



Comparison of Age-related Macular
Degeneration Treatments Trials
Baseline Ocular Assessment

BA (009.1)
10/19/2007
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ID. No.: ____ - ____ Alpha Code: ____

Clinic #: ____ Week: 000

INSTRUCTIONS: An ocular examination is required in the **STUDY EYE** within 7 days prior to randomization.

1. Intraocular Pressure (Study Eye)

____ mm Hg →

**If IOP > 25 mmHg, STOP!
This patient is ineligible!**

2. Anterior Segment (Study Eye)

()₀ Normal ()₁ Abnormal →

Indicate areas of abnormality:

2a. Lids/Conjunctiva Abnormal()₁
2b. Cornea Abnormal()₁
2c. Anterior Chamber Abnormal()₁
2d. Iris Abnormal()₁

3. Lens Status (Study Eye)

- ☐₀ Phakic
☐₁ IOL
☐₂ Aphakic

2e. Describe abnormalities:

4. Vitreous Haze (Study Eye)

- ☐₀ Grade 0 (No haze)
☐₁ Trace (Slight blurring of optic disc margin)
☐₂ Grade 1+ (Slightly blurred optic nerve and vessels)
☐₃ Equal to or worse than Grade 2+ →

**STOP!
Patient is Ineligible**

5. Other than CNV, are there any other posterior
segment/fundus/optic disc abnormalities in the Study Eye?

- ☐₀ No
☐₁ Yes →
☐₂ Can't Determine

5a. Describe abnormalities



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6. Is there a history of uveitis or inflammation
in the Study Eye?

☐₀ No

☐₁ Yes

7. Is there a history of CNV or active CNV in
the **NON-STUDY** eye?

☐₀ No

☐₁ Yes

7A. Specify past CNV treatment(s) in
Non-Study eye: (check all that
apply)

a. No treatment ()₁

b. Lucentis® ()₁

c. Avastin® ()₁

d. PDT ()₁

e. Triamcinolone ()₁

f. Macugen ()₁

g. VEGF trap ()₁

h. Thermal laser ()₁

i. Other, specify below:

1. _____ ()₁

8. Initials and certification number of person who completed this form

a. Initials: ____

b. Certification #: ____

9. Date of Examination

____ / ____ / 20____
Month Day Year