



CATT FOLLOW-UP STUDY

AMD Care Review

CR (107.1)

10/24/2013

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ID. No.: ____ - ____ - ____ Alpha Code: ____ - ____ - ____

Instructions: Question 1 should be completed based on your center's medical records. Question 2 should be completed after discussion with the patient about eye care received for AMD since the last CATT visit.

1. Please review available medical records at your center (including all offices) since the last CATT visit. Has the patient had visits for AMD care at your practice since the last CATT visit?

☐₀ No

☐₁ Yes →

Please complete the AMD Internal Visit Log.

2. Has the patient had any eye care for AMD since the last CATT visit from doctors for whom accessing records require a medical release form?

☐₀ No

☐₁ Yes →

Complete the AMD External Care Review

3. Last name and certification number of person who completed this form:

a. PRINT Last Name: _____

b. Certification #: ____ - ____ - ____ - ____

4. Date form was completed:

____ - ____ - **201**____
Month Day Year