



CATT FOLLOW-UP STUDY Follow-up Visit Status Form

SF (101.2)

07/18/2014

Page 1 of 1

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

Instructions: This form must be completed by the Clinic Coordinator for each CATT patient that was enrolled and alive by the end of the CATT week 104 window. During the initial study, if there was a Patient Death Form completed, this form is not required.

Please complete this form for all patients when they complete their follow-up visit or, if they do not complete the follow-up visit, by the end of the follow-up visit window.

Further data entry into the CATT Follow-up Study database cannot begin before the patient provides consent! For patients unable to physically come to the office, verbal consent must be obtained for an interview by telephone.

1. Enter Alpha Code: ____

2. Which is the study eye?

Right()₀ Left ()₁

3. Did the patient complete an in-clinic Follow-Up Visit?

☐₁ Yes →

3a. Date consent form signed:

____ / ____ / 20____

☐₀ No →

3b. If no, check one best reason:

☐₁ Alive, consent not obtainable

☐₂ Known to be alive, but could not contact

☐₃ Patient deceased
(please complete Patient Death Form)

☐₄ Unknown patient status

☐₅ Other,
a. Specify: _____

☐₆ Cannot come to clinic but agreed to a
telephone interview (complete a telephone
interview form)

4. Last name & certification number of person
completing form

a. Print Last Name: _____

b. Certification #: _____

5. Date form completed:

____ / ____ / 201____
Month Day Year