



Follow-up Study

Follow-Up Visit Grading of Study Eye

FSES 008.3
05/21/2014
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ID: {PREPRINTED} Alpha Code: {PREPRINTED} Visit: 260

STUDY EYE: {PREPRINTED}

Color Photographs Date: {PREPRINTED} Fluorescein Angiogram Date: {PREPRINTED}

I. GRADEABILITY OF IMAGES		Color Photographs				Fluorescein Angiogram			
		Good ₁	Fair ₂	Poor ₃	MP ₄	Good ₁	Fair ₂	Poor ₃	MF ₄
1. Focus/Clarity		☐	☐	☐	☐	☐	☐	☐	☐
2. Stereopsis		☐	☐	☐	☐	☐	☐	☐	☐

II. LESION FEATURES AT FOLLOW-UP		None	Ques.	Yes	CG
1. Active CNV (leakage on angiogram)		☐ ₀	☐ ₁	☐ ₂	☐ ₃
2. Scarring		☐ ₀	☐ ₁	☐ ₂	☐ ₃

a. Fibrotic Scar	☐ ₀	☐ ₁	☐ ₂	☐ ₃
b. Non-fibrotic Scar	☐ ₀	☐ ₁	☐ ₂	☐ ₃

3. Non-geographic atrophy							☐ _0	☐ _1	☐ _2						☐ _3
4. Hemorrhage contiguous with lesion (Intra or sub-retinal)*							☐ _0	☐ _1	☐ _2						☐ _3
5. SPED contiguous with CNV lesion*							☐ _0	☐ _1	☐ _2						☐ _3
6. Fluid (Intraretinal or subretinal)							☐ _0	☐ _1	☐ _2						☐ _3
7. RPE Tear involving macula (<3000μ from fovea)							☐ _0	☐ _1	☐ _2						☐ _3
8. RAP Lesion^							☐ _0	☐ _1	☐ _2						☐ _3
9. Pathology in foveal center	Fluid Only	CNV	SPED	Fibrotic Scar	GA	Hem.	RPE Tear	Other	No Path.	CD	CG	Bl. Fl.	Non-Geo. Atrophy	Non-Fibrotic Scar	
Choose only 1	☐ _1	☐ _2	☐ _3	☐ _4	☐ _5	☐ _6	☐ _7	☐ _8	☐ _9	☐ _10	☐ _11	☐ _12	☐ _13	☐ _14	

*Lesion includes contiguous hemorrhage, SPED scar, blocked fluorescence, and/or GA as part of the lesion. * If Hemorrhage or SPED is present but not contiguous with the lesion then the answer is None. ^RAP Lesion: Intra-retinal fluorescein leakage (IRFL) or questionable IRFL and (Intra-retinal hemorrhage and/or anastomosis)

III. OTHER FEATURES AT FOLLOW-UP		None	Ques.	Subf.	Not Subf.	CD	CG
1. Geographic atrophy in Study Eye		☐ ₀	☐ ₁	☐ ₂	☐ ₃	☐ ₄	☐ ₅
2. Geographic atrophy in Fellow Eye		☐ ₀	☐ ₁	☐ ₂	☐ ₃	☐ ₄	☐ ₅
3. New separate area of CNV in Study Eye		☐ ₀	☐ ₁	☐ ₂	☐ ₃	☐ ₄	☐ ₅
4. CNV in Fellow Eye (CNV or Scar)		☐ ₀	☐ ₁	☐ ₂	☐ ₃	☐ ₄	☐ ₅
5. Patchy choroidal filling		☐ ₀	☐ ₁	☐ ₂	☐ ₃	☐ ₄	☐ ₅
6. Other conditions		☐ ₀	☐ ₁	☐ ₂	☐ ₃	☐ ₄	☐ ₅
6a. Specify code # if Ques. or Yes	6a.1 _____ 6a.2 _____ 6a.3 _____						
7. Comments	7a Study Eye						
	7b. Fellow Eye						

Grader: {PREPRINTED} Grade Date: ____/____/201____

☐ Data Entry Complete _____