



Follow-Up Visit Grading of Study Eye Consensus

(form) FSES 008.2
(formdate) 07/09/09
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STUDY EYE: (studyeye)

I. GRADEABILITY OF IMAGES	Color Photographs (pqual_focus pqual_stereopsis)				Fluorescein Angiogram (faqual_focus faqual_stereopsis)			
	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) (CNV_active_studyeye)					☐ ₀		☐ ₁		☐ ₂					☐ ₃
2. Scarring (fibrotic or disciform) (atrophic_proportion)					☐ ₀		☐ ₁		☐ ₂					☐ ₃
3. Non-geographic atrophy (nongeo)					☐ ₀		☐ ₁		☐ ₂					☐ ₃
4. Hemorrhage contiguous with lesion (Intra or sub-retinal)* (hemorrhage_contiguous)					☐ ₀		☐ ₁		☐ ₂					☐ ₃
5. SPED contiguous with CNV lesion* (SPED_proportion)					☐ ₀		☐ ₁		☐ ₂					☐ ₃
6. Fluid (Intraretinal or subretinal) (fluid_present)					☐ ₀		☐ ₁		☐ ₂					☐ ₃
7. RPE Tear involving macula (<3000μ from fovea) (retinal_tear_studyeye)					☐ ₀		☐ ₁		☐ ₂					☐ ₃
8. RAP Lesion^ (RAP_lesion)					☐ ₀		☐ ₁		☐ ₂					☐ ₃
9. Pathology in foveal center Choose only 1 (num_pathology)		Fluid Only ☐ ₁	CNV ☐ ₂	SPED ☐ ₃	Fibrotic Scar ☐ ₄	GA ☐ ₅	Hem. ☐ ₆	RPE Tear ☐ ₇	Other ☐ ₈	No Path. ☐ ₉	CD ☐ ₁₀	CG ☐ ₁₁	Bl. Fl. ☐ ₁₂	Non-geo. Atrophy ☐ ₁₃

*Lesion includes contiguous hemorrhage and/or SPED and/or scar and/or blocked fluorescence. * 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 (geotrophy_studyeye)				☐ ₀	☐ ₁	☐ ₂	☐ ₃	☐ ₄	☐ ₅
2. Geographic atrophy in Fellow Eye (geotrophy_felloweye)				☐ ₀	☐ ₁	☐ ₂	No FE photos. ☐ ₃		CG ☐ ₄
3. CNV in Fellow Eye (CNV or Scar) (CNV_felloweye)				☐ ₀	☐ ₁	☐ ₂	No FE photos. ☐ ₃		CG ☐ ₄
4. Other conditions (other_studyeye)				☐ ₀	☐ ₁	☐ ₂			CG ☐ ₃
4a. Specify code # if Ques. or Yes	4a. ₁ ____	4a. ₂ ____	4a. ₃ (othnum_studyeye_3)						
5. Comments	5a Study Eye _____)								
	5b. Fellow Eye _____								

Color Photographs Date: (days_to_colors)

Fluorescein Angiogram Date: (days_to_fa)

☐ Data Entry Complete

ID#
Name Code: (alpha_code)
WEEK# : (week)