma levels are determined on the blood sample.
9) Only pre- menopausal women who are not surgically sterile, as well as women of childbearing potential.
10) Safety reporting flow is documented in section 9
11) EQ5-D needs to be collected once during any HF readmission (as soon as possible during readmission))
12) Measurement of body weight should be performed as consistently as possible using a standardized scale, preferably with a precision of 50 g, in the morning, post-void, prior to eating, prior to the medication dose, and with patients wearing the same clothing. The scales should stand on a flat, solid surface rather than carpets unless specifically designed for use in that setting
13) Blood and urine will be collected in a subset of randomized patients participating in the laboratory sub-study. Blood will be collected on screening, day 4 and 3 month FU visit. Urine sample will be collected from Urinary Collection period 1 and Urinary collection period 2 (see also appendix 4).
14) In case day 4 falls into a weekend or public holiday, blood collection for sub-study can also be done on day 5 or day 6.