

	#	Variable / Field Name	Field Label <i>Field Note</i>	Field Attributes (Field Type, Validation, Choices, Calculations, etc.)						
Instrument: Participant Identifiers (participant_identifiers)										
	1	[subjid]	Local ID: <i>XXXX-XX-XXX (project#-site#-patient#)</i>	text						
	2	[idinst1]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** Green instructional text for data management personnel has been added throughout this template database as hidden descriptive variables. These variables should be removed from the study prior to being placed into production.	descriptive Field Annotation: @HIDDEN						
	3	[idinst2]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** Update the variable ID for the GUID when a GUID generator has been determined. For example, if NDAR is the GUID generator that was chosen, the variable name could be updated to [ndarguid]. Please also update the GUID field label to make it clear, e.g., "NDAR Global Unique Identifier (GUID):"	descriptive Field Annotation: @HIDDEN						
	4	[xxxxguid]	Global Unique Identifier (GUID):	text						
	5	[idusrid]	User ID:	text Field Annotation: @USERNAME @HIDDEN						
	6	[participant_identifiers_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete									
1	Unverified									
2	Complete									
Instrument: Visit Date (visit_date)										
	7	[visdat]	Visit Date <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today) Field Annotation: [visdat]						
	8	[visusrid]	User ID:	text Field Annotation: @USERNAME @HIDDEN						
	9	[visit_date_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete									
1	Unverified									
2	Complete									
Instrument: Informed Consent (informed_consent)										
	10	[rfinst1]	***DO NOT INCLUDE IN PRODUCTION DATABASE*** Informed consent/assent has been removed from the demographics form and added to its own form that is now set to repeatable. The intent of this repeating form is to document each time consent and/or assent is signed throughout the conduct of the study. The two fields on this form are intended to document the site under which the consent/assent was signed. Though infrequent, it is possible for a participant to transfer sites and the only way to capture which site the consent/assent was signed under is by using these variables. They will default to the DAG that the record is currently assigned. The site can change this if needed to accommodate the above-mentioned scenarios. It is imperative that the "Unique group name" value from the DAGs in your project is used as the coded value in your dropdown list to ensure the DEFAULT action tag works properly. Test this thoroughly. Lastly, remove all sites from the list that ARE NOT a part of the study being built. For example, if only CCHMC and CHOP are sites in the study, all other sites should be removed from the picklist.	descriptive Field Annotation: @HIDDEN						

11	[rficloc]	What is the site location for which this Informed Consent/Parental Permission/Assent was signed?WARNING: This field will default to the site the record is assigned to, and it should only ever be changed if the documentation was - for any reason - collected and signed at another site in the study.	<div>dropdown (autocomplete), Required</div> <table><tr><td>aavaangioma_allian</td><td>Angioma Alliance</td></tr><tr><td>achcalberta_childr</td><td>Alberta Children's Hospital</td></tr><tr><td>achoakron_children</td><td>Akron Children's Hospital Ohio</td></tr><tr><td>afcwamerican_famil</td><td>American Family Children's Hospital</td></tr><tr><td>ahscalberta_health</td><td>Alberta Health Services</td></tr><tr><td>aidhalfred_i_dupon</td><td>Alfred I. duPont Hospital for Children/Nemours</td></tr><tr><td>amskasan_medical_c</td><td>Asan Medical Center South Korea</td></tr><tr><td>archarkansas_child</td><td>Arkansas Children's Hospital</td></tr><tr><td>armiarbor_research</td><td>Arbor Research Collaborative for Health</td></tr><tr><td>audkaarhus_univers</td><td>Aarhus University</td></tr><tr><td>augaaugusta_georgi</td><td>Augusta (Georgia Health Science) University</td></tr><tr><td>auslazienda_unita</td><td>Azienda Unita Sanitaria Locale di Reggio Emilia</td></tr><tr><td>bchcucsf_benioff_c</td><td>UCSF Benioff Children's Hospital</td></tr><tr><td>bchmboston_childre</td><td>Boston Children's Hospital</td></tr><tr><td>bcmtbaylor_college</td><td>Baylor College of Medicine</td></tr><tr><td>bidmbeth_israel_de</td><td>Beth Israel Deaconess Medical Center</td></tr><tr><td>biotbiotec</td><td>Biotec</td></tr><tr><td>bjmobarnesjewish_h</td><td>Barnes-Jewish Hospital</td></tr><tr><td>bmcmboston_medical</td><td>Boston Medical Center</td></tr><tr><td>bmohbeverly_medica</td><td>Beverly Medical</td></tr><tr><td>bmscbristolmyers_s</td><td>Bristol-Myers Squibb Company</td></tr><tr><td>bnipbarrow_neurolo</td><td>Barrow Neurological Institute Phoenix</td></tr><tr><td>bumcboston_univers</td><td>Boston University Medical Center</td></tr><tr><td>bwhhbrigham_and_wo</td><td>Brigham and Women's Hospital</td></tr><tr><td>cadsclnica_alemana</td><td>Clínica Alemana de Santiago</td></tr><tr><td>cbnicarlo_bestane</td><td>Carlo Besta Neurological Institute</td></tr><tr><td>cchmcincinnati_chi</td><td>Cincinnati Children's Hospital Medical Center</td></tr><tr><td>ccmbcancercare_man</td><td>CancerCare Manitoba</td></tr><tr><td>ccmccohen_children</td><td>Cohen Children's Medical Center of New York</td></tr><tr><td>ccohcleveland_clin</td><td>Cleveland Clinic</td></tr><tr><td>cctxcook_childrens</td><td>Cook Children's Medical Center</td></tr><tr><td>cgchsaint_louis_un</td><td>Saint Louis University, Cardinal Glennon Children's Hospital</td></tr><tr><td>chalchildrens_hosp</td><td>Children's Hospital of Alabama</td></tr><tr><td>chcochildrens_hosp</td><td>Children's Hospital Colorado</td></tr><tr><td>chlchildrens_hosp</td><td>Children's Hospital Los Angeles</td></tr><tr><td>chnechildrens_hosp</td><td>Children's Hospital & Medical Center Omaha</td></tr><tr><td>chnonew_orleans_ch</td><td>New Orleans Children's Hospital</td></tr><tr><td>choachildrens_heal</td><td>Children's Healthcare of Atlanta</td></tr><tr><td>chocchildrens_hosp</td><td>Children's Hospital of Orange County</td></tr><tr><td>chopchildrens_hosp</td><td>Children's Hospital of Philadelphia</td></tr><tr><td>chorchildrens_hosp</td><td>Children's Hospital & Research Center Oakland</td></tr><tr><td>chppchildrens_hosp</td><td>Children's Hospital of Pittsburgh</td></tr><tr><td>chuschu_saintejust</td><td>CHU Sainte-Justine</td></tr><tr><td>chwichchildrens_hosp</td><td>Children's Hospital of Wisconsin</td></tr></table>	aavaangioma_allian	Angioma Alliance	achcalberta_childr	Alberta Children's Hospital	achoakron_children	Akron Children's Hospital Ohio	afcwamerican_famil	American Family Children's Hospital	ahscalberta_health	Alberta Health 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chwichchildrens_hosp	Children's Hospital of Wisconsin																																																																																										

chwschildrens_hosp	Children's Hospital at Westmead
cimrcoriell_instit	Coriell Institute for Medical Research
cmcdchildrens_medi	Children's Medical Center Dallas
cmncarolinas_medi	Carolinas Medical Center
cmhnmchildrens_merc	Children's Mercy Hospital
cnmcchildrens_nati	Children's National Medical Center
cpmccalifornia_pac	California Pacific Medical Center
cscrcuresearch_for	CureSearch for Children's Cancer
csmccedars_sinai_m	Cedars Sinai Medical Center
csmmcs_mott_childr	C.S. Mott Children's Hospital
ctcmconnecticut_ch	Connecticut Children's Medical Center
cumccolumbia_unive	Columbia University
cwbcchildrens__wom	Children's & Women's Health Centre of British Columbia
cwohcase_western_r	Case Western Reserve University
dchhduke_childrens	Duke Children's Hospital
dchodornbecher_chi	Dornbecher Children's Hospital
dumcduke_universit	Duke University Medical Center
ebrcevans_biomedic	Evans Biomedical Center
ekutuniversity_of	University of Tübingen
eugaemory_universi	Emory University
fdarfda	FDA
fhcrfred_hutchinso	Fred Hutchinson Cancer Research Center
gchrgolisano_child	Golisano Children's Hospital Rochester
ggcsgreenwood_gene	Greenwood Genetic Center
goshgreat_ormond_s	Great Ormond Street Hospital for Children
gpingovind_ballabh	Govind Ballabh Pant Institute
gumcgeorgetown_uni	Georgetown University Medical Center
gwudgeorge_washing	George Washington University
hcmchennepin_count	Hennepin County Medical Center
hfdmhenry_ford_hos	Henry Ford Hospital Detroit
hhtmcare_hht	Cure HHT
hmcppenn_state_her	Penn State Hershey Medical Center
hnsmhofstra_northw	Hofstra Northwell School of Medicine
hscthospital_sick	Hospital Sick Children Toronto
hssnhospital_for_s	Hospital for Special Surgery
huclharborucla_med	Harbor-UCLA Medical Center
humaharvard_univer	Harvard University
humchackensack_uni	Hackensack University Medical Center
inbnnih_intramural	NIH Intramural Neurogenetics Branch
ismmicahn_school_o	Icahn School of Medicine at Mount Sinai
iubindiana_univer	Indiana University
jhacall_childrens	All Children's Hospital
jhshjohn_h_stroger	John H. Stroger Hospital of Cook County
jhumjohns_hopkins	Johns Hopkins University
jmfljackson_memori	Jackson Memorial Hospital

jmuwjulius_maximil	Julius Maximilians University of Würzburg
jschjoseph_m_sanza	Joseph M. Sanzari Children's Hospital
kkmdkennedy_kriege	Kennedy Krieger Institute
kumckansas_univers	Kansas University Medical Center
labrlos_angeles_bi	Los Angeles Biomedical Research Institute
lhcann__robert_h	Ann & Robert H. Lurie Children's Hospital of Chicago
lcncllevine_childre	Levine Children's Hospital
lfbbleuven_belgium	Leuven Belgium
lhmalahay_hospital	Lahey Hospital and Medical Center
lkhblkh_bregenz	LKH Bregenz
lpchlucile_packard	Lucile Packard Children's Hospital Stanford
lsnolouisiana_stat	Louisiana State University Health Sciences Center New Orleans
lsuslouisiana_stat	Louisiana State University Health Sciences Center at Shreveport
lthuleeds_teaching	Leeds Teaching Hospital
luselund_universit	Lund University
mccnmayo_clinic_ch	Mayo Clinic Children's Center
mchcmattel_childre	Mattel Children's Hospital
mchtmethodist_chil	Methodist Children's Hospital of South Texas
mcrfmarshfield_cli	Marshfield Clinic Research Foundation
mcrmmayo_clinic_ro	Mayo Clinic Rochester
mcwimedical_colleg	Medical College of Wisconsin
mecmmontifiorealbe	Montifiore/Albert Einstein College of Medicine
mfchmaria_fareri_c	Maria Fareri Children's Hospital
mghmmassachusetts	Massachusetts General Hospital
mgucmcgill_univers	McGill University
mkkemedius_klinik	Medius Klinik Kirchheim
mmucmcmasters_univ	McMasters University
mnyunew_york_unive	New York University School of Medicine
mpacmary_pack_arth	Mary Pack Arthritis Centre
mrtxhouston_method	Houston Methodist Research Institute
mschmorgan_stanley	Morgan Stanley Children's Hospital
mshtmt_sinai_hospi	Mt. Sinai Hospital Toronto
mskcmemorial_sloan	Memorial Sloan Kettering Cancer Center
msnymount_sinai_be	Mount Sinai Beth Israel New York
muscmmedical_univer	Medical University of South Carolina
muwimarquette_univ	Marquette University
nchsnemours_childr	Nemours Children's Health System Orlando
ncuenewcastle_univ	Newcastle University
nhlbnational_heart	National Heart, Lung, and Blood Institute
nhnnnational_hospi	National Hospital for Neurology and Neurosurgery
nhnynorthwell_heal	Northwell Health

niainational_insti	National Institute of Allergy and Infectious Diseases
niamnational_insti	National Institute of Arthritis and Musculoskeletal and Skin Diseases
nidcnational_insti	National Institutes of Dental Craniofacial Research
niddnational_insti	National Institute of Diabetes and Digestive and Kidney Diseases
nihmnational_insti	National Institutes of Health
nimhnational_insti	National Institutes of Mental Health
njhcnational_jewis	National Jewish Health
nkipnephcure_inter	NephCure International
nufsnorthwestern_u	Northwestern University Feinberg School of Medicine
nuhenottingham_uni	Nottingham University Hospitals NHS Trust
nwchnationwide_chi	Nationwide Children's Hospital
nymcnew_york_medic	New York Medical College
ochbchildrens_hosp	Children's Hospital of Buffalo
ohsuoregon_health	Oregon Health & Science University
osfmosf_saint_fran	OSF Saint Francis Medical Center
oslooslo_universit	Oslo University Hospital
ouhnoxford_univers	Oxford University Hospital NHS Trust
pchaphoenix_childr	Phoenix Children's Hospital
pcutprimary_childr	Primary Children's Hospital
pdbhprovincia_di_b	Provincia di Brescia Hospital
pmdcparkinsons_mov	Parkinson's Movements Disorders Center of Maryland
ppmcprovidence_por	Providence Portland Medical Center
pshfpitalalptrire	Pitié-Salpêtrière Hospital
raharoyal_hospital	Royal Hospital Adelaide
rbchcleveland_rain	Cleveland Rainbow Babies & Children's Hospitals
rbheroyal_berkshir	Royal Berkshire Hospital
rchsrad_y_childrens	Rady Children's Hospital San Diego
rcinriley_hospital	Riley Hospital for Children
rimuresearch_insti	Research Institute of MUHC
rkuhuniversitt_hei	Universität Heidelberg
rushrush_universit	Rush University Medical Center
rvhmroyal_victoria	Royal Victoria Hospital
sahnst_antonius_ho	St. Antonius Hospital Nieuwegein
sbpdsanford_burnha	Sanford Burnham Prebys Medical Discovery Institute
sccaseattle_cancer	Seattle Cancer Care Alliance
schwseattle_childr	Seattle Children's Hospital
sfcistead_family_c	Stead Family Children's Hospital
sghcscripps_clinic	Scripps Clinic/Scripps Green Hospital
shcishriners_hospi	Shriners Hospital for Children Chicago
shcmshriners_hospi	Shriners Hospital for Children Montreal
shctshriners_hospi	Shriners Hospital for Children Tampa

shfcshriners_hospi	Shriners Hospital for Children
shmcsacred_heart_m	Sacred Heart Medical Center
shscsunnybrook_he	Sunnybrook Health Sciences Centre
sjchst_jude_childr	St. Jude Children's Research Hospital
sjhcst_josephs_hos	St. Joseph's Hospital Health Care London
sjhhst_josephs_he	St. Joseph's Healthcare Hamilton
slchst_louis_child	St. Louis Children's Hospital
smhcst_michaels_ho	St. Michael's Hospital Toronto
snuhseoul_national	Seoul National University Hospital
sphbst_pauls_hospi	St. Paul's Hospital British Columbia
spnjst_peters_univ	St. Peter's University Hospital
sucastanford_unive	Stanford University
sunysuny_upstate_m	SUNY Upstate Medical University
svuhst_vincent's_un	St. Vincent's University Hospital
swftsturgeweber_fo	Sturge-Weber Foundation
tchhtexas_children	Texas Children's Hospital
testtest_dag	Test DAG
tghotoronto_genera	Toronto General Hospital
thfrthe_halpin_fou	The Halpin Foundation
tjupthomas_jeffers	Thomas Jefferson University
tkecedmonton_clini	Edmonton Clinic
tohcthe_ottawa_hos	The Ottawa Hospital
tosuthe_ohio_state	The Ohio State University
ttimtexas_transpla	Texas Transplant Institute San Antonio
tulatulane_univers	Tulane University
tumctufts_universi	Tufts University Medical Center
tusmtemple_univers	Temple University School of Medicine
twcatoronto_wester	Toronto Western Hospital
uamsuniversity_of	University of Arkansas for Medical Sciences
uaukuniversity_of	University of Aberdeen
ubccuniversity_of	University of British Columbia
ubnyuniversity_at	University at Buffalo
ucchuniversity_of	University of Cologne Children's Hospital
uchzuniversity_chi	University Children's Hospital Zurich
uciluniversity_of	University of Chicago
ucituniversity_of	University of Cagliari
uclauniversity_of	University of California at Los Angeles
ucleuniversity_col	University College London
ucmcuniversity_hos	University Hospitals Cleveland Medical Center
ucohuniversity_of	University of Cincinnati
uconuconn_health	UConn Health
ucsduniversity_of	University of California San Diego
ucsfuniversity_of	University of California San Francisco
ucukcambridge_univ	Cambridge University
ueaeuniversity_of	University of East Anglia

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uihiuniversity_of	University of Illinois Health
ukeguniversity_med	University Medical Center Hamburg-Eppendorf
ulkyuniversity_of	University of Louisville
umchuniversity_of	University of Minnesota Masonic Children's Hospital
umfluniversity_of	University of Miami
umkcuniversity_of	University of Missouri Kansas City
ummcuniversity_of	University of Mississippi Medical Center
ummduniversity_of	University of Maryland Baltimore
unmcuniversity_of	University of Nebraska Medical Center
unmhuniversity_of	University of New Mexico Health Sciences Center
uoabuniversity_of	University of Antwerp
uoacuniversity_of	University of Alberta
uoaluniversity_of	University of Alabama at Birmingham
uocauniversity_of	University of Calgary
uocouniversity_of	University of Colorado
uoctuniversity_of	University of Cape Town
uofiuniversity_of	University of Florence
uofluniversity_of	University of Florida
uoiauniversity_of	University of Iowa
uoicuniversity_of	University of Illinois at Chicago
uoipuniversity_of	University of Illinois at Peoria
uokyuniversity_of	University of Kentucky
uolguniversity_of	University of Luebeck
uomiuniversity_of	University of Michigan
uomnuniversity_of	University of Minnesota
uoncuniversity_of	University of North Carolina at Chapel Hill
uopauniversity_of	University of Pennsylvania
uopiuniversity_of	University of Parma
uosfuniversity_of	University of South Florida
uotiuniversit_di_t	Università di Torino
uoutuniversity_of	University of Utah
uovauniversity_of	University of Virginia
uowauniversity_of	University of Washington
upfruniversit_de_p	Université de Paris
upituniversity_of	University of Pittsburgh
urituniversity_of	University of Rome
urnyuniversity_of	University of Rochester
usaauniversity_of	University of South Alabama
usccuniversity_of	University of Southern California
uthhuniversity_of	University of Texas Health Science Center at Houston
utmbuniversity_of	University of Texas Medical Branch Galveston
utsauniversity_of	University of Texas Health Sciences Center San Antonio
utswuniversity_of	University of Texas Southwestern Medical Center
uwwiuniversity_of	University of Wisconsin
varivan_andel_rese	Van Andel Research Institute
vcuvirginia_commo	Virginia Commonwealth University

				<table><tr><td>vntnveracity_neuro</td><td>Veracity Neuroscience</td></tr><tr><td>vutnvanderbilt_uni</td><td>Vanderbilt University</td></tr><tr><td>wcmcweill_cornell</td><td>Weill Cornell Medical College</td></tr><tr><td>wepawills_eye_hosp</td><td>Wills Eye Hospital</td></tr><tr><td>wfsmwake_forest_sc</td><td>Wake Forest School of Medicine</td></tr><tr><td>wmauwestmead_hospi</td><td>Westmead Hospital</td></tr><tr><td>wsumwayne_state_un</td><td>Wayne State University</td></tr><tr><td>wushashington_uni</td><td>Washington University St. Louis</td></tr><tr><td>yusmyale_school_of</td><td>Yale School of Medicine</td></tr></table> Field Annotation: @DEFAULT='[record-dag-name]'	vntnveracity_neuro	Veracity Neuroscience	vutnvanderbilt_uni	Vanderbilt University	wcmcweill_cornell	Weill Cornell Medical College	wepawills_eye_hosp	Wills Eye Hospital	wfsmwake_forest_sc	Wake Forest School of Medicine	wmauwestmead_hospi	Westmead Hospital	wsumwayne_state_un	Wayne State University	wushashington_uni	Washington University St. Louis	yusmyale_school_of	Yale School of Medicine
vntnveracity_neuro	Veracity Neuroscience																					
vutnvanderbilt_uni	Vanderbilt University																					
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wmauwestmead_hospi	Westmead Hospital																					
wsumwayne_state_un	Wayne State University																					
wushashington_uni	Washington University St. Louis																					
yusmyale_school_of	Yale School of Medicine																					
12	[rficconf] Show the field ONLY if: [rfidoc]<>"	Please check this box to indicate that the site listed above is correct:	checkbox, Required <table><tr><td>1</td><td>rficconf__1</td><td>By checking this box, I am confirming the site listed above is correct.</td></tr></table>	1	rficconf__1	By checking this box, I am confirming the site listed above is correct.																
1	rficconf__1	By checking this box, I am confirming the site listed above is correct.																				
13	[rfinst4]	***DO NOT INCLUDE IN PRODUCTION DATABASE*** If the study will NOT have minor participants, it is admissible to remove the "or Parental Permission" portion of the first checkbox option below as well as the other fields in which parental permission is referenced in the labels or options (e.g., [rfidoc] above).	descriptive Field Annotation: @HIDDEN																			
14	[rftype] Show the field ONLY if: [rficconf(1)]=1'	Please select the appropriate option(s) for documentation to record: <i>Choose all that apply.</i>	checkbox, Required <table><tr><td>1</td><td>rftype__1</td><td>Consent or Parental Permission Form</td></tr><tr><td>2</td><td>rftype__2</td><td>Assent</td></tr></table>	1	rftype__1	Consent or Parental Permission Form	2	rftype__2	Assent													
1	rftype__1	Consent or Parental Permission Form																				
2	rftype__2	Assent																				
15	[rficdat] Show the field ONLY if: [rficconf(1)]=1' and [rftype(1)]=1'	Section Header: <i>Consent or Parental Permission</i> What was the date Informed Consent or Parental Permission was signed? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [dscat][dssdtc]																			
16	[rficwho] Show the field ONLY if: [rficconf(1)]=1' and [rftype(1)]=1'	Who signed consent or parental permission?	radio, Required <table><tr><td>1</td><td>Study Participant/Self</td></tr><tr><td>2</td><td>Parent/Legal Guardian</td></tr></table>	1	Study Participant/Self	2	Parent/Legal Guardian															
1	Study Participant/Self																					
2	Parent/Legal Guardian																					
17	[rfinst2]	***DO NOT INCLUDE IN PRODUCTION DATABASE*** The consent version AND parental permission variables below are set to a drop-down; however, only the possible versions of each should be available in the dropdown based on the site identified. ADDITIONALLY, each site in the study should have its own consent and/or parental permission version variable(s). This is due to the fact that each site will have its own unique combinations. Thus, if a site has had 3 versions of consent and two versions of parental permission, and another has had 5 and 3, the sites should ONLY see the options that apply based on the site indicated in the question at the top of the form. Because of this, ensure the branching logic is appropriate for each site-specific variable so that the correct options are being displayed based on site. If new versions of the consent or parental permission are released for ANY site, a Change Request must be initiated to add the new version to the dropdown list that corresponds to that site. The dropdown list below is designed with the intention that the consent form for the sites will have a unique Version AND Effective/Approval Date combination and thus they were combined into one field to eliminate unnecessary variables. If it is determined that a site's consent does not have both of these components, at least one (version or date) of them must be readily available for the site to select and the dropdown list specific to that site should reflect this. Lastly, it is known that some studies may have sites in which assent/parental permission/consent are all combined into one document (most ideal), and others in which a site might have separate documents for all three. The DMCC DM team must work with the study team and DMCC project managers to make these determinations in order to properly flesh out this form. Remember that assent versions are not required to be documented because assent does not document data use and storage elections, whereas consents and parental permissions may.	descriptive Field Annotation: @HIDDEN																			
18	[rficvr01] Show the field ONLY if: [rficconf(1)]=1' and [rftype(1)]=1' and [rficwho]=1'	What was the Version/Date of the informed consent that was signed?	dropdown (autocomplete), Required <table><tr><td>1</td><td>Version 1, Dated: 10DEC2021 (**Example ICF**)</td></tr></table>	1	Version 1, Dated: 10DEC2021 (**Example ICF**)																	
1	Version 1, Dated: 10DEC2021 (**Example ICF**)																					

19	[rfpvr01] Show the field ONLY if: [rficconf(1)]=1' and [rftype(1)]=1' and [rficwho]=2'	What was the Version/Date of the parental permission form that was signed?	dropdown (autocomplete), Required 1 Version 1, Dated: 10DEC2021 (**Example PPF**)
20	[rfasdat] Show the field ONLY if: [rficconf(1)]=1' and [rftype(2)]=1'	Section Header: <i>Assent</i> What was the date Assent was signed? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [dscat][dssdtc]
21	[rficfe] Show the field ONLY if: [rficconf(1)]=1'	Section Header: <i>Electronic Consent (eConsent)</i> Was an eConsent signed?	yesno, Required 1 Yes 0 No
22	[rfinst3]	Section Header: <i>Storage and Use of Samples or Data in Other Research Studies</i> ***DO NOT INCLUDE IN PRODUCTION DATABASE*** This section should be updated to reflect the version-specific data use elections in the consent and/or parental permission form and branching logic should be used to show the correct questions based on the version selected above. (The current questions are simply examples.) These will be found in the informed consent forms/parental permission forms for the sites participating in the study. Any changes to any questions post-production should result in the creation of a new variable to document the new question text/label and to ensure historical responses for previous versions are not impacted. In some studies, there may not be any data use restrictions or elections. If this is the case, this section can be removed altogether; retain the variable RFDESC1 at that bottom (this should always be present). The options available in the fields below are examples ONLY and should be updated accordingly for the study. Note that is completely acceptable to "reuse" a question insofar as that question is posed exactly the same across/between versions determining the branching logic.	descriptive Field Annotation: @HIDDEN
23	[rfdua01] Show the field ONLY if: [rficvr01]=1'	Allow my baby's information and/or specimens to be stored and used for other microbial or genetic research?	radio, Required 1 Agree 2 Does Not Agree
24	[rfdua03] Show the field ONLY if: [rfppvr01]=1'	Allow my baby's information and/or specimens to be stored and used for other microbial or genetic research?	radio, Required 1 Agree 2 Does Not Agree
25	[rfdua02] Show the field ONLY if: [rficvr01]=1'	Allow my pregnancy/birthing information to be collected for this study?	radio, Required 1 Agree 2 Does Not Agree
26	[rfdua04] Show the field ONLY if: [rfppvr01]=1'	Allow my pregnancy/birthing information to be collected for this study?	radio, Required 1 Agree 2 Does Not Agree
27	[rfdesc1]	Section Header: Please add a new Informed Consent form to document EACH time consent, assent, or both are signed.	descriptive
28	[rfusrid]	User ID:	text Field Annotation: @USERNAME @HIDDEN
29	[informed_consent_complete]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete
Instrument: Eligibility Criteria (eligibility_criteria)			
30	[ieinst2]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** If you wish, you can include the list of inclusion and exclusion criteria from the protocol here in a descriptive field, so that the full list is "viewable" on this form. If you do, be sure to update the text for this field to black font and unhide this field.	descriptive Field Annotation: @HIDDEN
31	[ieyn]	Were all eligibility criteria met? <i>Record "Yes" if all eligibility criteria were met at the time the subject was enrolled.</i> <i>Record "No" if subject did not meet all criteria at the time the subject was enrolled.</i>	yesno, Required 1 Yes 0 No Custom alignment: RH
32	[ieusrid1]	User ID:	text Field Annotation: @USERNAME @HIDDEN

	33	[eligibility_criteria_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete														
0	Incomplete																							
1	Unverified																							
2	Complete																							
Instrument: Inclusion/Exclusion Criteria Not Met (inclusionexclusion_criteria_not_met)																								
	34	[iedesc1] Show the field ONLY if: [ieyn]='0'	Please indicate the category and identifier of the criterion exception.	descriptive																				
	35	[iecat] Show the field ONLY if: [ieyn]='0'	What was the category of the criterion not met? <i>Please select only one response. Record whether the criterion exception was "Inclusion" or "Exclusion."</i>	radio, Required <table border="1"> <tr><td>1</td><td>Inclusion</td></tr> <tr><td>2</td><td>Exclusion</td></tr> </table>	1	Inclusion	2	Exclusion																
1	Inclusion																							
2	Exclusion																							
	36	[ieinst1]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** The pick-list should be updated/amended, as appropriate, based on protocol and to ensure that the protocol and/or any IE worksheets are not renumbered with subsequent protocol amendments. As a reminder: as the protocol is updated throughout the life of the study, ensure that the study team does not renumber existing criteria. Once a number has been assigned, it should never change. Any changes to protocol I/E criteria should ALWAYS result in a new number.	descriptive Field Annotation: @HIDDEN																				
	37	[ietstcd] Show the field ONLY if: [iecat]="1"	What was the identifier of the inclusion criterion the subject did not meet? <i>Please select only one response.</i>	dropdown, Required <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3</td></tr> <tr><td>4</td><td>4</td></tr> <tr><td>5</td><td>5</td></tr> <tr><td>6</td><td>6</td></tr> <tr><td>7</td><td>7</td></tr> <tr><td>8</td><td>8</td></tr> <tr><td>9</td><td>9</td></tr> <tr><td>10</td><td>10</td></tr> </table> Field Annotation: [ietstcd]	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10
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2	2																							
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5	5																							
6	6																							
7	7																							
8	8																							
9	9																							
10	10																							
	38	[ieetstcd] Show the field ONLY if: [iecat]="2"	What was the identifier of the exclusion criterion the subject did meet? <i>Please select only one response.</i>	dropdown, Required <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3</td></tr> <tr><td>4</td><td>4</td></tr> <tr><td>5</td><td>5</td></tr> <tr><td>6</td><td>6</td></tr> <tr><td>7</td><td>7</td></tr> <tr><td>8</td><td>8</td></tr> <tr><td>9</td><td>9</td></tr> <tr><td>10</td><td>10</td></tr> </table> Field Annotation: [ieetstcd]	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10
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5	5																							
6	6																							
7	7																							
8	8																							
9	9																							
10	10																							
	39	[ieexempt] Show the field ONLY if: [iecat]<>""	Was an exemption granted for the participant to continue in the study for not meeting this criterion?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																
1	Yes																							
0	No																							
	40	[iedesc5] Show the field ONLY if: [ieexempt]='0'	The response indicates that the participant was not granted a waiver to participate and should NOT BE ELIGIBLE for this study. Please review the response or consider the participant as ineligible.	descriptive																				
	41	[iedesc2] Show the field ONLY if: [ieyn]='0'	If more than one criterion was not met at the time the subject was enrolled, please add a new instance of this form to document each.	descriptive																				

	42	<div>[iedesc3]</div> <div>Show the field ONLY if: [ieyn]='1'</div>	Since it was indicated on the "[form-link:eligibility_criteria]" form that all enrollment criteria for this participant were met, this form is intentionally left blank and should be saved with a "Complete" form status.	descriptive																		
	43	<div>[iedesc4]</div> <div>Show the field ONLY if: [ieyn]="</div>	Please complete the "[form-link:eligibility_criteria]" form before attempting to complete this form.	descriptive																		
	44	<div>[ieusrid2]</div>	User ID:	text Field Annotation: @USERNAME @HIDDEN																		
	45	<div>[inclusionexclusion_criteria_not_met_complete]</div>	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete												
0	Incomplete																					
1	Unverified																					
2	Complete																					
Instrument: Demographics (demographics)																						
	46	<div>[brthdat]</div>	What is the subject's date of birth? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required, Identifier Field Annotation: BRTHDTC																		
	47	<div>[age]</div>	What is the subject's age?	text (integer, Min: 0, Max: 89), Required Field Annotation: [age]; Update range, as applicable or necessary.																		
	48	<div>[ageu]</div>	What is the age unit used? <i>Please select only one response. Record the appropriate age unit (e.g., YEARS, MONTHS, WEEKS, etc.).</i>	dropdown, Required <table><tr><td>1</td><td>YEARS</td></tr><tr><td>2</td><td>MONTHS</td></tr><tr><td>3</td><td>WEEKS</td></tr><tr><td>4</td><td>DAYS</td></tr><tr><td>5</td><td>HOURS</td></tr></table> Field Annotation: AGEU	1	YEARS	2	MONTHS	3	WEEKS	4	DAYS	5	HOURS								
1	YEARS																					
2	MONTHS																					
3	WEEKS																					
4	DAYS																					
5	HOURS																					
	49	<div>[dminst1]</div>	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** Use AGE and AGEU only if BRHDAT is not allowed due to regulatory requirements. Update the ranges on the AGE variable, as appropriate, for the study. If AGE is expected to be collected in only one specified unit of measure (e.g., YEARS), then AGEU can be removed and the unit of measure added to the field label of AGE (e.g., "What is the subject's age in years?")	descriptive Field Annotation: @HIDDEN																		
	50	<div>[sex]</div>	What is the sex of the subject? <i>Please select only one response.</i>	radio, Required <table><tr><td>1</td><td>Male</td></tr><tr><td>2</td><td>Female</td></tr><tr><td>3</td><td>Undifferentiated</td></tr><tr><td>33</td><td>Not Reported/Unknown</td></tr></table> Field Annotation: sex	1	Male	2	Female	3	Undifferentiated	33	Not Reported/Unknown										
1	Male																					
2	Female																					
3	Undifferentiated																					
33	Not Reported/Unknown																					
	51	<div>[ethnic]</div>	Do you consider yourself Hispanic/Latino or not Hispanic/Latino? <i>Please select only one response. Study participants should self-report ethnicity, with ethnicity being asked about before race.</i>	radio, Required <table><tr><td>1</td><td>Hispanic or Latino</td></tr><tr><td>2</td><td>Not Hispanic or Latino</td></tr><tr><td>33</td><td>Not Reported/Unknown</td></tr></table> Field Annotation: ethnic	1	Hispanic or Latino	2	Not Hispanic or Latino	33	Not Reported/Unknown												
1	Hispanic or Latino																					
2	Not Hispanic or Latino																					
33	Not Reported/Unknown																					
	52	<div>[race]</div>	Which of the following five racial designations best describes you? <i>Please choose all responses that apply. Study participants should self-report race, with race being asked about after ethnicity.</i>	checkbox, Required <table><tr><td>1</td><td>race__1</td><td>American Indian or Alaska Native</td></tr><tr><td>2</td><td>race__2</td><td>Asian</td></tr><tr><td>3</td><td>race__3</td><td>Black or African American</td></tr><tr><td>4</td><td>race__4</td><td>Native Hawaiian or Other Pacific Islander</td></tr><tr><td>5</td><td>race__5</td><td>White</td></tr><tr><td>33</td><td>race__33</td><td>Not Reported/Unknown</td></tr></table> Field Annotation: @NONEOFTHEABOVE=33	1	race__1	American Indian or Alaska Native	2	race__2	Asian	3	race__3	Black or African American	4	race__4	Native Hawaiian or Other Pacific Islander	5	race__5	White	33	race__33	Not Reported/Unknown
1	race__1	American Indian or Alaska Native																				
2	race__2	Asian																				
3	race__3	Black or African American																				
4	race__4	Native Hawaiian or Other Pacific Islander																				
5	race__5	White																				
33	race__33	Not Reported/Unknown																				
	53	<div>[dmusrid]</div>	User ID:	text Field Annotation: @USERNAME @HIDDEN																		

	54	[demographics_complete]	Section Header: Form Status Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete												
0	Incomplete																					
1	Unverified																					
2	Complete																					
Instrument: Subject Characteristics (subject_characteristics)																						
	55	[scinst1]	***DO NOT INCLUDE IN PRODUCTION DATABASE*** You can refer to the additional questions for Subject Characteristics (e.g. Social Determinants of Health), if needed, in the PhenX Toolkit found here: https://www.phenxtoolkit.org/sub-collections/view/30	descriptive Field Annotation: @HIDDEN																		
	56	[scperf]	Were subject characteristics collected? <i>Indicate if subject characteristics information was collected. If "Yes," include the appropriate details.</i>	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Field Annotation: [scperf]	1	Yes	0	No														
1	Yes																					
0	No																					
	57	[scedus] Show the field ONLY if: [scperf]='1'	What is the highest education level attained by the subject? <i>Please select only one response.</i>	dropdown, Required <table><tr><td>1</td><td>Less than Kindergarten</td></tr><tr><td>2</td><td>Kindergarten-6th Grade</td></tr><tr><td>3</td><td>7-9th Grade</td></tr><tr><td>4</td><td>10-11th Grade</td></tr><tr><td>5</td><td>High School Graduate/GED</td></tr><tr><td>6</td><td>Partial College or Trade School</td></tr><tr><td>7</td><td>College Graduate</td></tr><tr><td>8</td><td>Post Graduate Degree</td></tr><tr><td>33</td><td>Unknown/Not Reported</td></tr></table> Field Annotation: [sctest] [scorres] [edulevel]	1	Less than Kindergarten	2	Kindergarten-6th Grade	3	7-9th Grade	4	10-11th Grade	5	High School Graduate/GED	6	Partial College or Trade School	7	College Graduate	8	Post Graduate Degree	33	Unknown/Not Reported
1	Less than Kindergarten																					
2	Kindergarten-6th Grade																					
3	7-9th Grade																					
4	10-11th Grade																					
5	High School Graduate/GED																					
6	Partial College or Trade School																					
7	College Graduate																					
8	Post Graduate Degree																					
33	Unknown/Not Reported																					
	58	[scedup] Show the field ONLY if: [scperf]='1'	What is the highest education level attained by the subject's parent/guardian? <i>Please select only one response.</i>	dropdown, Required <table><tr><td>1</td><td>Less than Kindergarten</td></tr><tr><td>2</td><td>Kindergarten-6th Grade</td></tr><tr><td>3</td><td>7-9th Grade</td></tr><tr><td>4</td><td>10-11th Grade</td></tr><tr><td>5</td><td>High School Graduate/GED</td></tr><tr><td>6</td><td>Partial College or Trade School</td></tr><tr><td>7</td><td>College Graduate</td></tr><tr><td>8</td><td>Post Graduate Degree</td></tr><tr><td>33</td><td>Unknown/Not Reported</td></tr></table> Field Annotation: [sctest] [scorres] [edulevel] Note that CDISC submission value for the test code ([edulevel]) will need to be replaced. This is not currently and SCTEST code defined in SDTM Terminology.	1	Less than Kindergarten	2	Kindergarten-6th Grade	3	7-9th Grade	4	10-11th Grade	5	High School Graduate/GED	6	Partial College or Trade School	7	College Graduate	8	Post Graduate Degree	33	Unknown/Not Reported
1	Less than Kindergarten																					
2	Kindergarten-6th Grade																					
3	7-9th Grade																					
4	10-11th Grade																					
5	High School Graduate/GED																					
6	Partial College or Trade School																					
7	College Graduate																					
8	Post Graduate Degree																					
33	Unknown/Not Reported																					
	59	[scins] Show the field ONLY if: [scperf]='1'	What is the primary insurance provider? <i>Please select only one response.</i>	dropdown, Required <table><tr><td>1</td><td>Public</td></tr><tr><td>2</td><td>Private</td></tr><tr><td>3</td><td>Military</td></tr><tr><td>4</td><td>Self-pay</td></tr><tr><td>0</td><td>None</td></tr><tr><td>33</td><td>Unknown/Not Reported</td></tr></table> Field Annotation: [sctest] [scorres] [insur] This is not currently a SCTEST code defined in SDTM Terminology.	1	Public	2	Private	3	Military	4	Self-pay	0	None	33	Unknown/Not Reported						
1	Public																					
2	Private																					
3	Military																					
4	Self-pay																					
0	None																					
33	Unknown/Not Reported																					

60	<div>[scahhinc]</div> <div>Show the field ONLY if: [scperf]='1'</div>	<div>What is the total annual household income level?</div> <div>Please select only one response.</div>	<div>dropdown, Required</div> <table><tr><td>1</td><td>< \$24,999</td></tr><tr><td>2</td><td>\$25,000-\$49,999</td></tr><tr><td>3</td><td>\$50,000-\$74,999</td></tr><tr><td>4</td><td>\$75,000-\$99,999</td></tr><tr><td>5</td><td>\$100,000-\$149,999</td></tr><tr><td>6</td><td>> \$150,000</td></tr><tr><td>33</td><td>Unknown/Not Reported</td></tr></table> <div>Field Annotation: [sctest] [scores] [incmvl]</div>	1	< \$24,999	2	\$25,000-\$49,999	3	\$50,000-\$74,999	4	\$75,000-\$99,999	5	\$100,000-\$149,999	6	> \$150,000	33	Unknown/Not Reported																										
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2	\$25,000-\$49,999																																										
3	\$50,000-\$74,999																																										
4	\$75,000-\$99,999																																										
5	\$100,000-\$149,999																																										
6	> \$150,000																																										
33	Unknown/Not Reported																																										
61	<div>[schhind]</div> <div>Show the field ONLY if: [scperf]='1'</div>	<div>What is the total number of individuals in the household?</div> <div>Please select only one response.</div>	<div>dropdown (autocomplete), Required</div> <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr></table> <div>Field Annotation: [sctest] [scores] [tothouse] This is not currently a SCTEST code defined in SDTM Terminology.</div>	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20
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62	<div>[scusrid]</div>	<div>User ID:</div>	<div>text</div> <div>Field Annotation: @USERNAME @HIDDEN</div>																																								
63	<div>[subject_characteristics_complete]</div>	<div>Section Header: Form Status</div> <div>Complete?</div>	<div>dropdown</div> <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																																		
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1	Unverified																																										
2	Complete																																										
Instrument: Medical History Prompt (medical_history_prompt)																																											
64	<div>[mhyn]</div>	<div>Was there any medical history to record at study baseline?Record all relevant past and/or concomitant medical conditions and past surgeries, as defined in the protocol, on the following repeatable "Medical History Events" form(s). Record only one condition or surgery per form. When recording a condition and a surgery related to that condition, complete one form for the condition and one form for the surgery. Ensure that any of the conditions listed on the Medical History Events page(s) do not meet any of the exclusion criteria.</div> <div>Indicate if the subject experienced any medical conditions or events. If yes, include the appropriate details where indicated on the CRF.</div>	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <div>Custom alignment: RH</div> <div>Field Annotation: [mhyn]</div>	1	Yes	0	No																																				
1	Yes																																										
0	No																																										
65	<div>[mhusrid1]</div>	<div>User ID:</div>	<div>text</div> <div>Field Annotation: @USERNAME @HIDDEN</div>																																								
66	<div>[medical_history_prompt_complete]</div>	<div>Section Header: Form Status</div> <div>Complete?</div>	<div>dropdown</div> <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																																		
0	Incomplete																																										
1	Unverified																																										
2	Complete																																										
Instrument: Medical History Events (medical_history_events)																																											

67	[mhcat] Show the field ONLY if: [mhyn]='1'	What was the category of the medical history? <i>Please select only one response.</i>	dropdown (autocomplete), Required <table border="1"> <tr><td>1</td><td>HEENT</td></tr> <tr><td>2</td><td>Cardiovascular</td></tr> <tr><td>3</td><td>Respiratory</td></tr> <tr><td>4</td><td>Gastrointestinal</td></tr> <tr><td>5</td><td>Genitourinary</td></tr> <tr><td>6</td><td>Musculoskeletal</td></tr> <tr><td>7</td><td>Dermatological</td></tr> <tr><td>8</td><td>Neurologic</td></tr> <tr><td>9</td><td>Endocrine/Metabolic</td></tr> <tr><td>10</td><td>Hematology/Lymphatic</td></tr> <tr><td>11</td><td>Allergic/Immunologic</td></tr> <tr><td>999</td><td>Other</td></tr> </table> Field Annotation: [mhcat]	1	HEENT	2	Cardiovascular	3	Respiratory	4	Gastrointestinal	5	Genitourinary	6	Musculoskeletal	7	Dermatological	8	Neurologic	9	Endocrine/Metabolic	10	Hematology/Lymphatic	11	Allergic/Immunologic	999	Other
1	HEENT																										
2	Cardiovascular																										
3	Respiratory																										
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6	Musculoskeletal																										
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8	Neurologic																										
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10	Hematology/Lymphatic																										
11	Allergic/Immunologic																										
999	Other																										
68	[mhterm] Show the field ONLY if: [mhyn]='1'	What is the medical condition or event term? <i>Record all relevant medical conditions or events, as defined in the protocol. Record only one (1) medical condition or event per form. Ensure that the medical conditions or events listed on the Medical History page do not meet any of the exclusion criteria.</i>	text, Required <table border="1"> <tr> <td>BIOPORTAL:SNOMEDCT</td> <td>BIOPORTAL:SNOMEDCT</td> </tr> </table> Field Annotation: [mhterm]	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT																						
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT																										
69	[mhstdat] Show the field ONLY if: [mhyn]='1'	What is the medical event or condition start date? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [mhstdtc]																								
70	[mhongo] Show the field ONLY if: [mhyn]='1'	Is the medical condition or event ongoing within the reporting period? <i>Record the medical condition or event as ongoing ("Y") if it has not ended at the time of data collection. If the medical condition or event, is ongoing, the end date should be left blank.</i>	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH Field Annotation: [mhennrf] [mhentprt]	1	Yes	0	No																				
1	Yes																										
0	No																										
71	[mhendat] Show the field ONLY if: [mhongo]="0"	If not Ongoing, what was the medical event or condition end date? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required, Identifier Field Annotation: [mhendtc]																								
72	[mhdesc1] Show the field ONLY if: [mhyn]='1'	If more than one medical history event should be recorded, please add a new instance of this form to document each event.	descriptive																								
73	[mhdesc2] Show the field ONLY if: [mhyn]='0'	Since it was indicated on the "[form-link:medical_history_prompt]" form that there was no medical history or surgical history to record, this form is intentionally left blank and should be saved with a "Complete" form status.	descriptive																								
74	[mhdesc3] Show the field ONLY if: [mhyn]=""	Please complete the "[form-link:medical_history_prompt]" form before attempting to complete this form.	descriptive																								
75	[mhusrid2]	User ID:	text Field Annotation: @USERNAME @HIDDEN																								
76	[medical_history_events_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																		
0	Incomplete																										
1	Unverified																										
2	Complete																										

Instrument: **Medical History Specific** (medical_history_specific)

77	[mhinst1]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** This form is to be used as a template when studies require specific Medical History questions to be asked. If studies collect open-ended Medical Histories, use the other available template and create it as a repeating form. If both are used, that is acceptable. Notes on Setup: Where applicable, the following variables should be repeated for each specific Medical History Question and should be numbered such that the variables are linked to one Medical History Diagnosis: mhoccur01, mhcat01, mhterm01, mhstdat1, mhongo01, mhendat1. Subsequent variables would end in 02, then 03, etc. Additional variables can be added but should follow the numbering scheme so that data can be linked. For the "mhoccur" variables, insert the diagnosis term as defined in the SNOMED ontology. E.g., "History of Headache?" For the "mhcat" variables, use the @CALCTEXT action tag to insert one of the categories defined in the "mhcat" variable on the General Medical History template, as applicable. E.g. The category for "Headache" would be "Neurologic." For the "mhterm" variables, use the @CALCTEXT action tag to insert the SNOMED code associated with the Medical History Question being asked. E.g. If you were asking about "Headache," the SNOMED code should be "25064002."	descriptive Field Annotation: @HIDDEN				
78	[mhoccur1]	Section Header: <i>SNOMED Diagnosis Label #1</i> History of SNOMED Diagnosis Label #1? <i>Indicate if this has occurred/is occurring by selecting Yes or No.</i>	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH Field Annotation: [mhoccur]	1	Yes	0	No
1	Yes						
0	No						
79	[mhcat01] Show the field ONLY if: [mhoccur1] = '1'	Medical History Category:	text Field Annotation: @READONLY @CALCTEXT(if([mhoccur1]='1', 'Category', ''))				
80	[mhterm01] Show the field ONLY if: [mhoccur1] = '1'	Snomed Code:	text Field Annotation: @READONLY @CALCTEXT(if([mhoccur1]='1', 'SNOMED Code', '')) [mhterm]				
81	[mhstdat1] Show the field ONLY if: [mhoccur1] = '1'	What was the date of onset? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today)				
82	[mhongo01] Show the field ONLY if: [mhoccur1] = '1'	Is the condition ongoing within the reporting period?	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No
1	Yes						
0	No						
83	[mhendat1] Show the field ONLY if: [mhongo01] = '0'	If not ongoing, what was the date of resolution? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today)				
84	[mhoccur2]	Section Header: <i>SNOMED Diagnosis Label #2</i> History of SNOMED Diagnosis Label #2? <i>Indicate if this has occurred/is occurring by selecting Yes or No.</i>	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH Field Annotation: [mhoccur]	1	Yes	0	No
1	Yes						
0	No						
85	[mhcat02] Show the field ONLY if: [mhoccur2] = '1'	Medical History Category:	text Field Annotation: @READONLY @CALCTEXT(if([mhoccur2]='1', 'Category', ''))				
86	[mhterm02] Show the field ONLY if: [mhoccur2] = '1'	Snomed Code:	text Field Annotation: @READONLY @CALCTEXT(if([mhoccur2]='1', 'SNOMED Code', '')) [mhterm]				
87	[mhstdat2] Show the field ONLY if: [mhoccur2] = '1'	What was the date of onset? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today)				
88	[mhongo02] Show the field ONLY if: [mhoccur2] = '1'	Is the condition ongoing within the reporting period?	yesno <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No
1	Yes						
0	No						

89	<div>[mhendat2]</div> <div>Show the field ONLY if: [mhongo02] = '0'</div>	<div>If not ongoing, what was the date of resolution?</div> <div>Please record the date in MM-DD-YYYY format.</div>	text (date_mdy, Max: today)
90	<div>[mhoccur3]</div> <div>Show the field ONLY if: [mhongo02] = '0'</div>	<div>Section Header: SNOMED Diagnosis Label #3</div> <div>History of SNOMED Diagnosis Label #3?</div> <div>Indicate if this has occurred/is occurring by selecting Yes or No.</div>	<div>yesno, Required</div> <div><div>1 Yes</div><div>0 No</div></div> <div>Custom alignment: RH</div> <div>Field Annotation: [mhoccur]</div>
91	<div>[mhcat03]</div> <div>Show the field ONLY if: [mhoccur3] = '1'</div>	Medical History Category:	<div>text</div> <div>Field Annotation: @READONLY</div> <div>@CALCTEXT(if([mhoccur3]='1', 'Category', ''))</div>
92	<div>[mhterm03]</div> <div>Show the field ONLY if: [mhoccur3] = '1'</div>	Snomed Code:	<div>text</div> <div>Field Annotation: @READONLY</div> <div>@CALCTEXT(if([mhoccur3]='1', 'SNOMED Code', '')) [mhterm]</div>
93	<div>[mhstdat3]</div> <div>Show the field ONLY if: [mhoccur3] = '1'</div>	<div>What was the date of onset?</div> <div>Please record the date in MM-DD-YYYY format.</div>	text (date_mdy, Max: today)
94	<div>[mhongo03]</div> <div>Show the field ONLY if: [mhoccur3] = '1'</div>	Is the condition ongoing within the reporting period?	<div>yesno</div> <div><div>1 Yes</div><div>0 No</div></div> <div>Custom alignment: RH</div>
95	<div>[mhendat3]</div> <div>Show the field ONLY if: [mhongo03] = '0'</div>	<div>If not ongoing, what was the date of resolution?</div> <div>Please record the date in MM-DD-YYYY format.</div>	text (date_mdy, Max: today)
96	<div>[mhusrid3]</div>	User ID:	<div>text</div> <div>Field Annotation: @USERNAME @HIDDEN</div>
97	<div>[medical_history_specific_complete]</div>	<div>Section Header: Form Status</div> <div>Complete?</div>	<div>dropdown</div> <div><div>0 Incomplete</div><div>1 Unverified</div><div>2 Complete</div></div>

Instrument: Pregnancy Testing (pregnancy_testing)

98	<div>[lbpchdpo]</div> <div>Show the field ONLY if: [sex]='2'</div>	Is this participant of childbearing potential?	<div>yesno, Required</div> <div><div>1 Yes</div><div>0 No</div></div> <div>Custom alignment: RH</div>
99	<div>[lbpperf]</div> <div>Show the field ONLY if: [lbpchdpo]='1'</div>	Was pregnancy testing done?	<div>yesno, Required</div> <div><div>1 Yes</div><div>0 No</div></div> <div>Custom alignment: RH</div>
100	<div>[lbpndrea]</div> <div>Show the field ONLY if: [lbpperf]='0'</div>	If no, please indicate the reason why:	<div>text, Required</div> <div>Custom alignment: RH</div>
101	<div>[lbpmeth]</div> <div>Show the field ONLY if: [lbpperf] = '1'</div>	Pregnancy testing method:	<div>radio, Required</div> <div><div>1 Serum</div><div>2 Urine</div></div>
102	<div>[lbpdat]</div> <div>Show the field ONLY if: [lbpperf] = '1'</div>	Testing date:	<div>text (date_mdy, Max: today), Required</div>
103	<div>[lbporres]</div> <div>Show the field ONLY if: [lbpperf] = '1'</div>	Test results:	<div>radio, Required</div> <div><div>1 Positive</div><div>2 Negative</div><div>3 Inconclusive</div></div>
104	<div>[lbpusrid]</div>	User ID:	<div>text</div> <div>Field Annotation: @USERNAME @HIDDEN</div>

105	[pregnancy_testing_complete]	Section Header: <i>Form Status</i> Complete?	<div>dropdown</div> <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																																		
0	Incomplete																																										
1	Unverified																																										
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Instrument: Pregnancy History (pregnancy_history)																																											
106	[rpprgnu]	Section Header: <i>Pregnancy History - Record details of each pregnancy as a singular event with a unique pregnancy number below. For example: Each pregnancy, regardless of the outcome or number of births, will have one pregnancy history recorded. Add a new form/instance for each pregnancy to record.</i> Pregnancy Number:	<div>dropdown, Required</div> <table border="1"> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3</td></tr> <tr><td>4</td><td>4</td></tr> <tr><td>5</td><td>5</td></tr> <tr><td>6</td><td>6</td></tr> <tr><td>7</td><td>7</td></tr> <tr><td>8</td><td>8</td></tr> <tr><td>9</td><td>9</td></tr> <tr><td>10</td><td>10</td></tr> <tr><td>11</td><td>11</td></tr> <tr><td>12</td><td>12</td></tr> <tr><td>13</td><td>13</td></tr> <tr><td>14</td><td>14</td></tr> <tr><td>15</td><td>15</td></tr> <tr><td>16</td><td>16</td></tr> <tr><td>17</td><td>17</td></tr> <tr><td>18</td><td>18</td></tr> <tr><td>19</td><td>19</td></tr> <tr><td>20</td><td>20</td></tr> </table> <div>Custom alignment: RH</div>	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20
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20	20																																										
107	[rpoutcme]	Outcome of Pregnancy:	<div>dropdown, Required</div> <table border="1"> <tr><td>1</td><td>Live Birth</td></tr> <tr><td>2</td><td>Natural Abortion (Miscarriage)</td></tr> <tr><td>3</td><td>Termination</td></tr> <tr><td>4</td><td>Still Birth</td></tr> </table> <div>Field Annotation: Maps to RPORRES where RPTSTCD = "RPOUTCME"</div>	1	Live Birth	2	Natural Abortion (Miscarriage)	3	Termination	4	Still Birth																																
1	Live Birth																																										
2	Natural Abortion (Miscarriage)																																										
3	Termination																																										
4	Still Birth																																										
108	[rpmrage]	Mother's Age at Outcome (Years):	text (integer, Min: 12, Max: 50), Required																																								
109	[rpfather]	Father's Age at Outcome (Years): {rpfage:icons} OR Check if Father's age is unknown: {rpfageun:icons}	descriptive																																								
110	[rpfage] Show the field ONLY if: [rpfageun(33)] = "	Father's Age at Outcome (Years):	text (integer, Min: 15, Max: 80), Required																																								
111	[rpfageun] Show the field ONLY if: [rpfage]="	Father's Age - unknown:	<div>checkbox</div> <table border="1"> <tr> <td>33</td> <td>rpfageun__33</td> <td>Unknown</td> </tr> </table>	33	rpfageun__33	Unknown																																					
33	rpfageun__33	Unknown																																									
112	[rpgesage]	Gestational Age at Outcome (weeks):	text (integer, Min: 0, Max: 44), Required																																								
113	[rpmulti]	Did this pregnancy result in multiple births?	<div>yesno, Required</div> <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> <div>Custom alignment: RH</div>	1	Yes	0	No																																				
1	Yes																																										
0	No																																										
114	[rpbnum] Show the field ONLY if: [rpmulti] = '1'	If yes, number of births:	<div>dropdown, Required</div> <table border="1"> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>3</td></tr> <tr><td>4</td><td>4</td></tr> </table>	2	2	3	3	4	4																																		
2	2																																										
3	3																																										
4	4																																										

115	[rpmulnot] Show the field ONLY if: [rpmulti]='1'	If the pregnancy resulted in multiple births, each child should be recorded on a separate Birth History form.	descriptive																																	
116	[rpcmpyn]	Were there pregnancy complications?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																													
1	Yes																																			
0	No																																			
117	[rpcmpd] Show the field ONLY if: [rpcmpyn] = '1'	If yes, describe pregnancy complications:	checkbox, Required <table border="1"> <tr><td>1</td><td>rpcmpd__1</td><td>Premature rupture of membrane greater than 12 hours prior to delivery</td></tr> <tr><td>2</td><td>rpcmpd__2</td><td>Bleeding During Pregnancy</td></tr> <tr><td>3</td><td>rpcmpd__3</td><td>Infections or Other Acute Medical Problems During Pregnancy</td></tr> <tr><td>4</td><td>rpcmpd__4</td><td>Maternal Chronic Disease (Onset prior to pregnancy)</td></tr> <tr><td>5</td><td>rpcmpd__5</td><td>Chronic Drug Abuse (Onset prior to pregnancy)</td></tr> <tr><td>6</td><td>rpcmpd__6</td><td>Hypertension During Pregnancy (Score non-optimal if systolic is above 140 or diastolic is above 90)</td></tr> <tr><td>7</td><td>rpcmpd__7</td><td>Albuminuria</td></tr> <tr><td>8</td><td>rpcmpd__8</td><td>Hypermesis</td></tr> <tr><td>9</td><td>rpcmpd__9</td><td>Anemia</td></tr> <tr><td>10</td><td>rpcmpd__10</td><td>Rh Antagonism or Other Blood Group Incompatibility</td></tr> <tr><td>11</td><td>rpcmpd__11</td><td>Other</td></tr> </table>	1	rpcmpd__1	Premature rupture of membrane greater than 12 hours prior to delivery	2	rpcmpd__2	Bleeding During Pregnancy	3	rpcmpd__3	Infections or Other Acute Medical Problems During Pregnancy	4	rpcmpd__4	Maternal Chronic Disease (Onset prior to pregnancy)	5	rpcmpd__5	Chronic Drug Abuse (Onset prior to pregnancy)	6	rpcmpd__6	Hypertension During Pregnancy (Score non-optimal if systolic is above 140 or diastolic is above 90)	7	rpcmpd__7	Albuminuria	8	rpcmpd__8	Hypermesis	9	rpcmpd__9	Anemia	10	rpcmpd__10	Rh Antagonism or Other Blood Group Incompatibility	11	rpcmpd__11	Other
1	rpcmpd__1	Premature rupture of membrane greater than 12 hours prior to delivery																																		
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9	rpcmpd__9	Anemia																																		
10	rpcmpd__10	Rh Antagonism or Other Blood Group Incompatibility																																		
11	rpcmpd__11	Other																																		
118	[rppcpot] Show the field ONLY if: [rpcmpd(11)] = '1'	Describe other pregnancy complications:	notes, Required																																	
119	[rprenat1]	Did the mother receive prenatal care during the first half of pregnancy?	radio, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>2</td><td>No</td></tr> <tr><td>3</td><td>Unknown</td></tr> </table> Custom alignment: RH	1	Yes	2	No	3	Unknown																											
1	Yes																																			
2	No																																			
3	Unknown																																			
120	[rpasspreg]	Was this an assisted pregnancy (in vitro fertilization, or other procedure)?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No																													
1	Yes																																			
0	No																																			
121	[rpmeth]	Delivery Method:	radio, Required <table border="1"> <tr><td>1</td><td>Vaginal</td></tr> <tr><td>2</td><td>Planned C-Section</td></tr> <tr><td>3</td><td>Emergency C-Section</td></tr> </table>	1	Vaginal	2	Planned C-Section	3	Emergency C-Section																											
1	Vaginal																																			
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122	[rpusrid1]	Data Entry User ID	text Field Annotation: @USERNAME @HIDDEN																																	
123	[pregnancy_history_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete																											
0	Incomplete																																			
1	Unverified																																			
2	Complete																																			

Instrument: **Birth History** (birth_history)

124	[rpprgnub]	<div>Section Header: Birth Details - Record the details of each individual live birth below. The Pregnancy number here should match the corresponding pregnancy history event. For example: twins would each have their own birth details recorded but will have the same pregnancy number.</div> <div>Pregnancy Number:</div>	<div>dropdown, Required</div> <table><tr><td>1</td><td>1</td></tr><tr><td>2</td><td>2</td></tr><tr><td>3</td><td>3</td></tr><tr><td>4</td><td>4</td></tr><tr><td>5</td><td>5</td></tr><tr><td>6</td><td>6</td></tr><tr><td>7</td><td>7</td></tr><tr><td>8</td><td>8</td></tr><tr><td>9</td><td>9</td></tr><tr><td>10</td><td>10</td></tr><tr><td>11</td><td>11</td></tr><tr><td>12</td><td>12</td></tr><tr><td>13</td><td>13</td></tr><tr><td>14</td><td>14</td></tr><tr><td>15</td><td>15</td></tr><tr><td>16</td><td>16</td></tr><tr><td>17</td><td>17</td></tr><tr><td>18</td><td>18</td></tr><tr><td>19</td><td>19</td></tr><tr><td>20</td><td>20</td></tr></table> <div>Custom alignment: RH</div>	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9	10	10	11	11	12	12	13	13	14	14	15	15	16	16	17	17	18	18	19	19	20	20
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18	18																																										
19	19																																										
20	20																																										
125	[rpmbirth]	Was this part of multiple birth?	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table>	1	Yes	0	No																																				
1	Yes																																										
0	No																																										
126	[rpbrthno] <div>Show the field ONLY if: [rpmbirth][current-instance]=1</div>	<div>Birth Order Number:</div> <div>For multiple births, was this birth 1st, 2nd, 3rd, etc. for this pregnancy?</div>	<div>dropdown, Required</div> <table><tr><td>01</td><td>1</td></tr><tr><td>02</td><td>2</td></tr><tr><td>03</td><td>3</td></tr><tr><td>04</td><td>4</td></tr><tr><td>05</td><td>5</td></tr><tr><td>06</td><td>6</td></tr><tr><td>07</td><td>7</td></tr><tr><td>08</td><td>8</td></tr><tr><td>09</td><td>9</td></tr><tr><td>10</td><td>10</td></tr></table>	01	1	02	2	03	3	04	4	05	5	06	6	07	7	08	8	09	9	10	10																				
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10	10																																										
127	[rpdob]	Date of Birth:	text (date_mdy, Max: today), Required, Identifier																																								
128	[rpsexb]	Sex at Birth:	<div>radio, Required</div> <table><tr><td>1</td><td>Male</td></tr><tr><td>2</td><td>Female</td></tr><tr><td>3</td><td>Undifferentiated</td></tr></table>	1	Male	2	Female	3	Undifferentiated																																		
1	Male																																										
2	Female																																										
3	Undifferentiated																																										
129	[rpbwg]	Birth Weight (grams):	text (number, Min: 450, Max: 5000), Required																																								
130	[rpbleng]	Birth Length (cm):	text (number, Min: 40, Max: 60), Required																																								
131	[rphcirc]	Head Circumference (cm):	text (number, Min: 31, Max: 39), Required																																								
132	[rpapgar1]	Apgar Score - 1 Minute:	text (integer, Min: 0, Max: 10), Required																																								
133	[rpapgar5]	Apgar Score - 5 Minute:	text (integer, Min: 0, Max: 10), Required																																								
134	[rpdef]	Were there any birth defects?	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <div>Custom alignment: RH</div>	1	Yes	0	No																																				
1	Yes																																										
0	No																																										

135	<div>[rpbdefd]</div> <div>Show the field ONLY if: [rpbdef] = '1'</div>	If yes, describe birth defects:	<div>checkbox, Required</div> <table><tr><td>1</td><td>rpbdefd__1</td><td>Hypospadias</td></tr><tr><td>2</td><td>rpbdefd__2</td><td>Obstructive defects of the renal pelvis</td></tr><tr><td>3</td><td>rpbdefd__3</td><td>Ventricular septal defect</td></tr><tr><td>4</td><td>rpbdefd__4</td><td>Congenital dislocated hip</td></tr><tr><td>5</td><td>rpbdefd__5</td><td>Trisomy 21 or Down syndrome</td></tr><tr><td>6</td><td>rpbdefd__6</td><td>Hydrocephalus</td></tr><tr><td>7</td><td>rpbdefd__7</td><td>Cleft Palate</td></tr><tr><td>8</td><td>rpbdefd__8</td><td>Trisomy 18 or Edward Syndrome</td></tr><tr><td>9</td><td>rpbdefd__9</td><td>Renal Agenesis/dysgenesis</td></tr><tr><td>10</td><td>rpbdefd__10</td><td>Cleft lip and palate</td></tr><tr><td>11</td><td>rpbdefd__11</td><td>Other</td></tr></table>	1	rpbdefd__1	Hypospadias	2	rpbdefd__2	Obstructive defects of the renal pelvis	3	rpbdefd__3	Ventricular septal defect	4	rpbdefd__4	Congenital dislocated hip	5	rpbdefd__5	Trisomy 21 or Down syndrome	6	rpbdefd__6	Hydrocephalus	7	rpbdefd__7	Cleft Palate	8	rpbdefd__8	Trisomy 18 or Edward Syndrome	9	rpbdefd__9	Renal Agenesis/dysgenesis	10	rpbdefd__10	Cleft lip and palate	11	rpbdefd__11	Other
1	rpbdefd__1	Hypospadias																																		
2	rpbdefd__2	Obstructive defects of the renal pelvis																																		
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10	rpbdefd__10	Cleft lip and palate																																		
11	rpbdefd__11	Other																																		
136	<div>[rpbdoth]</div> <div>Show the field ONLY if: [rpbdefd(11)] = '1'</div>	Describe other birth defects:	notes, Required																																	
137	<div>[rpbcomyn]</div>	Were there any birth complications?	<div>radio, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr><tr><td>33</td><td>Unknown</td></tr></table> <div>Custom alignment: RH</div>	1	Yes	0	No	33	Unknown																											
1	Yes																																			
0	No																																			
33	Unknown																																			
138	<div>[rpbcompd]</div> <div>Show the field ONLY if: [rpbcomyn] = '1'</div>	If yes, describe birth complications:	<div>checkbox, Required</div> <table><tr><td>1</td><td>rpbcompd__1</td><td>Abnormal fetus presentation</td></tr><tr><td>2</td><td>rpbcompd__2</td><td>Infections</td></tr><tr><td>3</td><td>rpbcompd__3</td><td>Fetal heart rate < 100 or >160/min.</td></tr><tr><td>4</td><td>rpbcompd__4</td><td>Nuchal, Knotted, or Compressed Cord</td></tr><tr><td>5</td><td>rpbcompd__5</td><td>Cord Prolapse</td></tr><tr><td>6</td><td>rpbcompd__6</td><td>Placental Infarction</td></tr><tr><td>7</td><td>rpbcompd__7</td><td>Placental Previa or Abruption</td></tr><tr><td>8</td><td>rpbcompd__8</td><td>Onset of Stable Respiration in Newborn > 6 min.</td></tr><tr><td>9</td><td>rpbcompd__9</td><td>Resuscitation Required</td></tr><tr><td>10</td><td>rpbcompd__10</td><td>Other</td></tr></table>	1	rpbcompd__1	Abnormal fetus presentation	2	rpbcompd__2	Infections	3	rpbcompd__3	Fetal heart rate < 100 or >160/min.	4	rpbcompd__4	Nuchal, Knotted, or Compressed Cord	5	rpbcompd__5	Cord Prolapse	6	rpbcompd__6	Placental Infarction	7	rpbcompd__7	Placental Previa or Abruption	8	rpbcompd__8	Onset of Stable Respiration in Newborn > 6 min.	9	rpbcompd__9	Resuscitation Required	10	rpbcompd__10	Other			
1	rpbcompd__1	Abnormal fetus presentation																																		
2	rpbcompd__2	Infections																																		
3	rpbcompd__3	Fetal heart rate < 100 or >160/min.																																		
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6	rpbcompd__6	Placental Infarction																																		
7	rpbcompd__7	Placental Previa or Abruption																																		
8	rpbcompd__8	Onset of Stable Respiration in Newborn > 6 min.																																		
9	rpbcompd__9	Resuscitation Required																																		
10	rpbcompd__10	Other																																		
139	<div>[rpbcompot]</div> <div>Show the field ONLY if: [rpbcompd(10)] = '1'</div>	Describe other birth complications:	notes, Required																																	
140	<div>[rpneocmp]</div>	Any Neonatal Complications? (Neonatal period is the first month of life)	<div>checkbox</div> <table><tr><td>1</td><td>rpneocmp__1</td><td>NICU admission</td></tr><tr><td>2</td><td>rpneocmp__2</td><td>Prolonged hospitalization</td></tr><tr><td>3</td><td>rpneocmp__3</td><td>Death</td></tr><tr><td>99</td><td>rpneocmp__99</td><td>Other</td></tr><tr><td>22</td><td>rpneocmp__22</td><td>Not Applicable</td></tr></table> <div>Field Annotation: @NONEOFTHEABOVE=22</div>	1	rpneocmp__1	NICU admission	2	rpneocmp__2	Prolonged hospitalization	3	rpneocmp__3	Death	99	rpneocmp__99	Other	22	rpneocmp__22	Not Applicable																		
1	rpneocmp__1	NICU admission																																		
2	rpneocmp__2	Prolonged hospitalization																																		
3	rpneocmp__3	Death																																		
99	rpneocmp__99	Other																																		
22	rpneocmp__22	Not Applicable																																		
141	<div>[rpnidur]</div> <div>Show the field ONLY if: [rpneocmp(1)] = '1'</div>	Duration of stay in NICU : <i>days</i>	text (integer), Required																																	
142	<div>[rphspdur]</div> <div>Show the field ONLY if: [rpneocmp(2)] = '1'</div>	Duration of stay in the hospital: <i>days</i>	text (integer), Required																																	
143	<div>[rpddeath]</div> <div>Show the field ONLY if: [rpneocmp(3)] = '1'</div>	Date of Death:	text (date_mdy, Max: today), Required																																	
144	<div>[rpcmpoth]</div> <div>Show the field ONLY if: [rpneocmp(99)] = '1'</div>	Other Neonatal Complications, specify:	notes, Required																																	

	145	[rpusrid2]	Data Entry User ID	text Field Annotation: @USERNAME @HIDDEN						
	146	[birth_history_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete									
1	Unverified									
2	Complete									
Instrument: Vital Signs (vital_signs)										
	147	[vsperf]	Were vital signs performed? <i>Indicate if the vital signs were collected. If yes, include the appropriate details where indicated on the eCRF.</i>	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Field Annotation: [vsstat]	1	Yes	0	No		
1	Yes									
0	No									
	148	[vsdat] Show the field ONLY if: [vsperf]='1'	What was the date of the vital signs measurement(s)? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [VSDTC]						
	149	[vstim] Show the field ONLY if: [vsperf]='1'	What was the time of the vital signs measurement(s)? <i>Record time of measurement in the following format: HH:MM (24-hour clock)</i>	text (time), Required Field Annotation: [VSDTC]						
	150	[height] Show the field ONLY if: [vsperf]='1'	What was the subject's height (cm)? <i>Record the result in the following format: XXX.X cm. Leading zeros (0) are not required but trailing zeros are; e.g., 140.0</i>	text (number_1dp, Min: 0, Max: 230), Required Field Annotation: [VSORRES] [VSTEST] [VSTESTCD] [HEIGHT]						
	151	[vshgtcol] Show the field ONLY if: [height]<>"	How was this height collected? <i>Please select only one response.</i>	radio, Required <table><tr><td>1</td><td>Self-Reported</td></tr><tr><td>2</td><td>Clinical Evaluation</td></tr></table> Field Annotation: [METHOD] CODELIST	1	Self-Reported	2	Clinical Evaluation		
1	Self-Reported									
2	Clinical Evaluation									
	152	[weight] Show the field ONLY if: [vsperf]='1'	What was the subject's weight (kg)? <i>Record the result in the following format: XXX.X kg. Leading zeros (0) are not required but trailing zeros are; e.g., 80.0</i>	text (number_1dp, Min: 0, Max: 200), Required Field Annotation: [VSORRES] [VSTEST] [VSTESTCD] [WEIGHT]						
	153	[vswgtcol] Show the field ONLY if: [weight]<>"	How was this weight collected? <i>Please select only one response.</i>	radio, Required <table><tr><td>1</td><td>Self-Reported</td></tr><tr><td>2</td><td>Clinical Evaluation</td></tr></table> Field Annotation: [METHOD] CODELIST	1	Self-Reported	2	Clinical Evaluation		
1	Self-Reported									
2	Clinical Evaluation									
	154	[vsbmi] Show the field ONLY if: [vsperf]='1'	What was the subject's BMI (kg/m2)? <i>This is a calculated field and cannot be edited.</i>	calc, Required Calculation: round(((weight]*10000)/(((height])^(2)),1) Field Annotation: VSORRES [BMI]						
	155	[vspos] Show the field ONLY if: [vsperf]='1'	What was the subject's position? <i>Please select only one response.</i>	radio, Required <table><tr><td>1</td><td>Sitting</td></tr><tr><td>2</td><td>Standing</td></tr><tr><td>3</td><td>Supine</td></tr></table> Field Annotation: [VSPOS]	1	Sitting	2	Standing	3	Supine
1	Sitting									
2	Standing									
3	Supine									
	156	[vssbp] Show the field ONLY if: [vsperf]='1'	What as the subject's systolic blood pressure (mmHg)? <i>Record the result in the following format: XXX mmHg. Leading zeros (0) are not required.</i>	text (integer, Min: 80, Max: 200), Required Field Annotation: VSORRES [SYSBP]						
	157	[vsdbp] Show the field ONLY if: [vsperf]='1'	What was the subject's diastolic blood pressure (mmHg)? <i>Record the result in the following format: XXX. Leading zeros (0) are not required.</i>	text (integer, Min: 40, Max: 120), Required Field Annotation: VSORRES [DIABP]						
	158	[vshrt] Show the field ONLY if: [vsperf]='1'	What was the subject's heart rate (beats/min)? <i>Record the result in the following format: XXX. Leading zeros (0) are not required.</i>	text (integer, Min: 40, Max: 200), Required Field Annotation: VSORRES [HR]						
	159	[vsresprt] Show the field ONLY if: [vsperf]='1'	What was the subject's respiratory rate (breaths/min)? <i>Record the result in the following format: XX. Leading zeros (0) are not required.</i>	text (integer, Min: 10, Max: 40), Required Field Annotation: VSORRES [RESP]						
	160	[vstemp] Show the field ONLY if: [vsperf]='1'	What was the subject's temperature (Celsius)? <i>Record the result in the following format: XX.X Leading zeros (0) are not required but trailing zeros are; e.g., 37.0</i>	text (number_1dp, Min: 34, Max: 40), Required Field Annotation: VSORRES [TEMP]						
	161	[vsusrid]	User ID:	text Field Annotation: @USERNAME @HIDDEN						

	162	[vital_signs_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete									
1	Unverified									
2	Complete									
Instrument: Laboratory - Hematology (laboratory_hematology)										
	163	[lbhvsdat]	Visit Date: <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required						
	164	[lbhperf]	Lab sample collected?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH Field Annotation: [LBSTAT]	1	Yes	0	No		
1	Yes									
0	No									
	165	[lbhdat] Show the field ONLY if: [lbhperf]="1"	Lab sample collection date: <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [lbdat]						
	166	[lbhtim] Show the field ONLY if: [lbhperf]="1" and [lbhtimun(33)] ="0"	Lab sample collection time: <i>HH:MM (24-hour clock)</i>	text (time), Required Field Annotation: [lbdtc]						
	167	[lbhtimun] Show the field ONLY if: [lbhperf]="1" and [lbhtim]=""		checkbox, Required <table border="1"> <tr><td>33</td><td>lbhtimun__33</td><td>Lab Sample Collection Time Unknown</td></tr> </table>	33	lbhtimun__33	Lab Sample Collection Time Unknown			
33	lbhtimun__33	Lab Sample Collection Time Unknown								
	168	[lbhcond] Show the field ONLY if: [lbhperf]="1"	Subject fasting?	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No		
1	Yes									
0	No									
	169	[lbhloc] Show the field ONLY if: [lbhperf]=1	Where was the sample collected? <i>Please select only one response.</i>	dropdown, Required <table border="1"> <tr><td>1</td><td>At the clinical site</td></tr> <tr><td>2</td><td>At the participant's home</td></tr> <tr><td>99</td><td>Other</td></tr> </table>	1	At the clinical site	2	At the participant's home	99	Other
1	At the clinical site									
2	At the participant's home									
99	Other									
	170	[lbhlocot] Show the field ONLY if: [lbhloc]="99"	If other location, please specify:	text, Required						
	171	[lbhinst1]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** If the study is utilizing a central lab, the table of results, normal range fields, and "Not Done" checkboxes can be removed. This information would be transferred electronically and does not need to also be entered into the clinical database. For data cleaning purposes, ranges should be set (as applicable) on the results fields based on PI/Sponsor instruction/feedback. The normal ranges (high/low fields) provided by the local lab may differ from the sponsor-defined data quality ranges for which they wish to flag results. For tests with results or ranges with special characters (e.g., < 5, >100, etc.), check with the sponsor, PI, or statistician on how they want to handle them (e.g., omitting special characters and only entering the numeric component, retaining the special character, etc.). The unit of measure for each parameter should be hardcoded into the field label. We have purposefully left these out of the template because some studies choose to use SI units and others may use Imperial units. Disclaimer: The tests listed below are just an example of possible tests and their results that can apply and are not meant to be exhaustive. The Data Manager will want to work with the project team and the protocol to determine which tests will be performed and recorded in the clinical database. In addition, different labs may provide results differently for some tests. As such, ensure that the data format and ranges for these tests are reviewed and modified to meet the study protocol needs. If the study has multiple sites and multiple local labs will be used, greater consideration may need to be taken to accommodate the collection of the data. Note: Normal Range high and low variables should be provided/added for any continuous results variables (i.e., quantitative variables that collect a numeric result). Non-continuous results variables (i.e. qualitative variables) may only provide a result and thus do not have a high or low "range."	descriptive Field Annotation: @HIDDEN						

172	[lbhtabl] Show the field ONLY if: [lbhperf]=1	Result Unit Normal Range - Low Normal Range - High Check if Not Done WBC {lbhwbc:icons} {lbhwbcu:icons} {lbhwbc:icons} {lbhwbc:icons} {lbhwbc:icons} RBC {lbhrbc:icons} {lbhrbcu:icons} {lbhrbc:icons} {lbhrbc:icons} {lbhrbc:icons} ESR {lbhesr:icons} {lbhesru:icons} {lbhesrl:icons} {lbhesrh:icons} {lbhesr:icons} MCV {lbhmcv:icons} {lbhmcv:icons} {lbhmcv:icons} {lbhmcv:icons} {lbhmcv:icons} MCH {lbhmchr:icons} {lbhmchu:icons} {lbhmchl:icons} {lbhmchh:icons} {lbhmch:icons} MCHC {lbhmchr:icons} {lbhmchcu:icons} {lbhmchcl:icons} {lbhmchch:icons} {lbhmchc:icons} RDW {lbhrdw:icons} {lbhrdwu:icons} {lbhrdwl:icons} {lbhrdwh:icons} {lbhrdw:icons} Hematocrit {lbhmtcr:icons} {lbhmtcu:icons} {lbhmtcl:icons} {lbhmtch:icons} {lbhmtc:icons} Hemoglobin {lbhmgbr:icons} {lbhmgbu:icons} {lbhmgbl:icons} {lbhmgbh:icons} {lbhmgbi:icons} Platelets {lbhplts:icons} {lbhpltsu:icons} {lbhplts:icons} {lbhplts:icons} {lbhplts:icons} Neutrophils {lbhntpr:icons} {lbhntpu:icons} {lbhntpl:icons} {lbhntpr:icons} {lbhntpr:icons} Lymphocytes {lbhmpcr:icons} {lbhmpcu:icons} {lbhmpcl:icons} {lbhmpch:icons} {lbhmpc:icons} Monocytes {lbhmncr:icons} {lbhmncu:icons} {lbhmnc:icons} {lbhmnc:icons} Eosinophils {lbhesnpr:icons} {lbhesnpu:icons} {lbhesnl:icons} {lbhesnh:icons} {lbhesnp:icons} Basophils {lbhbspr:icons} {lbhbspu:icons} {lbhbspl:icons} {lbhbsph:icons} {lbhbsp:icons} Band {lbhbndr:icons} {lbhbndu:icons} {lbhbndl:icons} {lbhbndh:icons} {lbhbnd:icons} Seg {lbhsegr:icons} {lbhsegu:icons} {lbhsegl:icons} {lbhsegh:icons} {lbhseg:icons}	descriptive
173	[lbhwbc] Show the field ONLY if: [lbhperf]="1" and [lbhwbc]="	WBC	checkbox 55 lbhwbc__55 Not Done Custom alignment: LH
174	[lbhwbc] Show the field ONLY if: [lbhperf]="1" and [lbhwbc(55)] ="0"	WBC Result XXX	text (number), Required Field Annotation: [LBORRES]
175	[lbhwbcu] Show the field ONLY if: [lbhperf]="1" and [lbhwbc(55)] ="0"	WBC Unit	dropdown, Required 1 K/mcL Field Annotation: [LBORRESU]
176	[lbhwbc1] Show the field ONLY if: [lbhperf]="1" and [lbhwbc(55)] ="0"	WBC Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
177	[lbhwbc] Show the field ONLY if: [lbhperf]="1" and [lbhwbc(55)] ="0"	WBC Normal Range - hgh:	text (number), Required Field Annotation: [LBORNrh]
178	[lbhrbc] Show the field ONLY if: [lbhperf]="1" and [lbhrbc]="	RBC	checkbox 55 lbhrbc__55 Not Done Custom alignment: LH
179	[lbhrbc] Show the field ONLY if: [lbhperf]="1" and [lbhrbc(55)]="0"	RBC Result XX	text (number), Required Field Annotation: [LBORRES]
180	[lbhrbcu] Show the field ONLY if: [lbhperf]="1" and [lbhrbc(55)]="0"	RBC Unit	dropdown, Required 1 M/mcL Field Annotation: [LBORRESU]
181	[lbhrbc1] Show the field ONLY if: [lbhperf]="1" and [lbhrbc(55)]="0"	RBC Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
182	[lbhrbc] Show the field ONLY if: [lbhperf]="1" and [lbhrbc(55)]="0"	RBC Normal Range - High:	text (number), Required Field Annotation: [LBORNrh]
183	[lbhesr] Show the field ONLY if: [lbhperf]="1" and [lbhesr]="	ESR	checkbox 55 lbhesr__55 Not Done Custom alignment: LH

184	[lbhesrr] Show the field ONLY if: [lbhperf]="1" and [lbhesr(55)]="0"	ESR Result <i>XX</i>	text (number), Required Field Annotation: [LBORRES]
185	[lbhesru] Show the field ONLY if: [lbhperf]="1" and [lbhesr(55)]="0"	ESR Unit	dropdown, Required <div>1 mm/hr</div> Field Annotation: [LBORRESU]
186	[lbhesrl] Show the field ONLY if: [lbhperf]="1" and [lbhesr(55)]="0"	ESR Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
187	[lbhesrh] Show the field ONLY if: [lbhperf]="1" and [lbhesr(55)]="0"	ESR Normal Range - High:	text (number), Required Field Annotation: [LBORNRH1]
188	[lbhmcv] Show the field ONLY if: [lbhperf]="1" and [lbhmcvr]=""	MCV	checkbox <div>55 lbhmcv__55 Not Done</div> Custom alignment: LH
189	[lbhmcvr] Show the field ONLY if: [lbhperf]="1" and [lbhmcv(55)] ="0"	MCV Result <i>XXX</i>	text (number), Required Field Annotation: [LBORRES]
190	[lbhmcvu] Show the field ONLY if: [lbhperf]="1" and [lbhmcv(55)] ="0"	MCV Unit	dropdown, Required <div>1 fL</div> Field Annotation: [LBORRESU]
191	[lbhmcvl] Show the field ONLY if: [lbhperf]="1" and [lbhmcv(55)] ="0"	MCV Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
192	[lbhmcvh] Show the field ONLY if: [lbhperf]="1" and [lbhmcv(55)] ="0"	MCV Normal Range - High:	text (number), Required Field Annotation: [LBORNRH1]
193	[lbhmch] Show the field ONLY if: [lbhperf]="1" and [lbhmchr]=""	MCH	checkbox <div>55 lbhmch__55 Not Done</div> Custom alignment: LH
194	[lbhmchr] Show the field ONLY if: [lbhperf]="1" and [lbhmch(55)] ="0"	MCH Result <i>XXX</i>	text (number), Required Field Annotation: [LBORRES]
195	[lbhmchu] Show the field ONLY if: [lbhperf]="1" and [lbhmch(55)] ="0"	MCH Unit	dropdown, Required <div>1 pg</div> Field Annotation: [LBORRESU]
196	[lbhmchl] Show the field ONLY if: [lbhperf]="1" and [lbhmch(55)] ="0"	MCH Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
197	[lbhmchh] Show the field ONLY if: [lbhperf]="1" and [lbhmch(55)] ="0"	MCH Normal Range - High:	text (number), Required Field Annotation: [LBORNRH1]
198	[lbhmchc] Show the field ONLY if: [lbhperf]="1" and [lbhmchcr]=""	MCHC	checkbox <div>55 lbhmchc__55 Not Done</div> Custom alignment: LH
199	[lbhmchcr] Show the field ONLY if: [lbhperf]="1" and [lbhmchc(55)] ="0"	MCHC Result <i>XX</i>	text (number), Required Field Annotation: [LBORRES]

	200	[lbhmc cu] Show the field ONLY if: [lbhperf]="1" and [lbhmchc(55)] ="0"	MCHC Unit	dropdown, Required <div>1 gm/dL</div> Field Annotation: [LBORRESU]
	201	[lbhmc cl] Show the field ONLY if: [lbhperf]="1" and [lbhmchc(55)] ="0"	MCHC Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
	202	[lbhmc ch] Show the field ONLY if: [lbhperf]="1" and [lbhmchc(55)] ="0"	MCHC Normal Range - High:	text (number), Required Field Annotation: [LBORNRIH]
	203	[lbhrd w] Show the field ONLY if: [lbhperf]="1" and [lbhrdwr]=""	RDW	checkbox <div>55 lbhrdw__55 Not Done</div> Custom alignment: LH
	204	[lbhrd wr] Show the field ONLY if: [lbhperf]="1" and [lbhrdw(55)] ="0"	RDW Result <i>XXX</i>	text (number), Required Field Annotation: [LBORRES]
	205	[lbhrd wu] Show the field ONLY if: [lbhperf]="1" and [lbhrdw(55)] ="0"	RDW Unit	dropdown, Required <div>1 %</div> Field Annotation: [LBORRESU]
	206	[lbhrd wl] Show the field ONLY if: [lbhperf]="1" and [lbhrdw(55)] ="0"	RDW Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
	207	[lbhrd wh] Show the field ONLY if: [lbhperf]="1" and [lbhrdw(55)] ="0"	RDW Normal Range - High:	text (number), Required Field Annotation: [LBORNRIH]
	208	[lbh hmtc] Show the field ONLY if: [lbhperf]="1" and [lbhhmtcr]=""	HEMATOCRIT	checkbox <div>55 lbhhmtc__55 Not Done</div> Custom alignment: LH
	209	[lbh hmtcr] Show the field ONLY if: [lbhperf]="1" and [lbhhmtc(55)] ="0"	HEMATOCRIT Result <i>XX</i>	text (number), Required Field Annotation: [LBORRES]
	210	[lbh hmtcu] Show the field ONLY if: [lbhperf]="1" and [lbhhmtc(55)] ="0"	HEMATOCRIT Unit	dropdown, Required <div>1 %</div> Field Annotation: [LBORRESU]
	211	[lbhm ctl] Show the field ONLY if: [lbhperf]="1" and [lbhhmtc(55)] ="0"	HEMATOCRIT Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
	212	[lbhm cth] Show the field ONLY if: [lbhperf]="1" and [lbhhmtc(55)] ="0"	HEMATOCRIT Normal Range - High:	text (number), Required Field Annotation: [LBORNRIH]
	213	[lbh hmgbr] Show the field ONLY if: [lbhperf]="1" and [lbhhmgbr]=""	HEMOGLOBIN	checkbox <div>55 lbhhmgbr__55 Not Done</div> Custom alignment: LH
	214	[lbh hmgbr] Show the field ONLY if: [lbhperf]="1" and [lbhhmgbr(55)] ="0"	HEMOGLOBIN Result <i>XXX</i>	text (number), Required Field Annotation: [LBORRES]
	215	[lbh hmgbu] Show the field ONLY if: [lbhperf]="1" and [lbhhmgbr(55)] ="0"	HEMOGLOBIN Unit	dropdown, Required <div>1 gm/dL</div> Field Annotation: [LBORRESU]

216	[lbhmgbl] Show the field ONLY if: [lbhperf]="1" and [lbhmgbl(55)]="0"	HEMOGLOBIN Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
217	[lbhmgbh] Show the field ONLY if: [lbhperf]="1" and [lbhmgbl(55)]="0"	HEMOGLOBIN Normal Range - High:	text (number), Required Field Annotation: [LBORNRLH]
218	[lbhplts] Show the field ONLY if: [lbhperf]="1" and [lbhpltsr]=""	PLATELETS	checkbox 55 lbhplts__55 Not Done Custom alignment: LH
219	[lbhpltsr] Show the field ONLY if: [lbhperf]="1" and [lbhplts(55)]="0"	PLATELETS Result xxx	text (number), Required Field Annotation: [LBORRES]
220	[lbhpltsu] Show the field ONLY if: [lbhperf]="1" and [lbhplts(55)]="0"	PLATELETS Unit	dropdown, Required 1 K/mcL Field Annotation: [LBORRESU]
221	[lbhpltsl] Show the field ONLY if: [lbhperf]="1" and [lbhplts(55)]="0"	PLATELETS Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
222	[lbhpltsh] Show the field ONLY if: [lbhperf]="1" and [lbhplts(55)]="0"	PLATELETS Normal Range - High:	text (number), Required Field Annotation: [LBORNRLH]
223	[lbhntrp] Show the field ONLY if: [lbhperf]="1" and [lbhntrp]=""	NEUTROPHILS	checkbox 55 lbhntrp__55 Not Done Custom alignment: LH
224	[lbhntrpr] Show the field ONLY if: [lbhperf]="1" and [lbhntrp(55)]="0"	NEUTROPHILS Result xx	text (number), Required Field Annotation: [LBORRES]
225	[lbhntrpu] Show the field ONLY if: [lbhperf]="1" and [lbhntrp(55)]="0"	NEUTROPHILS Unit	dropdown, Required 1 % Field Annotation: [LBORRESU]
226	[lbhntrpl] Show the field ONLY if: [lbhperf]="1" and [lbhntrp(55)]="0"	NEUTROPHILS Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
227	[lbhntrph] Show the field ONLY if: [lbhperf]="1" and [lbhntrp(55)]="0"	NEUTROPHILS Normal Range - High:	text (number), Required Field Annotation: [LBORNRLH]
228	[lbhlmpc] Show the field ONLY if: [lbhperf]="1" and [lbhlmpcr]=""	LYMPHOCYTES	checkbox 55 lbhlmpc__55 Not Done Custom alignment: LH
229	[lbhlmpcr] Show the field ONLY if: [lbhperf]="1" and [lbhlmpc(55)]="0"	LYMPHOCYTES Result xx	text (number), Required Field Annotation: [LBORRES]
230	[lbhlmpcu] Show the field ONLY if: [lbhperf]="1" and [lbhlmpc(55)]="0"	LYMPHOCYTES Unit	dropdown, Required 1 % Field Annotation: [LBORRESU]
231	[lbhlmpcl] Show the field ONLY if: [lbhperf]="1" and [lbhlmpc(55)]="0"	LYMPHOCYTES Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]

	232	[lbh1mpch] Show the field ONLY if: [lbhperf]="1" and [lbh1mpc(55)] ="0"	LYMPHOCYTES Normal Range - High:	text (number), Required Field Annotation: [LBORNRIH]
	233	[lbhmnc] Show the field ONLY if: [lbhperf]="1" and [lbhmncr]=""	MONOCYTES	checkbox 55 lbhmnc__55 Not Done Custom alignment: LH
	234	[lbhmncr] Show the field ONLY if: [lbhperf]="1" and [lbhmnc(55)] ="0"	MONOCYTES Result <i>xx</i>	text (number), Required Field Annotation: [LBORRES]
	235	[lbhmncu] Show the field ONLY if: [lbhperf]="1" and [lbhmnc(55)] ="0"	MONOCYTES Unit	dropdown, Required 1 % Field Annotation: [LBORRESU]
	236	[lbhmnc1] Show the field ONLY if: [lbhperf]="1" and [lbhmnc(55)] ="0"	MONOCYTES Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
	237	[lbhmnc h] Show the field ONLY if: [lbhperf]="1" and [lbhmnc(55)] ="0"	MONOCYTES Normal Range - High:	text (number), Required Field Annotation: [LBORNRIH]
	238	[lbhesnp] Show the field ONLY if: [lbhperf]="1" and [lbhesnpr]=""	EOSINOPHILS	checkbox 55 lbhesnp__55 Not Done Custom alignment: LH
	239	[lbhesnpr] Show the field ONLY if: [lbhperf]="1" and [lbhesnp(55)] ="0"	EOSINOPHILS Result <i>xx</i>	text (number), Required Field Annotation: [LBORRES]
	240	[lbhesnpu] Show the field ONLY if: [lbhperf]="1" and [lbhesnp(55)] ="0"	EOSINOPHILS Unit	dropdown, Required 1 % Field Annotation: [LBORRESU]
	241	[lbhesn1] Show the field ONLY if: [lbhperf]="1" and [lbhesnp(55)] ="0"	EOSINOPHILS Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
	242	[lbhesnh] Show the field ONLY if: [lbhperf]="1" and [lbhesnp(55)] ="0"	EOSINOPHILS Normal Range - High:	text (number), Required Field Annotation: [LBORNRIH]
	243	[lbhbsp] Show the field ONLY if: [lbhperf]="1" and [lbhbbsp]=""	BASOPHILS	checkbox 55 lbhbsp__55 Not Done Custom alignment: LH
	244	[lbhbbsp] Show the field ONLY if: [lbhperf]="1" and [lbhbbsp(55)] ="0"	BASOPHILS Result <i>xx</i>	text (number), Required Field Annotation: [LBORRES]
	245	[lbhbbspu] Show the field ONLY if: [lbhperf]="1" and [lbhbbsp(55)] ="0"	BASOPHILS Unit	dropdown, Required 1 % Field Annotation: [LBORRESU]
	246	[lbhbbsp1] Show the field ONLY if: [lbhperf]="1" and [lbhbbsp(55)] ="0"	BASOPHILS Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
	247	[lbhbbsp h] Show the field ONLY if: [lbhperf]="1" and [lbhbbsp(55)] ="0"	BASOPHILS Normal Range - High:	text (number), Required Field Annotation: [LBORNRIH]

248	[lbhband] Show the field ONLY if: [lbhperf]="1" and [lbhbandr]=""	BAND	checkbox 55 lbhband__55 Not Done Custom alignment: LH
249	[lbhbandr] Show the field ONLY if: [lbhperf]="1" and [lbhband(55)] ="0"	BAND Result <i>XX</i>	text (number), Required Field Annotation: [LBORRES]
250	[lbhbandu] Show the field ONLY if: [lbhperf]="1" and [lbhband(55)] ="0"	BAND Unit	dropdown, Required 1 % Field Annotation: [LBORRESU]
251	[lbhbnd1] Show the field ONLY if: [lbhperf]="1" and [lbhband(55)] ="0"	BAND Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
252	[lbhbndh] Show the field ONLY if: [lbhperf]="1" and [lbhband(55)] ="0"	BAND Normal Range - High:	text (number), Required Field Annotation: [LBORNRI]
253	[lbhseg] Show the field ONLY if: [lbhperf]="1" and [lbhsegr]=""	SEG	checkbox 55 lbhseg__55 Not Done Custom alignment: LH
254	[lbhsegr] Show the field ONLY if: [lbhperf]="1" and [lbhseg(55)]="0"	SEG Result <i>XX</i>	text (number), Required Field Annotation: [LBORRES]
255	[lbhsegu] Show the field ONLY if: [lbhperf]="1" and [lbhseg(55)]="0"	SEG Unit	dropdown, Required 1 % Field Annotation: [LBORRESU]
256	[lbhseg1] Show the field ONLY if: [lbhperf]="1" and [lbhseg(55)]="0"	SEG Normal Range - Low:	text (number), Required Field Annotation: [LBORNRL0]
257	[lbhsegh] Show the field ONLY if: [lbhperf]="1" and [lbhseg(55)]="0"	SEG Normal Range - High:	text (number), Required Field Annotation: [LBORNRI]
258	[lbhusrid]	User ID:	text Field Annotation: @USERNAME @HIDDEN
259	[laboratory_hematology_complete]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: Laboratory - Chemistry (laboratory_chemistry)

260	[lbcvsdatt]	Visit Date: <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required
261	[lbcperrf]	Lab sample collected?	yesno, Required 1 Yes 0 No Custom alignment: RH Field Annotation: [LBSTAT]
262	[lbcdatt] Show the field ONLY if: [lbcperrf]="1"	Lab sample collection date: <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [LBSTAT]
263	[lbctim] Show the field ONLY if: [lbcperrf]="1" and [lbctimun(33)] ="0"	Lab sample collection time: <i>HH:MM (24-hour clock)</i>	text (time), Required Field Annotation: [LBSTAT]
264	[lbctimun] Show the field ONLY if: [lbcperrf]="1" and [lbctim]=""		checkbox, Required 33 lbctimun__33 Lab Sample Collection Time Unknown

265	[lbcond] Show the field ONLY if: [lbcperf]="1"	Subject fasting?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No
1	Yes						
0	No						
266	[lbcinst1]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** If the study is utilizing a central lab, the table of results, normal range fields, and "Not Done" checkboxes can be removed. This information would be transferred electronically and does not need to also be entered into the clinical database. For data cleaning purposes, ranges should be set (as applicable) on the results fields based on PI/Sponsor instruction/feedback. The normal ranges (high/low fields) provided by the local lab may differ from the sponsor-defined data quality ranges for which they wish to flag results. For tests with results or ranges with special characters (e.g., < 5, >100, etc.), check with the sponsor, PI, or statistician on how they want to handle them (e.g., omitting special characters and only entering the numeric component, retaining the special character, etc.). The unit of measure for each parameter should be hardcoded into the field label. We have purposefully left these out of the template because some studies choose to use SI units and others may use Imperial units. Disclaimer: The tests listed below are just an example of possible tests and their results that can apply and are not meant to be exhaustive. The Data Manager will want to work with the project team and the protocol to determine which tests will be performed and recorded in the clinical database. In addition, different labs may provide results differently for some tests. As such, ensure that the data format and ranges for these tests are reviewed and modified to meet the study protocol needs. If the study has multiple sites and multiple local labs will be used, greater consideration may need to be taken to accommodate the collection of the data. Note: Normal Range high and low variables should be provided/added for any continuous results variables (i.e., quantitative variables that collect a numeric result). Non-continuous results variables (i.e. qualitative variables) may only provide a result and thus do not have a high or low "range."	descriptive Field Annotation: @HIDDEN				

267	<div>[lbctabl]</div> <div>Show the field ONLY if: [lbcpperf]=1</div>	Result Unite of Measure Normal Range - Low Normal Range - High Check if Not Done BUN {lbcbunr:icons} {lbcbunu:icons} {lbcbunl:icons} {lbcbunh:icons} {lbcbun:icons} CARBON DIOXIDE (CO2) {lbcco2r:icons} {lbcco2u:icons} {lbcco2l:icons} {lbcco2h:icons} {lbcco2i:icons} CHLORIDE {lbclldr:icons} {lbclldrdu:icons} {lbclldrli:icons} {lbclldrhi:icons} {lbclldr:icons} CREATININE {lbccrtnr:icons} {lbccrtnu:icons} {lbccrtnl:icons} {lbccrtnh:icons} {lbccrtni:icons} GLUCOSE {lbglcsr:icons} {lbglcsu:icons} {lbglcsl:icons} {lbglcsh:icons} {lbglcs:icons} POTASSIUM {lbcpmsr:icons} {lbcpmsu:icons} {lbcpmsl:icons} {lbcpmsmh:icons} {lbcpmsm:icons} SODIUM {lbcsdmr:icons} {lbcsdmu:icons} {lbcsdmli:icons} {lbcsdmh:icons} {lbcsdm:icons} ALT {lbcaltr:icons} {lbcaltu:icons} {lbcaltl:icons} {lbcalth:icons} {lbcalt:icons} ALBUMIN {lbcalbmr:icons} {lbcalbmu:icons} {lbcalbml:icons} {lbcalbmh:icons} {lbcalbm:icons} ALP {lbcalpr:icons} {lbcalpu:icons} {lbcalpl:icons} {lbcalph:icons} {lbcalp:icons} AMYLASE {lbcamylr:icons} {lbcamylu:icons} {lbcamyll:icons} {lbcamylh:icons} {lbcamyl:icons} AST {lbcastr:icons} {lbcastu:icons} {lbcastl:icons} {lbcasth:icons} {lbcast:icons} BILIRUBIN TOTAL {lbclbrbr:icons} {lbclbrbu:icons} {lbclbrbl:icons} {lbclbrbh:icons} {lbclbrb:icons} CALCIUM {lbccalc:icons} {lbccalcu:icons} {lbccalc:icons} {lbccalc:icons} {lbccalc:icons} CHOLESTEROL {lbccholr:icons} {lbccholu:icons} {lbccholl:icons} {lbccholh:icons} {lbcchol:icons} CREATINE PHOSPHOKINASE {lbcpkr:icons} {lbcpku:icons} {lbcpkl:icons} {lbcpkh:icons} {lbcpki:icons} GGT {lbcggr:icons} {lbcggtu:icons} {lbcggtl:icons} {lbcggt:icons} GLOBULINES {lbglbr:icons} {lbglbu:icons} {lbglbl:icons} {lbglbh:icons} {lbglb:icons} IRON {lbironr:icons} {lbironu:icons} {lbironl:icons} {lbironh:icons} {lbiron:icons} HDL {lbchdlr:icons} {lbchdlu:icons} {lbchdll:icons} {lbchdlh:icons} {lbchdl:icons} LDH {lbldhr:icons} {lbldhu:icons} {lbldhl:icons} {lbldhh:icons} {lbldh:icons} LIPASE {lbclpr:icons} {lbclpu:icons} {lbclpl:icons} {lbclph:icons} {lbclp:icons} LDL {lbclldr:icons} {lbcldlu:icons} {lbcldll:icons} {lbclldh:icons} {lbclld:icons} MAGNESIUM {lbcmagnr:icons} {lbcmagnu:icons} {lbcmagnl:icons} {lbcmagnh:icons} {lbcmagn:icons} PHOSPHORUS {lbcpshr:icons} {lbcpshu:icons} {lbcpshl:icons} {lbcpshh:icons} {lbcpsh:icons} TOTAL PROTEINS {lbctotpr:icons} {lbctotpu:icons} {lbctotpl:icons} {lbctotph:icons} {lbctotp:icons} T4 {lbct4r:icons} {lbct4u:icons} {lbct4l:icons} {lbct4h:icons} {lbct4:icons} TSH {lbctshr:icons} {lbctshu:icons} {lbctshl:icons} {lbctshh:icons} {lbctsh:icons} T3 {lbct3r:icons} {lbct3u:icons} {lbct3l:icons} {lbct3h:icons} {lbct3:icons} TRIGLICERIDES {lbctgcdr:icons} {lbctgcdu:icons} {lbctgcdl:icons} {lbctgcdh:icons} {lbctgcd:icons} URIC ACID {lbcuricr:icons} {lbcuricu:icons} {lbcuric:icons} {lbcurich:icons} {lbcuric:icons}	descriptive
268	<div>[lbcbun]</div> <div>Show the field ONLY if: [lbcpperf]="1" and [lbcbunr]=""</div>	BUN	<div>checkbox</div> <div><div>55</div><div>lbcbun__55</div><div>Not Done</div></div> <div>Custom alignment: LH</div>
269	<div>[lbcbunr]</div> <div>Show the field ONLY if: [lbcpperf]="1" and [lbcbun(55)]= "0"</div>	BUN Result (mg/dL) <i>xx</i>	text (number), Required Field Annotation: [LBORRES]
270	<div>[lbcbunu]</div> <div>Show the field ONLY if: [lbcpperf]="1" and [lbcbun(55)]= "0"</div>	BUN Unit	<div>dropdown, Required</div> <div><div>1</div><div>mg/dL</div></div> <div>Field Annotation: [LBORRESU]</div>
271	<div>[lbcbunl]</div> <div>Show the field ONLY if: [lbcpperf]="1" and [lbcbun(55)]= "0"</div>	BUN Normal Range - Low:	text (number), Required
272	<div>[lbcbunh]</div> <div>Show the field ONLY if: [lbcpperf]="1" and [lbcbun(55)]= "0"</div>	BUN Normal Range - High:	text (number), Required
273	<div>[lbcco2]</div> <div>Show the field ONLY if: [lbcpperf]="1" and [lbcco2r]=""</div>	CARBON DIOXIDE (CO2)	<div>checkbox</div> <div><div>55</div><div>lbcco2__55</div><div>Not Done</div></div> <div>Custom alignment: LH</div>
274	<div>[lbcco2r]</div> <div>Show the field ONLY if: [lbcpperf]="1" and [lbcco2(55)]= "0"</div>	CARBON DIOXIDE (CO2) Result <i>xx</i>	text (number), Required Field Annotation: [LBORRES]

275	[lbcco2u] Show the field ONLY if: [lbcperf]="1" and [lbcco2(55)]=0"	CARBON DIOXIDE (CO2) Unit	dropdown, Required 1 mmol/L Field Annotation: [LBORRESU]
276	[lbcco2l] Show the field ONLY if: [lbcperf]="1" and [lbcco2(55)]=0"	CARBON DIOXIDE (CO2) Normal Range - Low:	text (number), Required
277	[lbcco2h] Show the field ONLY if: [lbcperf]="1" and [lbcco2(55)]=0"	CARBON DIOXIDE (CO2) Normal Range - High:	text (number), Required
278	[lbcc1rd] Show the field ONLY if: [lbcperf]="1" and [lbcc1rdr]="	CHLORIDE	checkbox 55 lbcc1rd__55 Not Done Custom alignment: LH
279	[lbcc1rdr] Show the field ONLY if: [lbcperf]="1" and [lbcc1rd(55)]=0"	CHLORIDE Result XXX	text (number), Required Field Annotation: [LBORRES]
280	[lbcc1rdu] Show the field ONLY if: [lbcperf]="1" and [lbcc1rd(55)]=0"	CHLORIDE Unit	dropdown, Required 1 mmol/L Field Annotation: [LBORRESU]
281	[lbcc1rdl] Show the field ONLY if: [lbcperf]="1" and [lbcc1rd(55)]=0"	CHLORIDE Normal Range - Low:	text (number), Required
282	[lbcc1rdh] Show the field ONLY if: [lbcperf]="1" and [lbcc1rd(55)]=0"	CHLORIDE Normal Range - High:	text (number), Required
283	[lbccrtn] Show the field ONLY if: [lbcperf]="1" and [lbccrtnr]="	CREATININE	checkbox 55 lbccrtn__55 Not Done Custom alignment: LH
284	[lbccrtnr] Show the field ONLY if: [lbcperf]="1" and [lbccrtn(55)]=0"	CREATININE Result XX	text (number), Required Field Annotation: [LBORRES]
285	[lbccrtnu] Show the field ONLY if: [lbcperf]="1" and [lbccrtn(55)]=0"	CREATININE Unit	dropdown, Required 1 mg/dL Field Annotation: [LBORRESU]
286	[lbccrtnl] Show the field ONLY if: [lbcperf]="1" and [lbccrtn(55)]=0"	CREATININE Normal Range - Low:	text (number), Required
287	[lbccrtnh] Show the field ONLY if: [lbcperf]="1" and [lbccrtn(55)]=0"	CREATININE Normal Range - High:	text (number), Required
288	[lbcglcs] Show the field ONLY if: [lbcperf]="1" and [lbcglcsr]="	GLUCOSE	checkbox 55 lbcglcs__55 Not Done Custom alignment: LH
289	[lbcglcsr] Show the field ONLY if: [lbcperf]="1" and [lbcglcs(55)]=0"	GLUCOSE Result XXX	text (number), Required Field Annotation: [LBORRES]
290	[lbcglcsu] Show the field ONLY if: [lbcperf]="1" and [lbcglcs(55)]=0"	GLUCOSE Unit	dropdown, Required 1 mg/dL Field Annotation: [LBORRESU]
291	[lbcglcs1] Show the field ONLY if: [lbcperf]="1" and [lbcglcs(55)]=0"	GLUCOSE Normal Range - Low:	text (number), Required
292	[lbcglcsh] Show the field ONLY if: [lbcperf]="1" and [lbcglcs(55)]=0"	GLUCOSE Normal Range - High:	text (number), Required

293	[lbcptsm] Show the field ONLY if: [lbcperf]="1" and [lbcptsmr]=""	POTASSIUM	checkbox 55 lbcptsm__55 Not Done Custom alignment: LH
294	[lbcptsmr] Show the field ONLY if: [lbcperf]="1" and [lbcptsm(55)] ="0"	POTASSIUM Result <i>X,X</i>	text (number), Required Field Annotation: [LBORRES]
295	[lbcptsmu] Show the field ONLY if: [lbcperf]="1" and [lbcptsm(55)] ="0"	POTASSIUM Unit	dropdown, Required 1 mmol/L Field Annotation: [LBORRESU]
296	[lbcptsm1] Show the field ONLY if: [lbcperf]="1" and [lbcptsm(55)] ="0"	POTASSIUM Normal Range - Low:	text (number), Required
297	[lbcptsmh] Show the field ONLY if: [lbcperf]="1" and [lbcptsm(55)] ="0"	POTASSIUM Normal Range - High:	text (number), Required
298	[lbcsdm] Show the field ONLY if: [lbcperf]="1" and [lbcsdmr]=""	SODIUM	checkbox 55 lbcsdm__55 Not Done Custom alignment: LH
299	[lbcsdmr] Show the field ONLY if: [lbcperf]="1" and [lbcsdm(55)] ="0"	SODIUM Result <i>XXX</i>	text (number), Required Field Annotation: [LBORRES]
300	[lbcsdmu] Show the field ONLY if: [lbcperf]="1" and [lbcsdm(55)] ="0"	SODIUM Unit	dropdown, Required 1 mmol/L Field Annotation: [LBORRESU]
301	[lbcsdml] Show the field ONLY if: [lbcperf]="1" and [lbcsdm(55)] ="0"	SODIUM Normal Range - Low:	text (number), Required
302	[lbcsdmh] Show the field ONLY if: [lbcperf]="1" and [lbcsdm(55)] ="0"	SODIUM Normal Range - High:	text (number), Required
303	[lbcalt] Show the field ONLY if: [lbcperf]="1" and [lbcalttr]=""	ALT	checkbox 55 lbcalt__55 Not Done Custom alignment: LH
304	[lbcalttr] Show the field ONLY if: [lbcperf]="1" and [lbcalt(55)]="0"	ALT Result <i>XXX</i>	text (number), Required Field Annotation: [LBORRES]
305	[lbcaltu] Show the field ONLY if: [lbcperf]="1" and [lbcalt(55)]="0"	ALT Unit	dropdown, Required 1 unit/L Field Annotation: [LBORRESU]
306	[lbcalt1] Show the field ONLY if: [lbcperf]="1" and [lbcalt(55)]="0"	ALT Normal Range - Low:	text (number), Required
307	[lbcalth] Show the field ONLY if: [lbcperf]="1" and [lbcalt(55)]="0"	ALT Normal Range - High:	text (number), Required
308	[lbcalbum] Show the field ONLY if: [lbcperf]="1" and [lbcalbumr]=""	ALBUMIN	checkbox 55 lbcalbum__55 Not Done Custom alignment: LH

309	[lbcalmbr] Show the field ONLY if: [lbcperf]="1" and [lcalbm(55)] ="0"	ALBUMIN Result <i>XX</i>	text (number), Required Field Annotation: [LBORRES]
310	[lbcalmu] Show the field ONLY if: [lbcperf]="1" and [lcalbm(55)] ="0"	ALBUMIN Unit	dropdown, Required <div>1 gm/dL</div> Field Annotation: [LBORRESU]
311	[lbcalmbl] Show the field ONLY if: [lbcperf]="1" and [lcalbm(55)] ="0"	ALBUMIN Normal Range - Low:	text (number), Required
312	[lbcalmh] Show the field ONLY if: [lbcperf]="1" and [lcalbm(55)] ="0"	ALBUMIN Normal Range - High:	text (number), Required
313	[lbc alp] Show the field ONLY if: [lbcperf]="1" and [lbc alp]=""	ALP	checkbox <div>55 lbc alp__55 Not Done</div> Custom alignment: LH
314	[lbc alp r] Show the field ONLY if: [lbcperf]="1" and [lbc alp(55)]="0"	ALP Result <i>XXX</i>	text (number), Required Field Annotation: [LBORRES]
315	[lbc alp u] Show the field ONLY if: [lbcperf]="1" and [lbc alp(55)]="0"	ALP Unit	dropdown, Required <div>1 unit/L</div> Field Annotation: [LBORRESU]
316	[lbc alp l] Show the field ONLY if: [lbcperf]="1" and [lbc alp(55)]="0"	ALP Normal Range - Low:	text (number), Required
317	[lbc alp h] Show the field ONLY if: [lbcperf]="1" and [lbc alp(55)]="0"	ALP Normal Range - High:	text (number), Required
318	[lbc amy l] Show the field ONLY if: [lbcperf]="1" and [lbc amy l r]=""	AMYLASE	checkbox <div>55 lbc amy l__55 Not Done</div> Custom alignment: LH
319	[lbc amy l r] Show the field ONLY if: [lbcperf]="1" and [lbc amy(55)] ="0"	AMYLASE Result <i>XXX</i>	text (number), Required Field Annotation: [LBORRES]
320	[lbc amy l u] Show the field ONLY if: [lbcperf]="1" and [lbc amy(55)] ="0"	AMYLASE Unit	dropdown, Required <div>1 unit/L</div> Field Annotation: [LBORRESU]
321	[lbc amy l l] Show the field ONLY if: [lbcperf]="1" and [lbc amy(55)] ="0"	AMYLASE Normal Range - Low:	text (number), Required
322	[lbc amy l h] Show the field ONLY if: [lbcperf]="1" and [lbc amy(55)] ="0"	AMYLASE Normal Range - High:	text (number), Required
323	[lbc ast] Show the field ONLY if: [lbcperf]="1" and [lbc ast r]=""	AST	checkbox <div>55 lbc ast__55 Not Done</div> Custom alignment: LH
324	[lbc ast r] Show the field ONLY if: [lbcperf]="1" and [lbc ast(55)]="0"	AST Result <i>XXX</i>	text (number), Required Field Annotation: [LBORRES]

325	[lbcastu] Show the field ONLY if: [lbcperf]="1" and [lbcast(55)]=0"	AST Unit	dropdown, Required 1 unit/L Field Annotation: [LBORRESU]
326	[lbcastl] Show the field ONLY if: [lbcperf]="1" and [lbcast(55)]=0"	AST Normal Range - Low:	text (number), Required
327	[lbcasth] Show the field ONLY if: [lbcperf]="1" and [lbcast(55)]=0"	AST Normal Range - High:	text (number), Required
328	[lbcblrb] Show the field ONLY if: [lbcperf]="1" and [lbcblrb]=""	BILIRUBIN TOTAL	checkbox 55 lbcblrb__55 Not Done Custom alignment: LH
329	[lbcblrb] Show the field ONLY if: [lbcperf]="1" and [lbcblrb(55)]=0"	BILIRUBIN TOTAL Result XXX	text (number), Required Field Annotation: [LBORRES]
330	[lbcblrbu] Show the field ONLY if: [lbcperf]="1" and [lbcblrb(55)]=0"	BILIRUBIN TOTAL Unit	dropdown, Required 1 mg/dL Field Annotation: [LBORRESU]
331	[lbcblrb1] Show the field ONLY if: [lbcperf]="1" and [lbcblrb(55)]=0"	BILIRUBIN TOTAL Normal Range - Low:	text (number), Required
332	[lbcblrbh] Show the field ONLY if: [lbcperf]="1" and [lbcblrb(55)]=0"	BILIRUBIN TOTAL Normal Range - High:	text (number), Required
333	[lbccalc] Show the field ONLY if: [lbcperf]="1" and [lbccalc]=""	CALCIUM	checkbox 55 lbccalc__55 Not Done Custom alignment: LH
334	[lbccalc] Show the field ONLY if: [lbcperf]="1" and [lbccalc(55)]=0"	CALCIUM Result XXX	text (number), Required Field Annotation: [LBORRES]
335	[lbccalcu] Show the field ONLY if: [lbcperf]="1" and [lbccalc(55)]=0"	CALCIUM Unit	dropdown, Required 1 mg/dL Field Annotation: [LBORRESU]
336	[lbccalc1] Show the field ONLY if: [lbcperf]="1" and [lbccalc(55)]=0"	CALCIUM Normal Range - Low:	text (number), Required
337	[lbccalch] Show the field ONLY if: [lbcperf]="1" and [lbccalc(55)]=0"	CALCIUM Normal Range - High:	text (number), Required
338	[lbcchol] Show the field ONLY if: [lbcperf]="1" and [lbcchol]=""	CHOLESTEROL	checkbox 55 lbcchol__55 Not Done Custom alignment: LH
339	[lbcchol] Show the field ONLY if: [lbcperf]="1" and [lbcchol(55)]=0"	CHOLESTEROL Result XXX	text (number), Required Field Annotation: [LBORRES]
340	[lbccholu] Show the field ONLY if: [lbcperf]="1" and [lbcchol(55)]=0"	CHOLESTEROL Unit	dropdown, Required 1 mg/dL Field Annotation: [LBORRESU]
341	[lbcchol1] Show the field ONLY if: [lbcperf]="1" and [lbcchol(55)]=0"	CHOLESTEROL Normal Range - Low:	text (number), Required

	342	[lbccholh] Show the field ONLY if: [lbcperf]="1" and [lbcchol(55)]="0"	CHOLESTEROL Normal Range - High:	text (number), Required
	343	[lbcpk] Show the field ONLY if: [lbcperf]="1" and [lbcpk]=""	CREATINE PHOSPHOKINASE	checkbox 55 lbcpk__55 Not Done Custom alignment: LH
	344	[lbcpkkr] Show the field ONLY if: [lbcperf]="1" and [lbcpk(55)]="0"	CREATINE PHOSPHOKINASE Result xxx	text (number), Required Field Annotation: [LBORRES]
	345	[lbcpkku] Show the field ONLY if: [lbcperf]="1" and [lbcpk(55)]="0"	CREATINE PHOSPHOKINASE Unit	dropdown, Required 1 U/L Field Annotation: [LBORRESU]
	346	[lbcpk1] Show the field ONLY if: [lbcperf]="1" and [lbcpk(55)]="0"	CREATINE PHOSPHOKINASE Normal Range - Low:	text (number), Required
	347	[lbcpkh] Show the field ONLY if: [lbcperf]="1" and [lbcpk(55)]="0"	CREATINE PHOSPHOKINASE Normal Range - High:	text (number), Required
	348	[lbcggt] Show the field ONLY if: [lbcperf]="1" and [lbcggt]=""	GGT	checkbox 55 lbcggt__55 Not Done Custom alignment: LH
	349	[lbcggttr] Show the field ONLY if: [lbcperf]="1" and [lbcggt(55)]="0"	GGT Result xx	text (number), Required Field Annotation: [LBORRES]
	350	[lbcggtu] Show the field ONLY if: [lbcperf]="1" and [lbcggt(55)]="0"	GGT Unit	dropdown, Required 1 unit/L Field Annotation: [LBORRESU]
	351	[lbcggt1] Show the field ONLY if: [lbcperf]="1" and [lbcggt(55)]="0"	GGT Normal Range - Low:	text (number), Required
	352	[lbcggtth] Show the field ONLY if: [lbcperf]="1" and [lbcggt(55)]="0"	GGT Normal Range - High:	text (number), Required
	353	[lbcglb] Show the field ONLY if: [lbcperf]="1" and [lbcglb]=""	GLOBULINES	checkbox 55 lbcglb__55 Not Done Custom alignment: LH
	354	[lbcglbr] Show the field ONLY if: [lbcperf]="1" and [lbcglb(55)]="0"	GLOBULINES Result (gm/dL) xx	text (number), Required Field Annotation: [LBORRES]
	355	[lbcglbu] Show the field ONLY if: [lbcperf]="1" and [lbcglb(55)]="0"	GLOBULINES Unit (gm/dL)	dropdown, Required 1 gm/dL Field Annotation: [LBORRESU]
	356	[lbcglb1] Show the field ONLY if: [lbcperf]="1" and [lbcglb(55)]="0"	GLOBULINES Normal Range - Low:	text (number), Required
	357	[lbcglbh] Show the field ONLY if: [lbcperf]="1" and [lbcglb(55)]="0"	GLOBULINES Normal Range - High:	text (number), Required
	358	[lbciron] Show the field ONLY if: [lbcperf]="1" and [lbciron]=""	IRON	checkbox 55 lbciron__55 Not Done Custom alignment: LH
	359	[lbcironr] Show the field ONLY if: [lbcperf]="1" and [lbciron(55)]="0"	IRON Result xxx	text (number), Required Field Annotation: [LBORRES]

360	[lbcironu] Show the field ONLY if: [lbcperf]="1" and [lbciron(55)]=0"	IRON Unit	dropdown, Required 1 mcg/dL Field Annotation: [LBORRESU]
361	[lbcironl] Show the field ONLY if: [lbcperf]="1" and [lbciron(55)]=0"	IRON Normal Range - Low:	text (number), Required
362	[lbcironh] Show the field ONLY if: [lbcperf]="1" and [lbciron(55)]=0"	IRON Normal Range - High:	text (number), Required
363	[lbchdl] Show the field ONLY if: [lbcperf]="1" and [lbchdlr]="	HDL	checkbox 55 lbchdl__55 Not Done Custom alignment: LH
364	[lbchdlr] Show the field ONLY if: [lbcperf]="1" and [lbchdl(55)]=0"	HDL Result xxx	text (number), Required Field Annotation: [LBORRES]
365	[lbchdlu] Show the field ONLY if: [lbcperf]="1" and [lbchdl(55)]=0"	HDL Unit	dropdown, Required 1 mg/dL Field Annotation: [LBORRESU]
366	[lbchdl1] Show the field ONLY if: [lbcperf]="1" and [lbchdl(55)]=0"	HDL Normal Range - Low:	text (number), Required
367	[lbchdlh] Show the field ONLY if: [lbcperf]="1" and [lbchdl(55)]=0"	HDL Normal Range - High:	text (number), Required
368	[lbcldh] Show the field ONLY if: [lbcperf]="1" and [lbcldhr]="	LDH	checkbox 55 lbcldh__55 Not Done Custom alignment: LH
369	[lbcldhr] Show the field ONLY if: [lbcperf]="1" and [lbcldh(55)]=0"	LDH Result xxx	text (number), Required Field Annotation: [LBORRES]
370	[lbcldhu] Show the field ONLY if: [lbcperf]="1" and [lbcldh(55)]=0"	LDH Unit	dropdown, Required 1 unit/L Field Annotation: [LBORRESU]
371	[lbcldh1] Show the field ONLY if: [lbcperf]="1" and [lbcldh(55)]=0"	LDH Normal Range - Low:	text (number), Required
372	[lbcldh1] Show the field ONLY if: [lbcperf]="1" and [lbcldh(55)]=0"	LDH Normal Range - High:	text (number), Required
373	[lbclip] Show the field ONLY if: [lbcperf]="1" and [lbclipr]="	LIPASE	checkbox 55 lbclip__55 Not Done Custom alignment: LH
374	[lbclipr] Show the field ONLY if: [lbcperf]="1" and [lbclip(55)]=0"	LIPASE Result xxx	text (number), Required Field Annotation: [LBORRES]
375	[lbclipu] Show the field ONLY if: [lbcperf]="1" and [lbclip(55)]=0"	LIPASE Unit	dropdown, Required 1 unit/L Field Annotation: [LBORRESU]
376	[lbclip1] Show the field ONLY if: [lbcperf]="1" and [lbclip(55)]=0"	LIPASE Normal Range - Low:	text (number), Required
377	[lbcliph] Show the field ONLY if: [lbcperf]="1" and [lbclip(55)]=0"	LIPASE Normal Range - High:	text (number), Required

378	[lbcldl] Show the field ONLY if: [lbcperf]="1" and [lbcldlr]=""	LDL	checkbox 55 lbcldl__55 Not Done Custom alignment: LH
379	[lbcldlr] Show the field ONLY if: [lbcperf]="1" and [lbcldl(55)]="0"	LDL Result <i>xxx</i>	text (number), Required Field Annotation: [LBORRES]
380	[lbcldlu] Show the field ONLY if: [lbcperf]="1" and [lbcldl(55)]="0"	LDL Unit	dropdown, Required 1 mg/dL Field Annotation: [LBORRESU]
381	[lbcldll] Show the field ONLY if: [lbcperf]="1" and [lbcldl(55)]="0"	LDL Normal Range - Low:	text (number), Required
382	[lbcldlh] Show the field ONLY if: [lbcperf]="1" and [lbcldl(55)]="0"	LDL Normal Range - High:	text (number), Required
383	[lbcmagn] Show the field ONLY if: [lbcperf]="1" and [lbcmagr]=""	MAGNESIUM	checkbox 55 lbcmagn__55 Not Done Custom alignment: LH
384	[lbcmagr] Show the field ONLY if: [lbcperf]="1" and [lbcmagn(55)] ="0"	MAGNESIUM Result <i>x.x</i>	text (number), Required Field Annotation: [LBORRES]
385	[lbcmagnu] Show the field ONLY if: [lbcperf]="1" and [lbcmagn(55)] ="0"	MAGNESIUM Unit	dropdown, Required 1 mg/dL Field Annotation: [LBORRESU]
386	[lbcmagnl] Show the field ONLY if: [lbcperf]="1" and [lbcmagn(55)] ="0"	MAGNESIUM Normal Range - Low:	text (number), Required
387	[lbcmagnh] Show the field ONLY if: [lbcperf]="1" and [lbcmagn(55)] ="0"	MAGNESIUM Normal Range - High:	text (number), Required
388	[lbcphos] Show the field ONLY if: [lbcperf]="1" and [lbcphosr]=""	PHOSPHORUS	checkbox 55 lbcphos__55 Not Done Custom alignment: LH
389	[lbcphosr] Show the field ONLY if: [lbcperf]="1" and [lbcphos(55)] ="0"	PHOSPHORUS Result <i>x.x</i>	text (number), Required Field Annotation: [LBORRES]
390	[lbcphosu] Show the field ONLY if: [lbcperf]="1" and [lbcphos(55)] ="0"	PHOSPHORUS Unit	dropdown, Required 1 mg/dL Field Annotation: [LBORRESU]
391	[lbcphosl] Show the field ONLY if: [lbcperf]="1" and [lbcphos(55)] ="0"	PHOSPHORUS Normal Range - Low:	text (number), Required
392	[lbcphosh] Show the field ONLY if: [lbcperf]="1" and [lbcphos(55)] ="0"	PHOSPHORUS Normal Range - High:	text (number), Required
393	[lbctotp] Show the field ONLY if: [lbcperf]="1" and [lbctotpr]=""	TOTAL PROTEINS	checkbox 55 lbctotp__55 Not Done Custom alignment: LH

	394	[lbctotpr] Show the field ONLY if: [lbcperf]="1" and [lbctotp(55)]="0"	TOTAL PROTEINS Result <i>XX</i>	text (number), Required Field Annotation: [LBORRES]
	395	[lbctotpu] Show the field ONLY if: [lbcperf]="1" and [lbctotp(55)]="0"	TOTAL PROTEINS Unit	dropdown, Required <input type="text" value="1"/> gm/dL Field Annotation: [LBORRESU]
	396	[lbctotpl] Show the field ONLY if: [lbcperf]="1" and [lbctotp(55)]="0"	TOTAL PROTEINS Normal Range - Low:	text (number), Required
	397	[lbctotph] Show the field ONLY if: [lbcperf]="1" and [lbctotp(55)]="0"	TOTAL PROTEINS Normal Range - High:	text (number), Required
	398	[lbct4] Show the field ONLY if: [lbcperf]="1" and [lbct4r]=""	T4	checkbox <input type="checkbox"/> 55 <input type="checkbox"/> lbct4__55 <input type="checkbox"/> Not Done Custom alignment: LH
	399	[lbct4r] Show the field ONLY if: [lbcperf]="1" and [lbct4(55)]="0"	T4 Result <i>XXX</i>	text (number), Required Field Annotation: [LBORRES]
	400	[lbct4u] Show the field ONLY if: [lbcperf]="1" and [lbct4(55)]="0"	T4 Unit	dropdown, Required <input type="text" value="1"/> ng/dL Field Annotation: [LBORRESU]
	401	[lbct4l] Show the field ONLY if: [lbcperf]="1" and [lbct4(55)]="0"	T4 Normal Range - Low:	text (number), Required
	402	[lbct4h] Show the field ONLY if: [lbcperf]="1" and [lbct4(55)]="0"	T4 Normal Range - High:	text (number), Required
	403	[lbctsh] Show the field ONLY if: [lbcperf]="1" and [lbctshr]=""	TSH	checkbox <input type="checkbox"/> 55 <input type="checkbox"/> lbctsh__55 <input type="checkbox"/> Not Done Custom alignment: LH
	404	[lbctshr] Show the field ONLY if: [lbcperf]="1" and [lbctsh(55)]="0"	TSH Result <i>XX</i>	text (number), Required Field Annotation: [LBORRES]
	405	[lbctshu] Show the field ONLY if: [lbcperf]="1" and [lbctsh(55)]="0"	TSH Unit	dropdown, Required <input type="text" value="1"/> mIU/mL Field Annotation: [LBORRESU]
	406	[lbctshl] Show the field ONLY if: [lbcperf]="1" and [lbctsh(55)]="0"	TSH Normal Range - Low:	text (number), Required
	407	[lbctshh] Show the field ONLY if: [lbcperf]="1" and [lbctsh(55)]="0"	TSH Normal Range - High:	text (number), Required
	408	[lbct3] Show the field ONLY if: [lbcperf]="1" and [lbct3r]=""	T3	checkbox <input type="checkbox"/> 55 <input type="checkbox"/> lbct3__55 <input type="checkbox"/> Not Done Custom alignment: LH
	409	[lbct3r] Show the field ONLY if: [lbcperf]="1" and [lbct3(55)]="0"	T3 Result <i>XXX</i>	text (number), Required Field Annotation: [LBORRES]
	410	[lbct3u] Show the field ONLY if: [lbcperf]="1" and [lbct3(55)]="0"	T3 Unit	dropdown, Required <input type="text" value="1"/> ng/mL Field Annotation: [LBORRESU]

411	[lbct3l] Show the field ONLY if: [lbcperf]="1" and [lbct3(55)]="0"	T3 Normal Range - Low:	text (number), Required
412	[lbct3h] Show the field ONLY if: [lbcperf]="1" and [lbct3(55)]="0"	T3 Normal Range - High:	text (number), Required
413	[lbctgcd] Show the field ONLY if: [lbcperf]="1" and [lbctgcdr]=""	TRIGLICERIDES	checkbox 55 lbctgcd__55 Not Done Custom alignment: LH
414	[lbctgcdr] Show the field ONLY if: [lbcperf]="1" and [lbctgcd(55)]= "0"	TRIGLICERIDES Result xxx	text (number), Required Field Annotation: [LBORRES]
415	[lbctgcdu] Show the field ONLY if: [lbcperf]="1" and [lbctgcd(55)]= "0"	TRIGLICERIDES Unit	dropdown, Required 1 mg/dL Field Annotation: [LBORRESU]
416	[lbctgcdl] Show the field ONLY if: [lbcperf]="1" and [lbctgcd(55)]= "0"	TRIGLICERIDES Normal Range - Low:	text (number), Required
417	[lbctgcdh] Show the field ONLY if: [lbcperf]="1" and [lbctgcd(55)]= "0"	TRIGLICERIDES Normal Range - High:	text (number), Required
418	[lbcuric] Show the field ONLY if: [lbcperf]="1" and [lbcuricr]=""	URIC ACID	checkbox 55 lbcuric__55 Not Done Custom alignment: LH
419	[lbcuricr] Show the field ONLY if: [lbcperf]="1" and [lbcuric(55)]= "0"	URIC ACID Result x.x	text (number), Required Field Annotation: [LBORRES]
420	[lbcuricu] Show the field ONLY if: [lbcperf]="1" and [lbcuric(55)]= "0"	URIC ACID Unit	dropdown, Required 1 mg/dL Field Annotation: [LBORRESU]
421	[lbcuricl] Show the field ONLY if: [lbcperf]="1" and [lbcuric(55)]= "0"	URIC ACID Normal Range - Low:	text (number), Required
422	[lbcurich] Show the field ONLY if: [lbcperf]="1" and [lbcuric(55)]= "0"	URIC ACID Normal Range - High:	text (number), Required
423	[lbcurid]	User ID:	text Field Annotation: @USERNAME @HIDDEN
424	[laboratory_chemistry_comple te]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: Laboratory - Urinalysis (laboratory_urinalysis)

425	[lbuvsd at]	Visit Date: <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required
426	[lbuperf]	Lab sample collected?	yesno, Required 1 Yes 0 No Custom alignment: RH Field Annotation: lbdtc
427	[lbudat] Show the field ONLY if: [lbuperf]="1"	Lab sample collection date: <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: lbdatt

428	[lbutim] Show the field ONLY if: [lbuperf]="1" and [lbutimun(33)] ="0"	Lab sample collection time: <i>HH:MM (24-hour clock)</i>	text (time), Required Field Annotation: lbdtc
429	[lbutimun] Show the field ONLY if: [lbuperf]="1" and [lbutim]=""		checkbox, Required 33 lbutimun__33 Lab Sample Collection Time Unknown
430	[lbucond] Show the field ONLY if: [lbuperf]="1"	Subject fasting?	yesno, Required 1 Yes 0 No Custom alignment: RH
431	[lbcinst2]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** If the study is utilizing a central lab, the table of results, normal range fields, and "Not Done" checkboxes can be removed. This information would be transferred electronically and does not need to also be entered into the clinical database. For data cleaning purposes, ranges should be set (as applicable) on the results fields based on PI/Sponsor instruction/feedback. The normal ranges (high/low fields) provided by the local lab may differ from the sponsor-defined data quality ranges for which they wish to flag results. For tests with results or ranges with special characters (e.g., < 5, >100, etc.), check with the sponsor, PI, or statistician on how they want to handle them (e.g., omitting special characters and only entering the numeric component, retaining the special character, etc.). The unit of measure for each parameter should be hardcoded into the field label. We have purposefully left these out of the template because some studies choose to use SI units and others may use Imperial units. Disclaimer: The tests listed below are just an example of possible tests and their results that can apply and are not meant to be exhaustive. The Data Manager will want to work with the project team and the protocol to determine which tests will be performed and recorded in the clinical database. In addition, different labs may provide results differently for some tests. As such, ensure that the data format and ranges for these tests are reviewed and modified to meet the study protocol needs. If the study has multiple sites and multiple local labs will be used, greater consideration may need to be taken to accommodate the collection of the data. Note: Normal Range high and low variables should be provided/added for any continuous results variables (i.e., quantitative variables that collect a numeric result). Non-continuous results variables (i.e. qualitative variables) may only provide a result and thus do not have a high or low "range."	descriptive Field Annotation: @HIDDEN
432	[lbutab11] Show the field ONLY if: [lbuperf]=1	PHYSICAL/VISUAL Result Check if Not Done COLOR {lbucolr:icons} {lbucol:icons} APPEARANCE {lbuaprcr:icons} {lbuaprc:icons}	descriptive
433	[lbutab12] Show the field ONLY if: [lbuperf]=1	CHEMICAL Result Unit of Measure Normal Range - Low Normal Range - High Check if Not Done SPECIFIC GRAVITY {lbuspgr:icons} {lbuspgru:icons} {lbuspgrl:icons} {lbuspgrh:icons} {lbuspgr:icons} pH {lbuphr:icons} {lbuphu:icons} {lbuphl:icons} {lbuphh:icons} {lbuph:icons} BILIRUBIN {lbublrb:icons} {lbublrbu:icons} {lbublrb:icons} {lbublrbh:icons} {lbublrb:icons} UROBILINOGEN {lbuuorbr:icons} {lbuuorbu:icons} {lbuuorbl:icons} {lbuuorbh:icons} {lbuuorob:icons} PROTEIN {lbuptrnr:icons} {lbuptrnu:icons} {lbuptrnl:icons} {lbuptrnh:icons} {lbuptrn:icons} GLUCOSE {lbuglcsr:icons} {lbuglcsu:icons} {lbuglcl:icons} {lbuglclsh:icons} {lbuglcs:icons} KETONES {lbuktnsr:icons} {lbuktnsu:icons} {lbuktnsl:icons} {lbuktnsh:icons} {lbuktns:icons} BLOOD {lbublldr:icons} {lbubldu:icons} {lbubldl:icons} {lbubldh:icons} {lbubld:icons} LEUKOCYTE ESTERASE {lbukctr:icons} {lbukctu:icons} {lbukctl:icons} {lbukcth:icons} {lbukct:icons} NITRITE {lbuntrtr:icons} {lbuntrtu:icons} {lbuntrtl:icons} {lbuntrth:icons} {lbuntrt:icons}	descriptive
434	[lbutab13] Show the field ONLY if: [lbuperf]=1	MICROSCOPIC Result Unit of Measure Normal Range - Low Normal Range - High Check if Not Done RBC {lburbc:icons} {lburbcu:icons} {lburbcd:icons} {lburbch:icons} {lburbc:icons} WBC {lbuwbc:icons} {lbuwbcu:icons} {lbuwbcd:icons} {lbuwbch:icons} {lbuwbc:icons} EPITHELIAL CELLS {lbuepthr:icons} {lbuepthu:icons} {lbuepthl:icons} {lbuepthh:icons} {lbuepth:icons} CASTS {lbucastr:icons} {lbucastu:icons} {lbucastl:icons} {lbucasth:icons} {lbucast:icons}	descriptive

435	[lbucol] Show the field ONLY if: [lbuperf]="1" and [lbucolr]=""	COLOR	checkbox 55 lbucol__55 Not Done Custom alignment: LH
436	[lbucolr] Show the field ONLY if: [lbuperf]="1" and [lbucol(55)]="0"	COLOR Result	text, Required Field Annotation: [LBORRES]
437	[lbuprc] Show the field ONLY if: [lbuperf]="1" and [lbuprcr]=""	APPEARANCE	checkbox 55 lbuprc__55 Not Done Custom alignment: LH
438	[lbuprcr] Show the field ONLY if: [lbuperf]="1" and [lbuprc(55)]="0"	APPEARANCE Result	text, Required Field Annotation: [LBORRES]
439	[lbuspcg] Show the field ONLY if: [lbuperf]="1" and [lbuspcgr]=""	SPECIFIC GRAVITY	checkbox 55 lbuspcg__55 Not Done Custom alignment: LH
440	[lbuspcgr] Show the field ONLY if: [lbuperf]="1" and [lbuspcg(55)]="0"	SPECIFIC GRAVITY Result <i>X.XXX</i>	text (number), Required Field Annotation: [LBORRES]
441	[lbuspcgu] Show the field ONLY if: [lbuperf]="1" and [lbuspcg(55)]="0"	SPECIFIC GRAVITY Unit	dropdown, Required 0 None Field Annotation: [LBORRESU]
442	[lbuspcgl] Show the field ONLY if: [lbuperf]="1" and [lbuspcg(55)]="0"	SPECIFIC GRAVITY Normal Range - Low:	text (number), Required
443	[lbuspcgh] Show the field ONLY if: [lbuperf]="1" and [lbuspcg(55)]="0"	SPECIFIC GRAVITY Normal Range - High:	text (number), Required
444	[lbuph] Show the field ONLY if: [lbuperf]="1" and [lbuphr]=""	PH	checkbox 55 lbuph__55 Not Done Custom alignment: LH
445	[lbuphr] Show the field ONLY if: [lbuperf]="1" and [lbuph(55)]="0"	PH Result <i>X.X</i>	text (number), Required Field Annotation: [LBORRES]
446	[lbuphu] Show the field ONLY if: [lbuperf]="1" and [lbuph(55)]="0"	PH Unit	dropdown, Required 0 None Field Annotation: [LBORRESU]
447	[lbuphl] Show the field ONLY if: [lbuperf]="1" and [lbuph(55)]="0"	PH Normal Range - Low:	text (number), Required
448	[lbuphh] Show the field ONLY if: [lbuperf]="1" and [lbuph(55)]="0"	PH Normal Range - High:	text (number), Required
449	[lbuglcs] Show the field ONLY if: [lbuperf]="1" and [lbuglcsr]=""	GLUCOSE	checkbox 55 lbuglcs__55 Not Done Custom alignment: LH
450	[lbuglcsr] Show the field ONLY if: [lbuperf]="1" and [lbuglcs(55)]="0"	GLUCOSE Result	text, Required Field Annotation: [LBORRES]

451	[lbuglcsu] Show the field ONLY if: [lbuperf]="1" and [lbuglcs(55)]="0"	GLUCOSE Unit	dropdown, Required <input type="text" value="1"/> mg/24 hr Field Annotation: [LBORRESU]
452	[lbuglcs1] Show the field ONLY if: [lbuperf]="1" and [lbuglcs(55)]="0"	GLUCOSE Normal Range - Low:	text, Required
453	[lbuglcsH] Show the field ONLY if: [lbuperf]="1" and [lbuglcs(55)]="0"	GLUCOSE Normal Range - High:	text, Required
454	[lbuktns] Show the field ONLY if: [lbuperf]="1" and [lbuktnsr]=""	KETONES	checkbox <input type="text" value="55"/> lbuktns__55 Not Done Custom alignment: LH
455	[lbuktnsr] Show the field ONLY if: [lbuperf]="1" and [lbuktns(55)]="0"	KETONES Result	text, Required Field Annotation: [LBORRES]
456	[lbuktnsu] Show the field ONLY if: [lbuperf]="1" and [lbuktns(55)]="0"	KETONES Unit	dropdown, Required <input type="text" value="1"/> mg/dL Field Annotation: [LBORRESU]
457	[lbuktns1] Show the field ONLY if: [lbuperf]="1" and [lbuktns(55)]="0"	KETONES Normal Range - Low:	text, Required
458	[lbuktnsh] Show the field ONLY if: [lbuperf]="1" and [lbuktns(55)]="0"	KETONES Normal Range - High:	text, Required
459	[lbubld] Show the field ONLY if: [lbuperf]="1" and [lbubldr]=""	BLOOD	checkbox <input type="text" value="55"/> lbubld__55 Not Done Custom alignment: LH
460	[lbubldr] Show the field ONLY if: [lbuperf]="1" and [lbubld(55)]="0"	BLOOD Result	text, Required Field Annotation: [LBORRES]
461	[lbubldu] Show the field ONLY if: [lbuperf]="1" and [lbubld(55)]="0"	BLOOD Unit	dropdown, Required <input type="text" value="0"/> None Field Annotation: [LBORRESU]
462	[lbubld1] Show the field ONLY if: [lbuperf]="1" and [lbubld(55)]="0"	BLOOD Normal Range - Low:	text, Required
463	[lbubldh] Show the field ONLY if: [lbuperf]="1" and [lbubld(55)]="0"	BLOOD Normal Range - High:	text, Required
464	[lbuprtn] Show the field ONLY if: [lbuperf]="1" and [lbuprtnr]=""	PROTEIN	checkbox <input type="text" value="55"/> lbuprtn__55 Not Done Custom alignment: LH
465	[lbuprtnr] Show the field ONLY if: [lbuperf]="1" and [lbuprtn(55)]="0"	PROTEIN Result	text, Required Field Annotation: [LBORRES]
466	[lbuprtnu] Show the field ONLY if: [lbuperf]="1" and [lbuprtn(55)]="0"	PROTEIN Unit	dropdown, Required <input type="text" value="1"/> mg/dL Field Annotation: [LBORRESU]

467	[lbuprtn1] Show the field ONLY if: [lbuperf]="1" and [lbuprtn(55)] ="0"	PROTEIN Normal Range - Low:	text, Required
468	[lbuprtnh] Show the field ONLY if: [lbuperf]="1" and [lbuprtn(55)] ="0"	PROTEIN Normal Range - High:	text, Required
469	[lbublrb] Show the field ONLY if: [lbuperf]="1" and [lbublrb]=""	BILIRUBIN	checkbox 55 lbublrb__55 Not Done Custom alignment: LH
470	[lbublrb] Show the field ONLY if: [lbuperf]="1" and [lbublrb(55)] ="0"	BILIRUBIN Result	text, Required Field Annotation: [LBORRES]
471	[lbublrbu] Show the field ONLY if: [lbuperf]="1" and [lbublrb(55)] ="0"	BILIRUBIN Unit	dropdown, Required 0 None Field Annotation: [LBORRESU]
472	[lbublrb1] Show the field ONLY if: [lbuperf]="1" and [lbublrb(55)] ="0"	BILIRUBIN Normal Range - Low:	text, Required
473	[lbublrbh] Show the field ONLY if: [lbuperf]="1" and [lbublrb(55)] ="0"	BILIRUBIN Normal Range - High:	text, Required
474	[lbuurob] Show the field ONLY if: [lbuperf]="1" and [lbuurob]=""	UROBILINOGEN	checkbox 55 lbuurob__55 Not Done Custom alignment: LH
475	[lbuurob] Show the field ONLY if: [lbuperf]="1" and [lbuurob(55)] ="0"	UROBILINOGEN Result <i>XX</i>	text (number), Required Field Annotation: [LBORRES]
476	[lbuuobu] Show the field ONLY if: [lbuperf]="1" and [lbuuob(55)] ="0"	UROBILINOGEN Unit	dropdown, Required 1 mg/dL Field Annotation: [LBORRESU]
477	[lbuurob1] Show the field ONLY if: [lbuperf]="1" and [lbuuob(55)] ="0"	UROBILINOGEN Normal Range - Low:	text (number), Required
478	[lbuuobh] Show the field ONLY if: [lbuperf]="1" and [lbuuob(55)] ="0"	UROBILINOGEN Normal Range - High:	text (number), Required
479	[lbuntrt] Show the field ONLY if: [lbuperf]="1" and [lbuntrt]=""	NITRITE	checkbox 55 lbuntrt__55 Not Done Custom alignment: LH
480	[lbuntrt] Show the field ONLY if: [lbuperf]="1" and [lbuntrt(55)] ="0"	NITRITE Result	text, Required Field Annotation: [LBORRES]
481	[lbunrtu] Show the field ONLY if: [lbuperf]="1" and [lbunrt(55)] ="0"	NITRITE Unit	dropdown, Required 0 None Field Annotation: [LBORRESU]
482	[lbunrt1] Show the field ONLY if: [lbuperf]="1" and [lbunrt(55)] ="0"	NITRITE Normal Range - Low:	text, Required

483	[lbuntrth] Show the field ONLY if: [lbuperf]="1" and [lbuntrt(55)]="0"	NITRITE Normal Range - High:	text, Required
484	[lbulkct] Show the field ONLY if: [lbuperf]="1" and [lbulkctr]=""	LEUKOCYTE ESTERASE	checkbox 55 lbulkct__55 Not Done Custom alignment: LH
485	[lbulkctr] Show the field ONLY if: [lbuperf]="1" and [lbulkct(55)]="0"	LEUKOCYTE ESTERASE Result	text, Required Field Annotation: [LBORRES]
486	[lbulkctu] Show the field ONLY if: [lbuperf]="1" and [lbulkct(55)]="0"	LEUKOCYTE ESTERASE Unit	dropdown, Required 0 None Field Annotation: [LBORRESU]
487	[lbulkct1] Show the field ONLY if: [lbuperf]="1" and [lbulkct(55)]="0"	LEUKOCYTE ESTERASE Normal Range - Low:	text, Required
488	[lbulkctth] Show the field ONLY if: [lbuperf]="1" and [lbulkct(55)]="0"	LEUKOCYTE ESTERASE Normal Range - High:	text, Required
489	[lbucast] Show the field ONLY if: [lbuperf]="1" and [lbucastr]=""	CASTS	checkbox 55 lbucast__55 Not Done Custom alignment: LH
490	[lbucastr] Show the field ONLY if: [lbuperf]="1" and [lbucast(55)]="0"	CASTS Result	text, Required Field Annotation: [LBORRES]
491	[lbucastu] Show the field ONLY if: [lbuperf]="1" and [lbucast(55)]="0"	CASTS Unit	dropdown, Required 0 None Field Annotation: [LBORRESU]
492	[lbucast1] Show the field ONLY if: [lbuperf]="1" and [lbucast(55)]="0"	CASTS Normal Range - Low:	text, Required
493	[lbucastth] Show the field ONLY if: [lbuperf]="1" and [lbucast(55)]="0"	CASTS Normal Range - High:	text, Required
494	[lburbc] Show the field ONLY if: [lbuperf]="1" and [lburbcr]=""	RBC	checkbox 55 lburbc__55 Not Done Custom alignment: LH
495	[lburbcr] Show the field ONLY if: [lbuperf]="1" and [lburbc(55)]="0"	RBC Result	text, Required Field Annotation: [LBORRES]
496	[lburbcu] Show the field ONLY if: [lbuperf]="1" and [lburbc(55)]="0"	RBC Unit	dropdown, Required 1 /HPF Field Annotation: [LBORRESU]
497	[lburbc1] Show the field ONLY if: [lbuperf]="1" and [lburbc(55)]="0"	RBC Normal Range - Low:	text, Required
498	[lburbch] Show the field ONLY if: [lbuperf]="1" and [lburbc(55)]="0"	RBC Normal Range - High:	text, Required
499	[lbuwbc] Show the field ONLY if: [lbuperf]="1" and [lbuwbcr]=""	WBC	checkbox 55 lbuwbc__55 Not Done Custom alignment: LH

	500	[lbuwbc^r] Show the field ONLY if: [lbuperf]="1" and [lbuwbc(55)] ="0"	WBC Result	text, Required Field Annotation: [LBORRES]						
	501	[lbuwb^{cu}] Show the field ONLY if: [lbuperf]="1" and [lbuwbc(55)] ="0"	WBC Unit	dropdown, Required <table><tr><td>1</td><td>/HPF</td></tr></table> Field Annotation: [LBORRESU]	1	/HPF				
1	/HPF									
	502	[lbuwb^{cl}] Show the field ONLY if: [lbuperf]="1" and [lbuwbc(55)] ="0"	WBC Normal Range - Low:	text, Required						
	503	[lbuwb^{ch}] Show the field ONLY if: [lbuperf]="1" and [lbuwbc(55)] ="0"	WBC Normal Range - High:	text, Required						
	504	[lbuepth] Show the field ONLY if: [lbuperf]="1" and [lbuep ^{thr}]=""	EPITHELIAL CELLS	checkbox <table><tr><td>55</td><td>lbuepth__55</td><td>Not Done</td></tr></table> Custom alignment: LH	55	lbuep th __55	Not Done			
55	lbuep th __55	Not Done								
	505	[lbuep^{th^r}] Show the field ONLY if: [lbuperf]="1" and [lbuep th (55)] ="0"	EPITHELIAL CELLS Result	text, Required Field Annotation: [LBORRES]						
	506	[lbuep^{th^u}] Show the field ONLY if: [lbuperf]="1" and [lbuep th (55)] ="0"	EPITHELIAL CELLS Unit	dropdown, Required <table><tr><td>0</td><td>None</td></tr></table> Field Annotation: [LBORRESU]	0	None				
0	None									
	507	[lbuep^{th^l}] Show the field ONLY if: [lbuperf]="1" and [lbuep th (55)] ="0"	EPITHELIAL CELLS Normal Range - Low:	text, Required						
	508	[lbuep^{th^h}] Show the field ONLY if: [lbuperf]="1" and [lbuep th (55)] ="0"	EPITHELIAL CELLS Normal Range - High:	text, Required						
	509	[lbus^{usrid}]	User ID:	text Field Annotation: @USERNAME @HIDDEN						
	510	[laboratory_urinalysis_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete									
1	Unverified									
2	Complete									

Instrument: Neurological Exam (neurological_exam)

	511	[neperf]	Was Neurological Exam performed?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No		
1	Yes									
0	No									
	512	[neperfnd] Show the field ONLY if: [neperf]='0'	If no, please briefly describe why:	notes, Required						
	513	[nedat] Show the field ONLY if: [neperf] = '1'	Neurological Exam Date: <i>MM-DD-YYYY</i>	text (date_mdy, Max: today), Required						
	514	[nement] Show the field ONLY if: [neperf] = '1'	Mental Status:	radio, Required <table><tr><td>1</td><td>Normal</td></tr><tr><td>2</td><td>Abnormal, Not clinically significant</td></tr><tr><td>3</td><td>Abnormal, Clinically significant</td></tr></table>	1	Normal	2	Abnormal, Not clinically significant	3	Abnormal, Clinically significant
1	Normal									
2	Abnormal, Not clinically significant									
3	Abnormal, Clinically significant									
	515	[nementa1] Show the field ONLY if: [nement] = '3'	Mental Status, if clinically significant, describe (1):	text, Required						

516	<div>[nements1]</div> <div>Show the field ONLY if: [nement] = '3'</div>	Mental status abnormality (1): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
517	<div>[nementa2]</div> <div>Show the field ONLY if: [nement] = '3' and [nementa1]<>"</div>	Mental Status, if clinically significant, describe (2):	text						
518	<div>[nements2]</div> <div>Show the field ONLY if: [nement] = '3' and [nementa2] <>""</div>	Mental status abnormality (2): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
519	<div>[nementa3]</div> <div>Show the field ONLY if: [nement] = '3' and [nementa2]<>"</div>	Mental Status, if clinically significant, describe (3):	text						
520	<div>[nements3]</div> <div>Show the field ONLY if: [nement] = '3' and [nementa3] <>""</div>	Mental status abnormality (3): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
521	<div>[nementa4]</div> <div>Show the field ONLY if: [nement] = '3' and [nementa3]<>"</div>	Mental Status, if clinically significant, describe (4):	text						
522	<div>[nements4]</div> <div>Show the field ONLY if: [nement] = '3' and [nementa4] <>""</div>	Mental status abnormality (4): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
523	<div>[nementa5]</div> <div>Show the field ONLY if: [nement] = '3' and [nementa4]<>"</div>	Mental Status, if clinically significant, describe (5):	text						
524	<div>[nements5]</div> <div>Show the field ONLY if: [nement] = '3' and [nementa5] <>""</div>	Mental status abnormality (5): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
525	<div>[necrnv]</div> <div>Show the field ONLY if: [necrpf] = '1'</div>	Cranial Nerves:	radio, Required <table><tr><td>1</td><td>Normal</td></tr><tr><td>2</td><td>Abnormal, Not clinically significant</td></tr><tr><td>3</td><td>Abnormal, Clinically significant</td></tr></table>	1	Normal	2	Abnormal, Not clinically significant	3	Abnormal, Clinically significant
1	Normal								
2	Abnormal, Not clinically significant								
3	Abnormal, Clinically significant								
526	<div>[necrnva1]</div> <div>Show the field ONLY if: [necrnv]=3</div>	Cranial Nerves, if clinically significant, describe (1):	text, Required						
527	<div>[necrnvs1]</div> <div>Show the field ONLY if: [necrnv]=3</div>	Cranial Nerves abnormality (1): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
528	<div>[necrnva2]</div> <div>Show the field ONLY if: [necrnv]=3 and [necrnva1]<>"</div>	Cranial Nerves, if clinically significant, describe (2):	text						
529	<div>[necrnvs2]</div> <div>Show the field ONLY if: [necrnv]=3 and [necrnva2]<>""</div>	Cranial Nerves abnormality (2): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
530	<div>[necrnva3]</div> <div>Show the field ONLY if: [necrnv]=3 and [necrnva2]<>"</div>	Cranial Nerves, if clinically significant, describe (3):	text						
531	<div>[necrnvs3]</div> <div>Show the field ONLY if: [necrnv]=3 and [necrnva3]<>""</div>	Cranial Nerves abnormality (3): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
532	<div>[necrnva4]</div> <div>Show the field ONLY if: [necrnv]=3 and [necrnva3]<>"</div>	Cranial Nerves, if clinically significant, describe (4):	text						
533	<div>[necrnvs4]</div> <div>Show the field ONLY if: [necrnv]=3 and [necrnva4]<>""</div>	Cranial Nerves abnormality (4): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								

534	<div>[necrnva5]</div> <div>Show the field ONLY if: [necrnv]=3 and [necrnva4]<>"</div>	Cranial Nerves, if clinically significant, describe (5):	text
535	<div>[necrnvs5]</div> <div>Show the field ONLY if: [necrnv]=3 and [necrnva5]<>""</div>	Cranial Nerves abnormality (5): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
536	<div>[nemotr]</div> <div>Show the field ONLY if: [neperf] = '1'</div>	Motor System:	radio, Required <div>1Normal 2Abnormal, Not clinically significant 3Abnormal, Clinically significant</div>
537	<div>[nemotra1]</div> <div>Show the field ONLY if: [nemotr]=3</div>	Motor System, if clinically significant, describe (1):	text, Required
538	<div>[nemotrs1]</div> <div>Show the field ONLY if: [nemotr]=3</div>	Motor System abnormality (1): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
539	<div>[nemotra2]</div> <div>Show the field ONLY if: [nemotr]=3 and [nemotra1]<>"</div>	Motor System, if clinically significant, describe (2):	text
540	<div>[nemotrs2]</div> <div>Show the field ONLY if: [nemotr]=3 and [nemotra2]<>""</div>	Motor System abnormality (2): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
541	<div>[nemotra3]</div> <div>Show the field ONLY if: [nemotr]=3 and [nemotra2]<>"</div>	Motor System, if clinically significant, describe (3):	text
542	<div>[nemotrs3]</div> <div>Show the field ONLY if: [nemotr]=3 and [nemotra3]<>""</div>	Motor System abnormality (3): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
543	<div>[nemotra4]</div> <div>Show the field ONLY if: [nemotr]=3 and [nemotra3]<>"</div>	Motor System, if clinically significant, describe (4):	text
544	<div>[nemotrs4]</div> <div>Show the field ONLY if: [nemotr]=3 and [nemotra4]<>""</div>	Motor System abnormality (4): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
545	<div>[nemotra5]</div> <div>Show the field ONLY if: [nemotr]=3 and [nemotra4]<>"</div>	Motor System, if clinically significant, describe (5):	text
546	<div>[nemotrs5]</div> <div>Show the field ONLY if: [nemotr]=3 and [nemotra5]<>""</div>	Motor System abnormality (5): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
547	<div>[nesnsr]</div> <div>Show the field ONLY if: [neperf] = '1'</div>	Sensory System	radio, Required <div>1Normal 2Abnormal, Not clinically significant 3Abnormal, Clinically significant</div>
548	<div>[nesnsra1]</div> <div>Show the field ONLY if: [nesnsr]=3</div>	Sensory System, if clinically significant, describe (1):	text, Required
549	<div>[nesnsrs1]</div> <div>Show the field ONLY if: [nesnsr]=3</div>	Sensory system abnormality (1): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
550	<div>[nesnsra2]</div> <div>Show the field ONLY if: [nesnsr]=3 and [nesnsra1]<>"</div>	Sensory System, if clinically significant, describe (2):	text
551	<div>[nesnsrs2]</div> <div>Show the field ONLY if: [nesnsr]=3 and [nesnsra2]<> ""</div>	Sensory system abnormality (2): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
552	<div>[nesnsra3]</div> <div>Show the field ONLY if: [nesnsr]=3 and [nesnsra2]<>"</div>	Sensory System, if clinically significant, describe (3):	text

553	<div>[nesnsrs3]</div> <div>Show the field ONLY if: [nesnsr]=3 and [nesnsra3]<> ""</div>	Sensory system abnormality (3): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
554	<div>[nesnsra4]</div> <div>Show the field ONLY if: [nesnsr]=3 and [nesnsra3]<>"</div>	Sensory System, if clinically significant, describe (4):	text						
555	<div>[nesnsrs4]</div> <div>Show the field ONLY if: [nesnsr]=3 and [nesnsra4]<> ""</div>	Sensory system abnormality (4): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
556	<div>[nesnsra5]</div> <div>Show the field ONLY if: [nesnsr]=3 and [nesnsra4]<>"</div>	Sensory System, if clinically significant, describe (5):	text						
557	<div>[nesnsrs5]</div> <div>Show the field ONLY if: [nesnsr]=3 and [nesnsra5]<> ""</div>	Sensory system abnormality (5): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
558	<div>[nerflx]</div> <div>Show the field ONLY if: [nerperf] = '1'</div>	Reflexes	radio, Required <table><tr><td>1</td><td>Normal</td></tr><tr><td>2</td><td>Abnormal, Not clinically significant</td></tr><tr><td>3</td><td>Abnormal, Clinically significant</td></tr></table>	1	Normal	2	Abnormal, Not clinically significant	3	Abnormal, Clinically significant
1	Normal								
2	Abnormal, Not clinically significant								
3	Abnormal, Clinically significant								
559	<div>[nerflxa1]</div> <div>Show the field ONLY if: [nerflx]=3</div>	Reflexes, if clinically significant, describe (1)	text, Required						
560	<div>[nerflxs1]</div> <div>Show the field ONLY if: [nerflx]=3</div>	Reflexes abnormality (1): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
561	<div>[nerflxa2]</div> <div>Show the field ONLY if: [nerflx]=3 and [nerflxa1]<>"</div>	Reflexes, if clinically significant, describe (2)	text						
562	<div>[nerflxs2]</div> <div>Show the field ONLY if: [nerflx]=3 and [nerflxa2]<>""</div>	Reflexes abnormality (2): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
563	<div>[nerflxa3]</div> <div>Show the field ONLY if: [nerflx]=3 and [nerflxa2]<>"</div>	Reflexes, if clinically significant, describe (3)	text						
564	<div>[nerflxs3]</div> <div>Show the field ONLY if: [nerflx]=3 and [nerflxa3]<>""</div>	Reflexes abnormality (3): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
565	<div>[nerflxa4]</div> <div>Show the field ONLY if: [nerflx]=3 and [nerflxa3]<>"</div>	Reflexes, if clinically significant, describe (4)	text						
566	<div>[nerflxs4]</div> <div>Show the field ONLY if: [nerflx]=3 and [nerflxa4]<>""</div>	Reflexes abnormality (4): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
567	<div>[nerflxa5]</div> <div>Show the field ONLY if: [nerflx]=3 and [nerflxa4]<>"</div>	Reflexes, if clinically significant, describe (5)	text						
568	<div>[nerflxs5]</div> <div>Show the field ONLY if: [nerflx]=3 and [nerflxa5]<>""</div>	Reflexes abnormality (5): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								
569	<div>[necord]</div> <div>Show the field ONLY if: [nerperf] = '1'</div>	Coordination	radio, Required <table><tr><td>1</td><td>Normal</td></tr><tr><td>2</td><td>Abnormal, Not clinically significant</td></tr><tr><td>3</td><td>Abnormal, Clinically significant</td></tr></table>	1	Normal	2	Abnormal, Not clinically significant	3	Abnormal, Clinically significant
1	Normal								
2	Abnormal, Not clinically significant								
3	Abnormal, Clinically significant								
570	<div>[necorda1]</div> <div>Show the field ONLY if: [necord]=3</div>	Coordination, if clinically significant, describe (1):	text, Required						
571	<div>[necords1]</div> <div>Show the field ONLY if: [necord]=3</div>	Coordination abnormality (1): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <table><tr><td>BIOPORTAL:SNOMEDCT</td><td>BIOPORTAL:SNOMEDCT</td></tr></table>	BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT				
BIOPORTAL:SNOMEDCT	BIOPORTAL:SNOMEDCT								

572	<div>[necorda2]</div> <div>Show the field ONLY if: [necord]=3 and [necorda1]<>"</div>	Coordination, if clinically significant, describe (2):	text
573	<div>[necords2]</div> <div>Show the field ONLY if: [necord]=3 and [necorda2]<>""</div>	Coordination abnormality (2): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
574	<div>[necorda3]</div> <div>Show the field ONLY if: [necord]=3 and [necorda2]<>"</div>	Coordination, if clinically significant, describe (3):	text
575	<div>[necords3]</div> <div>Show the field ONLY if: [necord]=3 and [necorda3]<>""</div>	Coordination abnormality (3): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
576	<div>[necorda4]</div> <div>Show the field ONLY if: [necord]=3 and [necorda3]<>"</div>	Coordination, if clinically significant, describe (4):	text
577	<div>[necords4]</div> <div>Show the field ONLY if: [necord]=3 and [necorda4]<>""</div>	Coordination abnormality (4): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
578	<div>[necorda5]</div> <div>Show the field ONLY if: [necord]=3 and [necorda4]<>"</div>	Coordination, if clinically significant, describe (5):	text
579	<div>[necords5]</div> <div>Show the field ONLY if: [necord]=3 and [necorda5]<>""</div>	Coordination abnormality (5): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
580	<div>[negait]</div> <div>Show the field ONLY if: [neperf] = '1'</div>	Gait	radio, Required <div><div>1Normal</div><div>2Abnormal, Not clinically significant</div><div>3Abnormal, Clinically significant</div></div>
581	<div>[negaita1]</div> <div>Show the field ONLY if: [negait]=3</div>	Gait, if clinically significant, describe (1):	text, Required
582	<div>[negaits1]</div> <div>Show the field ONLY if: [negait]=3</div>	Gait abnormality (1): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
583	<div>[negaita2]</div> <div>Show the field ONLY if: [negait]=3 and [negaita1]<>"</div>	Gait, if clinically significant, describe (2):	text
584	<div>[negaits2]</div> <div>Show the field ONLY if: [negait]=3 and [negaita2]<>""</div>	Gait abnormality (2): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
585	<div>[negaita3]</div> <div>Show the field ONLY if: [negait]=3 and [negaita2]<>"</div>	Gait, if clinically significant, describe (3):	text
586	<div>[negaits3]</div> <div>Show the field ONLY if: [negait]=3 and [negaita3]<>""</div>	Gait abnormality (3): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
587	<div>[negaita4]</div> <div>Show the field ONLY if: [negait]=3 and [negaita3]<>"</div>	Gait, if clinically significant, describe (4):	text
588	<div>[negaits4]</div> <div>Show the field ONLY if: [negait]=3 and [negaita4]<>""</div>	Gait abnormality (4): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>
589	<div>[negaita5]</div> <div>Show the field ONLY if: [negait]=3 and [negaita4]<>"</div>	Gait, if clinically significant, describe (5):	text
590	<div>[negaits5]</div> <div>Show the field ONLY if: [negait]=3 and [negaita5]<>""</div>	Gait abnormality (5): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>

591	<div>[nesttn]</div> <div>Show the field ONLY if: [neperf] = '1'</div>	Station	<div>radio, Required</div> <div><div>1</div>Normal</div> <div><div>2</div>Abnormal, Not clinically significant</div> <div><div>3</div>Abnormal, Clinically significant</div>
592	<div>[nesttna1]</div> <div>Show the field ONLY if: [nesttn]=3</div>	Station, if clinically significant, describe (1):	text, Required
593	<div>[nesttns1]</div> <div>Show the field ONLY if: [nesttn]=3</div>	Station abnormality (1): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	<div>text, Required</div> <div><div>BIOPORTAL:SNOMEDCT</div><div>BIOPORTAL:SNOMEDCT</div></div>
594	<div>[nesttna2]</div> <div>Show the field ONLY if: [nesttn]=3 and [nesttna1]<>"</div>	Station, if clinically significant, describe (2):	text
595	<div>[nesttns2]</div> <div>Show the field ONLY if: [nesttn]=3 and [nesttna2]<>""</div>	Station abnormality (2): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	<div>text, Required</div> <div><div>BIOPORTAL:SNOMEDCT</div><div>BIOPORTAL:SNOMEDCT</div></div>
596	<div>[nesttna3]</div> <div>Show the field ONLY if: [nesttn]=3 and [nesttna2]<>"</div>	Station, if clinically significant, describe (3):	text
597	<div>[nesttns3]</div> <div>Show the field ONLY if: [nesttn]=3 and [nesttna3]<>""</div>	Station abnormality (3): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	<div>text, Required</div> <div><div>BIOPORTAL:SNOMEDCT</div><div>BIOPORTAL:SNOMEDCT</div></div>
598	<div>[nesttna4]</div> <div>Show the field ONLY if: [nesttn]=3 and [nesttna3]<>"</div>	Station, if clinically significant, describe (4):	text
599	<div>[nesttns4]</div> <div>Show the field ONLY if: [nesttn]=3 and [nesttna4]<>""</div>	Station abnormality (4): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	<div>text, Required</div> <div><div>BIOPORTAL:SNOMEDCT</div><div>BIOPORTAL:SNOMEDCT</div></div>
600	<div>[nesttna5]</div> <div>Show the field ONLY if: [nesttn]=3 and [nesttna4]<>"</div>	Station, if clinically significant, describe (5):	text
601	<div>[nesttns5]</div> <div>Show the field ONLY if: [nesttn]=3 and [nesttna5]<>""</div>	Station abnormality (5): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	<div>text, Required</div> <div><div>BIOPORTAL:SNOMEDCT</div><div>BIOPORTAL:SNOMEDCT</div></div>
602	<div>[neothr]</div> <div>Show the field ONLY if: [neperf]=1 and [neothrnd(1)]= '0'</div>	Neurological Exam Other	<div>radio, Required</div> <div><div>1</div>Normal</div> <div><div>2</div>Abnormal, Not clinically significant</div> <div><div>3</div>Abnormal, Clinically significant</div>
603	<div>[neothrnd]</div> <div>Show the field ONLY if: [neperf]=1 and [neothr] = "</div>	Neurological Exam Other Not Done	<div>checkbox</div> <div><div>1</div>neothrnd__1</div> Other Neurological Exam Not Done
604	<div>[neothrsp]</div> <div>Show the field ONLY if: [neothr]<>"</div>	Neurological Exam Other specify	text, Required
605	<div>[neothra1]</div> <div>Show the field ONLY if: [neothr]="3"</div>	Neurological Exam Other, if clinically significant, describe (1):	text, Required
606	<div>[neothrs1]</div> <div>Show the field ONLY if: [neothr]="3"</div>	Neurological exam other abnormality (1): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	<div>text, Required</div> <div><div>BIOPORTAL:SNOMEDCT</div><div>BIOPORTAL:SNOMEDCT</div></div>
607	<div>[neothra2]</div> <div>Show the field ONLY if: [neothr]="3" and [neothra1]<>"</div>	Neurological Exam Other, if clinically significant, describe (2):	text
608	<div>[neothrs2]</div> <div>Show the field ONLY if: [neothra2]<>""</div>	Neurological exam other abnormality (2): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	<div>text, Required</div> <div><div>BIOPORTAL:SNOMEDCT</div><div>BIOPORTAL:SNOMEDCT</div></div>
609	<div>[neothra3]</div> <div>Show the field ONLY if: [neothr]="3" and [neothra2]<>"</div>	Neurological Exam Other, if clinically significant, describe (3):	text

610	[neothrs3] Show the field ONLY if: [neothra3]<>""	Neurological exam other abnormality (3): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required BIOPORTAL:SNOMEDCT BIOPORTAL:SNOMEDCT
611	[neothra4] Show the field ONLY if: [neothr]="3" and [neothra3]<>""	Neurological Exam Other, if clinically significant, describe (4):	text
612	[neothrs4] Show the field ONLY if: [neothra4]<>""	Neurological exam other abnormality (4): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required BIOPORTAL:SNOMEDCT BIOPORTAL:SNOMEDCT
613	[neothra5] Show the field ONLY if: [neothr]="3" and [neothra4]<>""	Neurological Exam Other, if clinically significant, describe (5):	text
614	[neothrs5] Show the field ONLY if: [neothra5]<>""	Neurological exam other abnormality (5): <i>Select the appropriate SNOWMED CT term for the finding noted above.</i>	text, Required BIOPORTAL:SNOMEDCT BIOPORTAL:SNOMEDCT
615	[nenotes] Show the field ONLY if: [neperf] = '1'	Neurological Exam Notes	notes
616	[neusrid]	User ID:	text Field Annotation: @HIDDEN @USERNAME
617	[neurological_exam_complete]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: Physical Exam Recommended (physical_exam_recommended)

618	[prperf]	Was the physical examination performed? Please record baseline abnormalities on the "[form-link:medical_history_events]" form. Please record any abnormalities identified post-baseline on the "[form-link:adverse_events_ctcae_v5]" (AE) form. <i>If physical examination was performed as planned then select Yes, otherwise, select No.</i>	yesno, Required 1 Yes 0 No Custom alignment: RH Field Annotation: Used to derive a value into the SDTMIG variable [PRSTAT]
619	[prdat] Show the field ONLY if: [prperf]="1"	What was the date performed: <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [PRDTC]
620	[prusrid1]	User ID:	text Field Annotation: @USERNAME @HIDDEN
621	[physical_exam_recommended_complete]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: Physical Exam Optional (physical_exam_optional)

622	[pevisdat]	What was the visit date? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [PEDTC]
623	[peperf]	Was the physical examination performed?:	yesno, Required 1 Yes 0 No Custom alignment: RH Field Annotation: Used to derive a value into the SDTMIG variable [PESTAT]
624	[pedat] Show the field ONLY if: [peperf]="1"	What was the date the physical examination was performed? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [PEDTC]
625	[peheent] Show the field ONLY if: [peperf]="1"	HEENT: <i>Please select only one response.</i>	dropdown, Required 0 Normal 1 Abnormal 55 Not Done Field Annotation: [PEORRES]

626	<div>[peheenta]</div> <div>Show the field ONLY if: [peheent]="1"</div>	If Abnormal HEENT, specify:	notes, Required Field Annotation: [PEORRES]						
627	<div>[pecard]</div> <div>Show the field ONLY if: [peperf]="1"</div>	Cardiovascular: <i>Please select only one response.</i>	dropdown, Required <table><tr><td>0</td><td>Normal</td></tr><tr><td>1</td><td>Abnormal</td></tr><tr><td>55</td><td>Not Done</td></tr></table>	0	Normal	1	Abnormal	55	Not Done
0	Normal								
1	Abnormal								
55	Not Done								
628	<div>[pecarda]</div> <div>Show the field ONLY if: [pecard]="1"</div>	If Abnormal Cardiovascular, specify:	notes, Required Field Annotation: [PEORRES]						
629	<div>[peresp]</div> <div>Show the field ONLY if: [peperf]="1"</div>	Respiratory: <i>Please select only one response.</i>	dropdown, Required <table><tr><td>0</td><td>Normal</td></tr><tr><td>1</td><td>Abnormal</td></tr><tr><td>55</td><td>Not Done</td></tr></table> Field Annotation: [PEORRES]	0	Normal	1	Abnormal	55	Not Done
0	Normal								
1	Abnormal								
55	Not Done								
630	<div>[perespa]</div> <div>Show the field ONLY if: [peresp]="1"</div>	If Abnormal Respiratory, specify:	notes, Required Field Annotation: [PEORRES]						
631	<div>[pegast]</div> <div>Show the field ONLY if: [peperf]="1"</div>	Gastrointestinal: <i>Please select only one response.</i>	dropdown, Required <table><tr><td>0</td><td>Normal</td></tr><tr><td>1</td><td>Abnormal</td></tr><tr><td>55</td><td>Not Done</td></tr></table> Field Annotation: [PEORRES]	0	Normal	1	Abnormal	55	Not Done
0	Normal								
1	Abnormal								
55	Not Done								
632	<div>[pegasta]</div> <div>Show the field ONLY if: [pegast]="1"</div>	If Abnormal Gastrointestinal, specify:	notes, Required						
633	<div>[pegeni]</div> <div>Show the field ONLY if: [peperf]="1"</div>	Genitourinary: <i>Please select only one response.</i>	dropdown, Required <table><tr><td>0</td><td>Normal</td></tr><tr><td>1</td><td>Abnormal</td></tr><tr><td>55</td><td>Not Done</td></tr></table> Field Annotation: [PEORRES]	0	Normal	1	Abnormal	55	Not Done
0	Normal								
1	Abnormal								
55	Not Done								
634	<div>[pegenia]</div> <div>Show the field ONLY if: [pegeni]="1"</div>	If Abnormal Genitourinary, specify:	notes, Required Field Annotation: [PEORRES]						
635	<div>[pemusc]</div> <div>Show the field ONLY if: [peperf]="1"</div>	Musculoskeletal: <i>Please select only one response.</i>	dropdown, Required <table><tr><td>0</td><td>Normal</td></tr><tr><td>1</td><td>Abnormal</td></tr><tr><td>55</td><td>Not Done</td></tr></table> Field Annotation: [PEORRES]	0	Normal	1	Abnormal	55	Not Done
0	Normal								
1	Abnormal								
55	Not Done								
636	<div>[pemusca]</div> <div>Show the field ONLY if: [pemusc]="1"</div>	If Abnormal Musculoskeletal, specify:	notes, Required Field Annotation: [PEORRES]						
637	<div>[peskin]</div> <div>Show the field ONLY if: [peperf]="1"</div>	Skin: <i>Please select only one response.</i>	dropdown, Required <table><tr><td>0</td><td>Normal</td></tr><tr><td>1</td><td>Abnormal</td></tr><tr><td>55</td><td>Not Done</td></tr></table> Field Annotation: [PEORRES]	0	Normal	1	Abnormal	55	Not Done
0	Normal								
1	Abnormal								
55	Not Done								
638	<div>[peskina]</div> <div>Show the field ONLY if: [peskin]="1"</div>	If Abnormal Skin, specify:	notes, Required Field Annotation: [PEORRES]						

639	<div>[peneuro]</div> <div>Show the field ONLY if: [peperf]="1"</div>	Neurologic: <i>Please select only one response.</i>	<div>dropdown, Required</div> <table><tr><td>0</td><td>Normal</td></tr><tr><td>1</td><td>Abnormal</td></tr><tr><td>55</td><td>Not Done</td></tr></table> <div>Field Annotation: [PEORRES]</div>	0	Normal	1	Abnormal	55	Not Done
0	Normal								
1	Abnormal								
55	Not Done								
640	<div>[peneuroa]</div> <div>Show the field ONLY if: [peneuro]="1"</div>	If Abnormal Neurologic, specify:	<div>notes, Required</div> <div>Field Annotation: [PEORRES]</div>						
641	<div>[peendo]</div> <div>Show the field ONLY if: [peperf]="1"</div>	Endocrine: <i>Please select only one response.</i>	<div>dropdown, Required</div> <table><tr><td>0</td><td>Normal</td></tr><tr><td>1</td><td>Abnormal</td></tr><tr><td>55</td><td>Not Done</td></tr></table> <div>Field Annotation: [PEORRES]</div>	0	Normal	1	Abnormal	55	Not Done
0	Normal								
1	Abnormal								
55	Not Done								
642	<div>[peendoa]</div> <div>Show the field ONLY if: [peendo]="1"</div>	If Abnormal Endocrine, specify:	<div>notes, Required</div> <div>Field Annotation: [PEORRES]</div>						
643	<div>[pepsych]</div> <div>Show the field ONLY if: [peperf]="1"</div>	Psychiatric: <i>Please select only one response.</i>	<div>dropdown, Required</div> <table><tr><td>0</td><td>Normal</td></tr><tr><td>1</td><td>Abnormal</td></tr><tr><td>55</td><td>Not Done</td></tr></table> <div>Field Annotation: [PEORRES]</div>	0	Normal	1	Abnormal	55	Not Done
0	Normal								
1	Abnormal								
55	Not Done								
644	<div>[pepsycha]</div> <div>Show the field ONLY if: [pepsych]="1"</div>	If Abnormal Psychiatric, specify:	<div>notes, Required</div> <div>Field Annotation: [PEORRES]</div>						
645	<div>[peheme]</div> <div>Show the field ONLY if: [peperf]="1"</div>	Heme/Lymphatic: <i>Please select only one response.</i>	<div>dropdown, Required</div> <table><tr><td>0</td><td>Normal</td></tr><tr><td>1</td><td>Abnormal</td></tr><tr><td>55</td><td>Not Done</td></tr></table> <div>Field Annotation: [PEORRES]</div>	0	Normal	1	Abnormal	55	Not Done
0	Normal								
1	Abnormal								
55	Not Done								
646	<div>[pehemea]</div> <div>Show the field ONLY if: [peheme]="1"</div>	If Abnormal Heme/Lymphatic, specify:	<div>notes, Required</div> <div>Field Annotation: [PEORRES]</div>						
647	<div>[peallim]</div> <div>Show the field ONLY if: [peperf]="1"</div>	Allergic/Immunologic: <i>Please select only one response.</i>	<div>dropdown, Required</div> <table><tr><td>0</td><td>Normal</td></tr><tr><td>1</td><td>Abnormal</td></tr><tr><td>55</td><td>Not Done</td></tr></table> <div>Field Annotation: [PEORRES]</div>	0	Normal	1	Abnormal	55	Not Done
0	Normal								
1	Abnormal								
55	Not Done								
648	<div>[peallima]</div> <div>Show the field ONLY if: [peallim]="1"</div>	If Abnormal Allergic/Immunologic, specify:	<div>notes, Required</div> <div>Field Annotation: [PEORRES]</div>						
649	<div>[peoth]</div> <div>Show the field ONLY if: [peperf]="1"</div>	Other: <i>Please select only one response.</i>	<div>dropdown, Required</div> <table><tr><td>0</td><td>Normal</td></tr><tr><td>1</td><td>Abnormal</td></tr><tr><td>55</td><td>Not Done</td></tr></table> <div>Field Annotation: [PEORRES]</div>	0	Normal	1	Abnormal	55	Not Done
0	Normal								
1	Abnormal								
55	Not Done								
650	<div>[peothspc]</div> <div>Show the field ONLY if: [peoth]="1" or [peoth]="0"</div>	Please specify other body system:	<div>text, Required</div>						
651	<div>[peotha]</div> <div>Show the field ONLY if: [peoth]="1"</div>	If Abnormal [peothspc], specify:	<div>notes, Required</div> <div>Field Annotation: [PEORRES]</div>						
652	<div>[peusrid2]</div>	User ID:	<div>text</div> <div>Field Annotation: @USERNAME @HIDDEN</div>						

	653	[physical_exam_optional_complete]	Section Header: Form Status Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete				
0	Incomplete													
1	Unverified													
2	Complete													
Instrument: Spirometry (spirometry)														
	654	[reperf]	Section Header: ***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** The following fields are important for analyzing spirometry data. If they are not captured elsewhere in the database, they may need to be added to this form. - Age/DOB- Height- Weight- Race and/or Ethnicity Was spirometry performed? Indicate if spirometry was performed. If yes, include the appropriate details where indicated on the eCRF.	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH Field Annotation: redtc	1	Yes	0	No						
1	Yes													
0	No													
	655	[redat] Show the field ONLY if: [reperf] = '1'	On what date were the measurements performed? Record date of measurements using this format: MM-DD-YYYY	text (date_mdy, Max: today), Required Field Annotation: redat										
	656	[retim] Show the field ONLY if: [reperf] = '1'	At what time were the measurements performed? Record time of measurement in the following format: HH:MM (24-hour clock)	text (time), Required Field Annotation: redtc										
	657	[rebrdlyn] Show the field ONLY if: [reperf] = '1'	Were bronchodilators taken within 4 hours prior to the procedure?	yesno <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No						
1	Yes													
0	No													
	658	[refvc] Show the field ONLY if: [reperf] = '1'	FVC (L): Record the result in the following format: X.XX L. Leading zeros (0) are not required.	text (number_2dp), Required Field Annotation: reorres										
	659	[refev1] Show the field ONLY if: [reperf] = '1'	FEV1 (L): Record the result in the following format: X.XX L. Leading zeros (0) are not required.	text (number_2dp), Required Field Annotation: reorres										
	660	[refevfvc] Show the field ONLY if: [reperf] = '1'	FEV1/FVC (%): Record the result in the following format: XX.XX %. Leading zeros (0) are not required.	text (number_2dp), Required Custom alignment: RH Field Annotation: reorres										
	661	[refef2575] Show the field ONLY if: [reperf] = '1'	FEF 25%-75% (L/s): Record the result in the following format: X.XX L/s. Leading zeros (0) are not required.	text (number_2dp), Required Field Annotation: reorres										
	662	[repef] Show the field ONLY if: [reperf] = '1'	PEF (L/s): Record the result in the following format: X.XX L/s. Leading zeros (0) are not required.	text (number_2dp), Required Field Annotation: reorres										
	663	[reusrid]	Data Entry User ID	text Field Annotation: @USERNAME @HIDDEN										
	664	[spirometry_complete]	Section Header: Form Status Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete				
0	Incomplete													
1	Unverified													
2	Complete													
Instrument: SF36 Version 1 (sf36_version_10)														
	665	[rnd36101]	Section Header: Choose one option for each questionnaire item. 1. In general, would you say your health is:	radio (Matrix) <table border="1"> <tr><td>100</td><td>Excellent</td></tr> <tr><td>75</td><td>Very good</td></tr> <tr><td>50</td><td>Good</td></tr> <tr><td>25</td><td>Fair</td></tr> <tr><td>0</td><td>Poor</td></tr> </table>	100	Excellent	75	Very good	50	Good	25	Fair	0	Poor
100	Excellent													
75	Very good													
50	Good													
25	Fair													
0	Poor													
	666	[rnd36102]	Section Header: 2. Compared to one year ago, how would you rate your health in general now?	radio (Matrix) <table border="1"> <tr><td>100</td><td>Much better now than one year ago</td></tr> <tr><td>75</td><td>Somewhat better now than one year ago</td></tr> <tr><td>50</td><td>About the same</td></tr> <tr><td>25</td><td>Somewhat worse now than one year ago</td></tr> <tr><td>0</td><td>Much worse now than one year ago</td></tr> </table>	100	Much better now than one year ago	75	Somewhat better now than one year ago	50	About the same	25	Somewhat worse now than one year ago	0	Much worse now than one year ago
100	Much better now than one year ago													
75	Somewhat better now than one year ago													
50	About the same													
25	Somewhat worse now than one year ago													
0	Much worse now than one year ago													

667	[rnd36103]	<p>Section Header: <i>The following items are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much? (Choose one answer for each question.)</i></p> <p>3. Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes, limited a lot</td> </tr> <tr> <td>50</td> <td>Yes, limited a little</td> </tr> <tr> <td>100</td> <td>No, not limited at all</td> </tr> </table>	0	Yes, limited a lot	50	Yes, limited a little	100	No, not limited at all
0	Yes, limited a lot								
50	Yes, limited a little								
100	No, not limited at all								
668	[rnd36104]	<p>4. Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes, limited a lot</td> </tr> <tr> <td>50</td> <td>Yes, limited a little</td> </tr> <tr> <td>100</td> <td>No, not limited at all</td> </tr> </table>	0	Yes, limited a lot	50	Yes, limited a little	100	No, not limited at all
0	Yes, limited a lot								
50	Yes, limited a little								
100	No, not limited at all								
669	[rnd36105]	<p>5. Lifting or carrying groceries</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes, limited a lot</td> </tr> <tr> <td>50</td> <td>Yes, limited a little</td> </tr> <tr> <td>100</td> <td>No, not limited at all</td> </tr> </table>	0	Yes, limited a lot	50	Yes, limited a little	100	No, not limited at all
0	Yes, limited a lot								
50	Yes, limited a little								
100	No, not limited at all								
670	[rnd36106]	<p>6. Climbing several flights of stairs</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes, limited a lot</td> </tr> <tr> <td>50</td> <td>Yes, limited a little</td> </tr> <tr> <td>100</td> <td>No, not limited at all</td> </tr> </table>	0	Yes, limited a lot	50	Yes, limited a little	100	No, not limited at all
0	Yes, limited a lot								
50	Yes, limited a little								
100	No, not limited at all								
671	[rnd36107]	<p>7. Climbing one flight of stairs</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes, limited a lot</td> </tr> <tr> <td>50</td> <td>Yes, limited a little</td> </tr> <tr> <td>100</td> <td>No, not limited at all</td> </tr> </table>	0	Yes, limited a lot	50	Yes, limited a little	100	No, not limited at all
0	Yes, limited a lot								
50	Yes, limited a little								
100	No, not limited at all								
672	[rnd36108]	<p>8. Bending, kneeling, or stooping</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes, limited a lot</td> </tr> <tr> <td>50</td> <td>Yes, limited a little</td> </tr> <tr> <td>100</td> <td>No, not limited at all</td> </tr> </table>	0	Yes, limited a lot	50	Yes, limited a little	100	No, not limited at all
0	Yes, limited a lot								
50	Yes, limited a little								
100	No, not limited at all								
673	[rnd36109]	<p>9. Walking more than a mile</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes, limited a lot</td> </tr> <tr> <td>50</td> <td>Yes, limited a little</td> </tr> <tr> <td>100</td> <td>No, not limited at all</td> </tr> </table>	0	Yes, limited a lot	50	Yes, limited a little	100	No, not limited at all
0	Yes, limited a lot								
50	Yes, limited a little								
100	No, not limited at all								
674	[rnd36110]	<p>10. Walking several blocks</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes, limited a lot</td> </tr> <tr> <td>50</td> <td>Yes, limited a little</td> </tr> <tr> <td>100</td> <td>No, not limited at all</td> </tr> </table>	0	Yes, limited a lot	50	Yes, limited a little	100	No, not limited at all
0	Yes, limited a lot								
50	Yes, limited a little								
100	No, not limited at all								
675	[rnd36111]	<p>11. Walking one block</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes, limited a lot</td> </tr> <tr> <td>50</td> <td>Yes, limited a little</td> </tr> <tr> <td>100</td> <td>No, not limited at all</td> </tr> </table>	0	Yes, limited a lot	50	Yes, limited a little	100	No, not limited at all
0	Yes, limited a lot								
50	Yes, limited a little								
100	No, not limited at all								
676	[rnd36112]	<p>12. Bathing or dressing yourself</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes, limited a lot</td> </tr> <tr> <td>50</td> <td>Yes, limited a little</td> </tr> <tr> <td>100</td> <td>No, not limited at all</td> </tr> </table>	0	Yes, limited a lot	50	Yes, limited a little	100	No, not limited at all
0	Yes, limited a lot								
50	Yes, limited a little								
100	No, not limited at all								
677	[rnd36113]	<p>Section Header: <i>During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? (Choose one answer for each question.)</i></p> <p>13. Cut down the amount of time you spent on work or other activities</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes</td> </tr> <tr> <td>100</td> <td>No</td> </tr> </table>	0	Yes	100	No		
0	Yes								
100	No								
678	[rnd36114]	<p>14. Accomplished less than you would like</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes</td> </tr> <tr> <td>100</td> <td>No</td> </tr> </table>	0	Yes	100	No		
0	Yes								
100	No								
679	[rnd36115]	<p>15. Were limited in the kind of work or other activities</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes</td> </tr> <tr> <td>100</td> <td>No</td> </tr> </table>	0	Yes	100	No		
0	Yes								
100	No								
680	[rnd36116]	<p>16. Had difficulty performing the work or other activities (for example, it took extra effort)</p>	<p>radio (Matrix)</p> <table border="1"> <tr> <td>0</td> <td>Yes</td> </tr> <tr> <td>100</td> <td>No</td> </tr> </table>	0	Yes	100	No		
0	Yes								
100	No								

681	[rnd36117]	<div>Section Header: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)? (Choose one answer for each question.)</div> <div>17. Cut down the amount of time you spent on work or other activities</div>	<div>radio (Matrix)</div> <table><tr><td>0</td><td>Yes</td></tr><tr><td>100</td><td>No</td></tr></table>	0	Yes	100	No								
0	Yes														
100	No														
682	[rnd36118]	18. Accomplished less than you would like	<div>radio (Matrix)</div> <table><tr><td>0</td><td>Yes</td></tr><tr><td>100</td><td>No</td></tr></table>	0	Yes	100	No								
0	Yes														
100	No														
683	[rnd36119]	19. Didn't do work or other activities as carefully as usual	<div>radio (Matrix)</div> <table><tr><td>0</td><td>Yes</td></tr><tr><td>100</td><td>No</td></tr></table>	0	Yes	100	No								
0	Yes														
100	No														
684	[rnd36120]	<div>Section Header: 20. During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors, or groups?</div>	<div>radio (Matrix)</div> <table><tr><td>100</td><td>Not at all</td></tr><tr><td>75</td><td>Slightly</td></tr><tr><td>50</td><td>Moderately</td></tr><tr><td>25</td><td>Quite a bit</td></tr><tr><td>0</td><td>Extremely</td></tr></table>	100	Not at all	75	Slightly	50	Moderately	25	Quite a bit	0	Extremely		
100	Not at all														
75	Slightly														
50	Moderately														
25	Quite a bit														
0	Extremely														
685	[rnd36121]	<div>Section Header: 21. How much bodily pain have you had during the past 4 weeks?</div>	<div>radio (Matrix)</div> <table><tr><td>100</td><td>None</td></tr><tr><td>80</td><td>Very mild</td></tr><tr><td>60</td><td>Mild</td></tr><tr><td>40</td><td>Moderate</td></tr><tr><td>20</td><td>Severe</td></tr><tr><td>0</td><td>Very severe</td></tr></table>	100	None	80	Very mild	60	Mild	40	Moderate	20	Severe	0	Very severe
100	None														
80	Very mild														
60	Mild														
40	Moderate														
20	Severe														
0	Very severe														
686	[rnd36122]	<div>Section Header: 22. During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?</div>	<div>radio (Matrix)</div> <table><tr><td>100</td><td>Not at all</td></tr><tr><td>75</td><td>A little bit</td></tr><tr><td>50</td><td>Moderately</td></tr><tr><td>25</td><td>Quite a bit</td></tr><tr><td>0</td><td>Extremely</td></tr></table>	100	Not at all	75	A little bit	50	Moderately	25	Quite a bit	0	Extremely		
100	Not at all														
75	A little bit														
50	Moderately														
25	Quite a bit														
0	Extremely														
687	[rnd36123]	<div>Section Header: These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks . . . 23. Did you feel full of pep?</div>	<div>radio (Matrix)</div> <table><tr><td>100</td><td>All of the time</td></tr><tr><td>80</td><td>Most of the time</td></tr><tr><td>60</td><td>A good bit of the time</td></tr><tr><td>40</td><td>Some of the time</td></tr><tr><td>20</td><td>A little of the time</td></tr><tr><td>0</td><td>None of the time</td></tr></table>	100	All of the time	80	Most of the time	60	A good bit of the time	40	Some of the time	20	A little of the time	0	None of the time
100	All of the time														
80	Most of the time														
60	A good bit of the time														
40	Some of the time														
20	A little of the time														
0	None of the time														
688	[rnd36124]	<div>Section Header: 24. Have you been a very nervous person?</div>	<div>radio (Matrix)</div> <table><tr><td>0</td><td>All of the time</td></tr><tr><td>20</td><td>Most of the time</td></tr><tr><td>40</td><td>A good bit of the time</td></tr><tr><td>60</td><td>Some of the time</td></tr><tr><td>80</td><td>A little of the time</td></tr><tr><td>100</td><td>None of the time</td></tr></table>	0	All of the time	20	Most of the time	40	A good bit of the time	60	Some of the time	80	A little of the time	100	None of the time
0	All of the time														
20	Most of the time														
40	A good bit of the time														
60	Some of the time														
80	A little of the time														
100	None of the time														
689	[rnd36125]	<div>Section Header: 25. Have you felt so down in the dumps that nothing could cheer you up?</div>	<div>radio (Matrix)</div> <table><tr><td>0</td><td>All of the time</td></tr><tr><td>20</td><td>Most of the time</td></tr><tr><td>40</td><td>A good bit of the time</td></tr><tr><td>60</td><td>Some of the time</td></tr><tr><td>80</td><td>A little of the time</td></tr><tr><td>100</td><td>None of the time</td></tr></table>	0	All of the time	20	Most of the time	40	A good bit of the time	60	Some of the time	80	A little of the time	100	None of the time
0	All of the time														
20	Most of the time														
40	A good bit of the time														
60	Some of the time														
80	A little of the time														
100	None of the time														

690	[rnd36126]	Section Header: 26. Have you felt calm and peaceful?	radio (Matrix) <table><tr><td>100</td><td>All of the time</td></tr><tr><td>80</td><td>Most of the time</td></tr><tr><td>60</td><td>A good bit of the time</td></tr><tr><td>40</td><td>Some of the time</td></tr><tr><td>20</td><td>A little of the time</td></tr><tr><td>0</td><td>None of the time</td></tr></table>	100	All of the time	80	Most of the time	60	A good bit of the time	40	Some of the time	20	A little of the time	0	None of the time
100	All of the time														
80	Most of the time														
60	A good bit of the time														
40	Some of the time														
20	A little of the time														
0	None of the time														
691	[rnd36127]	Section Header: 27. Did you have a lot of energy?	radio (Matrix) <table><tr><td>100</td><td>All of the time</td></tr><tr><td>80</td><td>Most of the time</td></tr><tr><td>60</td><td>A good bit of the time</td></tr><tr><td>40</td><td>Some of the time</td></tr><tr><td>20</td><td>A little of the time</td></tr><tr><td>0</td><td>None of the time</td></tr></table>	100	All of the time	80	Most of the time	60	A good bit of the time	40	Some of the time	20	A little of the time	0	None of the time
100	All of the time														
80	Most of the time														
60	A good bit of the time														
40	Some of the time														
20	A little of the time														
0	None of the time														
692	[rnd36128]	Section Header: 28. Have you felt downhearted and blue?	radio (Matrix) <table><tr><td>0</td><td>All of the time</td></tr><tr><td>20</td><td>Most of the time</td></tr><tr><td>40</td><td>A good bit of the time</td></tr><tr><td>60</td><td>Some of the time</td></tr><tr><td>80</td><td>A little of the time</td></tr><tr><td>100</td><td>None of the time</td></tr></table>	0	All of the time	20	Most of the time	40	A good bit of the time	60	Some of the time	80	A little of the time	100	None of the time
0	All of the time														
20	Most of the time														
40	A good bit of the time														
60	Some of the time														
80	A little of the time														
100	None of the time														
693	[rnd36129]	Section Header: 29. Did you feel worn out?	radio (Matrix) <table><tr><td>0</td><td>All of the time</td></tr><tr><td>20</td><td>Most of the time</td></tr><tr><td>40</td><td>A good bit of the time</td></tr><tr><td>60</td><td>Some of the time</td></tr><tr><td>80</td><td>A little of the time</td></tr><tr><td>100</td><td>None of the time</td></tr></table>	0	All of the time	20	Most of the time	40	A good bit of the time	60	Some of the time	80	A little of the time	100	None of the time
0	All of the time														
20	Most of the time														
40	A good bit of the time														
60	Some of the time														
80	A little of the time														
100	None of the time														
694	[rnd36130]	Section Header: 30. Have you been a happy person?	radio (Matrix) <table><tr><td>100</td><td>All of the time</td></tr><tr><td>80</td><td>Most of the time</td></tr><tr><td>60</td><td>A good bit of the time</td></tr><tr><td>40</td><td>Some of the time</td></tr><tr><td>20</td><td>A little of the time</td></tr><tr><td>0</td><td>None of the time</td></tr></table>	100	All of the time	80	Most of the time	60	A good bit of the time	40	Some of the time	20	A little of the time	0	None of the time
100	All of the time														
80	Most of the time														
60	A good bit of the time														
40	Some of the time														
20	A little of the time														
0	None of the time														
695	[rnd36131]	Section Header: 31. Did you feel tired?	radio (Matrix) <table><tr><td>0</td><td>All of the time</td></tr><tr><td>20</td><td>Most of the time</td></tr><tr><td>40</td><td>A good bit of the time</td></tr><tr><td>60</td><td>Some of the time</td></tr><tr><td>80</td><td>A little of the time</td></tr><tr><td>100</td><td>None of the time</td></tr></table>	0	All of the time	20	Most of the time	40	A good bit of the time	60	Some of the time	80	A little of the time	100	None of the time
0	All of the time														
20	Most of the time														
40	A good bit of the time														
60	Some of the time														
80	A little of the time														
100	None of the time														
696	[rnd36132]	Section Header: 32. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)?	radio (Matrix) <table><tr><td>0</td><td>All of the time</td></tr><tr><td>25</td><td>Most of the time</td></tr><tr><td>50</td><td>Some of the time</td></tr><tr><td>75</td><td>A little of the time</td></tr><tr><td>100</td><td>None of the time</td></tr></table>	0	All of the time	25	Most of the time	50	Some of the time	75	A little of the time	100	None of the time		
0	All of the time														
25	Most of the time														
50	Some of the time														
75	A little of the time														
100	None of the time														
697	[rnd36133]	Section Header: How TRUE or FALSE is each of the following statements for you. 33. I seem to get sick a little easier than other people	radio (Matrix) <table><tr><td>0</td><td>Definitely true</td></tr><tr><td>25</td><td>Mostly true</td></tr><tr><td>50</td><td>Don't know</td></tr><tr><td>75</td><td>Mostly false</td></tr><tr><td>100</td><td>Definitely false</td></tr></table>	0	Definitely true	25	Mostly true	50	Don't know	75	Mostly false	100	Definitely false		
0	Definitely true														
25	Mostly true														
50	Don't know														
75	Mostly false														
100	Definitely false														

698	[rnd36134]	Section Header: 34. I am as healthy as anybody I know	radio (Matrix) <table border="1"> <tr><td>100</td><td>Definitely true</td></tr> <tr><td>75</td><td>Mostly true</td></tr> <tr><td>50</td><td>Don't know</td></tr> <tr><td>25</td><td>Mostly false</td></tr> <tr><td>0</td><td>Definitely false</td></tr> </table>	100	Definitely true	75	Mostly true	50	Don't know	25	Mostly false	0	Definitely false
100	Definitely true												
75	Mostly true												
50	Don't know												
25	Mostly false												
0	Definitely false												
699	[rnd36135]	Section Header: 35. I expect my health to get worse	radio (Matrix) <table border="1"> <tr><td>0</td><td>Definitely true</td></tr> <tr><td>25</td><td>Mostly true</td></tr> <tr><td>50</td><td>Don't know</td></tr> <tr><td>75</td><td>Mostly false</td></tr> <tr><td>100</td><td>Definitely false</td></tr> </table>	0	Definitely true	25	Mostly true	50	Don't know	75	Mostly false	100	Definitely false
0	Definitely true												
25	Mostly true												
50	Don't know												
75	Mostly false												
100	Definitely false												
700	[rnd36136]	Section Header: 36. My health is excellent	radio (Matrix) <table border="1"> <tr><td>100</td><td>Definitely true</td></tr> <tr><td>75</td><td>Mostly true</td></tr> <tr><td>50</td><td>Don't know</td></tr> <tr><td>25</td><td>Mostly false</td></tr> <tr><td>0</td><td>Definitely false</td></tr> </table>	100	Definitely true	75	Mostly true	50	Don't know	25	Mostly false	0	Definitely false
100	Definitely true												
75	Mostly true												
50	Don't know												
25	Mostly false												
0	Definitely false												
701	[rndusrid]	Data Entry User ID	text Field Annotation: @USERNAME @HIDDEN										
702	[sf36_version_10_complete]	Section Header: Form Status Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete				
0	Incomplete												
1	Unverified												
2	Complete												
Instrument: SF36 V1 Rand Scoring (sf36_v1_rand_scoring)													
703	[pf]	Physical Functioning Average Q 3,4,5,6,7,8,9,10,11,12	calc Calculation: mean ([rnd36103], [rnd36104], [rnd36105], [rnd36106], [rnd36107], [rnd36108], [rnd36109], [rnd36110], [rnd36111], [rnd36112])										
704	[r1_ph]	Role limitaions due to physical health Average Q 13,14,15,16	calc Calculation: mean ([rnd36113], [rnd36114], [rnd36115], [rnd36116])										
705	[r1_ep]	Role Limitations due to Emotional Problems Average Q 17,18,19	calc Calculation: mean ([rnd36117], [rnd36118], [rnd36119])										
706	[e_f]	Energy/Fatigue Average Q 23,27,29,31	calc Calculation: mean ([rnd36123], [rnd36127], [rnd36129], [rnd36131])										
707	[ewb]	Emotional Well Being Average Q 24,25,26,28,30	calc Calculation: mean ([rnd36124], [rnd36125], [rnd36126], [rnd36128], [rnd36130])										
708	[sf]	Social Functioning Average Q 20,32	calc Calculation: mean ([rnd36120], [rnd36132])										
709	[pn]	Pain Average Q 21, 22	calc Calculation: mean ([rnd36121], [rnd36122])										
710	[gh]	General Health Average Q 1,33,34,35,36	calc Calculation: mean ([rnd36101], [rnd36133], [rnd36134], [rnd36135], [rnd36136])										
711	[sfusrid2]	Data Entry User ID	text Field Annotation: @USERNAME @HIDDEN										
712	[sf36_v1_rand_scoring_complete]	Section Header: Form Status Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete				
0	Incomplete												
1	Unverified												
2	Complete												
Instrument: SF36 Version 2 (sf36_version_20)													
713	[sfdescr]	Section Header: ***STOP...DO NOT USE THIS FORM UNTIL THE STUDY TEAM HAS AN AUTHORIZATION TO USE THIS FORM IN THEIR STUDY*** ONCE YOU HAVE CONFIRMED THAT, PLEASE REMOVE THIS TEXT FROM THE PRODUCTION DATABASE This survey asks for your views about your health. This information will help keep track of how you feel and how well you are able to do your usual activities. Thank you for completing the survey!	descriptive										

714	[sf36201]		<div>Section Header: For each of the following questions, please mark the one that best describes your answer. 1. In general, would you say your health is:</div> <div><div>radio (Matrix)</div><table><tr><td>1</td><td>Excellent</td></tr><tr><td>2</td><td>Very Good</td></tr><tr><td>3</td><td>Good</td></tr><tr><td>4</td><td>Fair</td></tr><tr><td>5</td><td>Poor</td></tr></table></div> <div>Custom alignment: LH</div>	1	Excellent	2	Very Good	3	Good	4	Fair	5	Poor
1	Excellent												
2	Very Good												
3	Good												
4	Fair												
5	Poor												
715	[sf36202]	<div>Section Header: 2. Compared to one year ago, how would you rate your health in general now?</div>	<div><div>radio (Matrix)</div><table><tr><td>1</td><td>Much better now than one year ago</td></tr><tr><td>2</td><td>Somewhat better now than one year ago</td></tr><tr><td>3</td><td>About the same as one year ago</td></tr><tr><td>4</td><td>Somewhat worse now than one year ago</td></tr><tr><td>5</td><td>Much worse now than one year ago</td></tr></table></div> <div>Custom alignment: LV</div>	1	Much better now than one year ago	2	Somewhat better now than one year ago	3	About the same as one year ago	4	Somewhat worse now than one year ago	5	Much worse now than one year ago
1	Much better now than one year ago												
2	Somewhat better now than one year ago												
3	About the same as one year ago												
4	Somewhat worse now than one year ago												
5	Much worse now than one year ago												
716	[sf36203a]	<div>Section Header: 3. The following items are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?</div> <div>a. Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports</div>	<div><div>radio (Matrix)</div><table><tr><td>1</td><td>Yes, limited a lot</td></tr><tr><td>2</td><td>Yes, limited a little</td></tr><tr><td>3</td><td>No, not Limited at all</td></tr></table></div> <div>Field Annotation: @NOMISSING</div>	1	Yes, limited a lot	2	Yes, limited a little	3	No, not Limited at all				
1	Yes, limited a lot												
2	Yes, limited a little												
3	No, not Limited at all												
717	[sf36203b]	<div>b. Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf</div>	<div><div>radio (Matrix)</div><table><tr><td>1</td><td>Yes, limited a lot</td></tr><tr><td>2</td><td>Yes, limited a little</td></tr><tr><td>3</td><td>No, not Limited at all</td></tr></table></div> <div>Field Annotation: @NOMISSING</div>	1	Yes, limited a lot	2	Yes, limited a little	3	No, not Limited at all				
1	Yes, limited a lot												
2	Yes, limited a little												
3	No, not Limited at all												
718	[sf36203c]	<div>c. Lifting or carrying groceries</div>	<div><div>radio (Matrix)</div><table><tr><td>1</td><td>Yes, limited a lot</td></tr><tr><td>2</td><td>Yes, limited a little</td></tr><tr><td>3</td><td>No, not Limited at all</td></tr></table></div> <div>Field Annotation: @NOMISSING</div>	1	Yes, limited a lot	2	Yes, limited a little	3	No, not Limited at all				
1	Yes, limited a lot												
2	Yes, limited a little												
3	No, not Limited at all												
719	[sf36203d]	<div>d. Climbing several flights of stairs</div>	<div><div>radio (Matrix)</div><table><tr><td>1</td><td>Yes, limited a lot</td></tr><tr><td>2</td><td>Yes, limited a little</td></tr><tr><td>3</td><td>No, not Limited at all</td></tr></table></div> <div>Field Annotation: @NOMISSING</div>	1	Yes, limited a lot	2	Yes, limited a little	3	No, not Limited at all				
1	Yes, limited a lot												
2	Yes, limited a little												
3	No, not Limited at all												
720	[sf36203e]	<div>e. Climbing one flight of stairs</div>	<div><div>radio (Matrix)</div><table><tr><td>1</td><td>Yes, limited a lot</td></tr><tr><td>2</td><td>Yes, limited a little</td></tr><tr><td>3</td><td>No, not Limited at all</td></tr></table></div> <div>Field Annotation: @NOMISSING</div>	1	Yes, limited a lot	2	Yes, limited a little	3	No, not Limited at all				
1	Yes, limited a lot												
2	Yes, limited a little												
3	No, not Limited at all												
721	[sf36203f]	<div>f. Bending, kneeling, or stooping</div>	<div><div>radio (Matrix)</div><table><tr><td>1</td><td>Yes, limited a lot</td></tr><tr><td>2</td><td>Yes, limited a little</td></tr><tr><td>3</td><td>No, not Limited at all</td></tr></table></div> <div>Field Annotation: @NOMISSING</div>	1	Yes, limited a lot	2	Yes, limited a little	3	No, not Limited at all				
1	Yes, limited a lot												
2	Yes, limited a little												
3	No, not Limited at all												
722	[sf36203g]	<div>g. Walking more than a mile</div>	<div><div>radio (Matrix)</div><table><tr><td>1</td><td>Yes, limited a lot</td></tr><tr><td>2</td><td>Yes, limited a little</td></tr><tr><td>3</td><td>No, not Limited at all</td></tr></table></div> <div>Field Annotation: @NOMISSING</div>	1	Yes, limited a lot	2	Yes, limited a little	3	No, not Limited at all				
1	Yes, limited a lot												
2	Yes, limited a little												
3	No, not Limited at all												

723	[sf36203h]	h. Walking several hundred yards	<div>radio (Matrix)</div> <table><tr><td>1</td><td>Yes, limited a lot</td></tr><tr><td>2</td><td>Yes, limited a little</td></tr><tr><td>3</td><td>No, not Limited at all</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	Yes, limited a lot	2	Yes, limited a little	3	No, not Limited at all				
1	Yes, limited a lot												
2	Yes, limited a little												
3	No, not Limited at all												
724	[sf36203i]	i. Walking one hundred yards	<div>radio (Matrix)</div> <table><tr><td>1</td><td>Yes, limited a lot</td></tr><tr><td>2</td><td>Yes, limited a little</td></tr><tr><td>3</td><td>No, not Limited at all</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	Yes, limited a lot	2	Yes, limited a little	3	No, not Limited at all				
1	Yes, limited a lot												
2	Yes, limited a little												
3	No, not Limited at all												
725	[sf36203j]	j. Bathing or dressing yourself	<div>radio (Matrix)</div> <table><tr><td>1</td><td>Yes, limited a lot</td></tr><tr><td>2</td><td>Yes, limited a little</td></tr><tr><td>3</td><td>No, not Limited at all</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	Yes, limited a lot	2	Yes, limited a little	3	No, not Limited at all				
1	Yes, limited a lot												
2	Yes, limited a little												
3	No, not Limited at all												
726	[sf36204a]	<div>Section Header: 4. During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of your physical health?</div> <div>a. Cut down on the amount of time you spent on work or other activities</div>	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												
727	[sf36204b]	b. Accomplished less than you would like	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												
728	[sf36204c]	c. Were limited in the kind of work or other activities	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												
729	[sf36204d]	d. Had difficulty performing the work or other activities (for example, it took extra effort)	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												
730	[sf36205a]	<div>Section Header: 5. During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?</div> <div>a. Cut down on the amount of time you spent on work or other activities</div>	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												

731	[sf36205b]	b. Accomplished less than you would like	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time		
1	All of the time														
2	Most of the time														
3	Some of the time														
4	A little of the time														
5	None of the time														
732	[sf36205c]	c. Did work or activities less carefully than usual	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time		
1	All of the time														
2	Most of the time														
3	Some of the time														
4	A little of the time														
5	None of the time														
733	[sf36206]	<div>Section Header: 6. During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors or groups?</div>	<div>radio (Matrix)</div> <table><tr><td>1</td><td>Not at all</td></tr><tr><td>2</td><td>Slightly</td></tr><tr><td>3</td><td>Moderately</td></tr><tr><td>4</td><td>Quite a bit</td></tr><tr><td>5</td><td>Extremely</td></tr></table> <div>Custom alignment: LH</div> <div>Field Annotation: @NOMISSING</div>	1	Not at all	2	Slightly	3	Moderately	4	Quite a bit	5	Extremely		
1	Not at all														
2	Slightly														
3	Moderately														
4	Quite a bit														
5	Extremely														
734	[sf36207]	<div>Section Header: 7. How much bodily pain have you had during the past 4 weeks?</div>	<div>radio (Matrix)</div> <table><tr><td>1</td><td>None</td></tr><tr><td>2</td><td>Very Mild</td></tr><tr><td>3</td><td>Mild</td></tr><tr><td>4</td><td>Moderate</td></tr><tr><td>5</td><td>Severe</td></tr><tr><td>6</td><td>Very Severe</td></tr></table> <div>Custom alignment: LH</div> <div>Field Annotation: @NOMISSING</div>	1	None	2	Very Mild	3	Mild	4	Moderate	5	Severe	6	Very Severe
1	None														
2	Very Mild														
3	Mild														
4	Moderate														
5	Severe														
6	Very Severe														
735	[sf36208]	<div>Section Header: 8. During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?</div>	<div>radio (Matrix)</div> <table><tr><td>1</td><td>Not at all</td></tr><tr><td>2</td><td>A little bit</td></tr><tr><td>3</td><td>Moderately</td></tr><tr><td>4</td><td>Quite a bit</td></tr><tr><td>5</td><td>Extremely</td></tr></table> <div>Custom alignment: LH</div> <div>Field Annotation: @NOMISSING</div>	1	Not at all	2	A little bit	3	Moderately	4	Quite a bit	5	Extremely		
1	Not at all														
2	A little bit														
3	Moderately														
4	Quite a bit														
5	Extremely														
736	[sf36209a]	<div>Section Header: 9. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks....</div> <div>a. Did you feel full of life?</div>	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time		
1	All of the time														
2	Most of the time														
3	Some of the time														
4	A little of the time														
5	None of the time														

737	[sf36209b]	b. Have you been very nervous?	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												
738	[sf36209c]	c. Have you felt so down in the dumps that nothing could cheer you up?	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												
739	[sf36209d]	d. Have you felt calm and peaceful?	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												
740	[sf36209e]	e. Did you have a lot of energy?	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												
741	[sf36209f]	f. Have you felt downhearted and depressed?	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												
742	[sf36209g]	g. Did you feel worn out?	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												
743	[sf36209h]	h. Have you been happy?	<div>radio (Matrix)</div> <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> <div>Field Annotation: @NOMISSING</div>	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												

744	[sf36209i]	i. Did you feel tired?	radio (Matrix) <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> Field Annotation: @NOMISSING	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												
745	[sf362010]	Section Header: 10. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc.)?	radio (Matrix) <table><tr><td>1</td><td>All of the time</td></tr><tr><td>2</td><td>Most of the time</td></tr><tr><td>3</td><td>Some of the time</td></tr><tr><td>4</td><td>A little of the time</td></tr><tr><td>5</td><td>None of the time</td></tr></table> Custom alignment: LH Field Annotation: @NOMISSING	1	All of the time	2	Most of the time	3	Some of the time	4	A little of the time	5	None of the time
1	All of the time												
2	Most of the time												
3	Some of the time												
4	A little of the time												
5	None of the time												
746	[sf36211a]	Section Header: 11. How TRUE or FALSE is each of the following statements for you? a. I seem to get sick a little easier than other people	radio (Matrix) <table><tr><td>1</td><td>Definitely true</td></tr><tr><td>2</td><td>Mostly true</td></tr><tr><td>3</td><td>Don't know</td></tr><tr><td>4</td><td>Mostly false</td></tr><tr><td>5</td><td>Definitely false</td></tr></table> Field Annotation: @NOMISSING	1	Definitely true	2	Mostly true	3	Don't know	4	Mostly false	5	Definitely false
1	Definitely true												
2	Mostly true												
3	Don't know												
4	Mostly false												
5	Definitely false												
747	[sf36211b]	b. I am as healthy as anybody I know	radio (Matrix) <table><tr><td>1</td><td>Definitely true</td></tr><tr><td>2</td><td>Mostly true</td></tr><tr><td>3</td><td>Don't know</td></tr><tr><td>4</td><td>Mostly false</td></tr><tr><td>5</td><td>Definitely false</td></tr></table> Field Annotation: @NOMISSING	1	Definitely true	2	Mostly true	3	Don't know	4	Mostly false	5	Definitely false
1	Definitely true												
2	Mostly true												
3	Don't know												
4	Mostly false												
5	Definitely false												
748	[sf36211c]	c. I expect my health to get worse	radio (Matrix) <table><tr><td>1</td><td>Definitely true</td></tr><tr><td>2</td><td>Mostly true</td></tr><tr><td>3</td><td>Don't know</td></tr><tr><td>4</td><td>Mostly false</td></tr><tr><td>5</td><td>Definitely false</td></tr></table> Field Annotation: @NOMISSING	1	Definitely true	2	Mostly true	3	Don't know	4	Mostly false	5	Definitely false
1	Definitely true												
2	Mostly true												
3	Don't know												
4	Mostly false												
5	Definitely false												
749	[sf36211d]	d. My health is excellent	radio (Matrix) <table><tr><td>1</td><td>Definitely true</td></tr><tr><td>2</td><td>Mostly true</td></tr><tr><td>3</td><td>Don't know</td></tr><tr><td>4</td><td>Mostly false</td></tr><tr><td>5</td><td>Definitely false</td></tr></table> Field Annotation: @NOMISSING	1	Definitely true	2	Mostly true	3	Don't know	4	Mostly false	5	Definitely false
1	Definitely true												
2	Mostly true												
3	Don't know												
4	Mostly false												
5	Definitely false												
750	[sfthanks]	THANK YOU FOR COMPLETING THESE QUESTIONS!	descriptive Field Annotation: @NOMISSING										
751	[sfusrid]	Data Entry User ID	text Field Annotation: @USERNAME @HIDDEN										
752	[sf36_version_20_complete]	Section Header: Form Status Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete				
0	Incomplete												
1	Unverified												
2	Complete												

Instrument: Mullen Scales Of Learning (mullen_scales_of_learning)

	753	[mldat]	Section Header: <i>Mullen Scales of Learning</i> Date of assessment <i>MM-DD-YYYY</i>	text (date_mdy, Max: today)
	754	[mltbt1]	Raw score Not done Raw score Not done Gross Motor {mlgmr:icons} {mlgmnd:icons} Receptive Language {mlrlr:icons} {mlrlnd:icons} Visual Reception {mlvrr:icons} {mlvrnd:icons} Expressive Language {mlelr:icons} {mlelnd:icons} Fine Motor {mlfmr:icons} {mlfmnd:icons} If minimum score was not achieved, enter 1 less than the lowest possible score.	descriptive
	755	[mlgmnd] Show the field ONLY if: [mlgmr]=""	Section Header: 1. Gross Motor not done	checkbox 55 mlgmnd__55 Not Done
	756	[mlgmr] Show the field ONLY if: [mlgmnd(55)]<>'1'	1A. Raw Score <i>(xx)</i>	text (integer, Min: 0, Max: 36) Field Annotation: @PLACEHOLDER="___"
	757	[mlvrnd] Show the field ONLY if: [mlvrr]=""	2. Visual Reception not done	checkbox 55 mlvrnd__55 Not Done
	758	[mlvrr] Show the field ONLY if: [mlvrnd(55)]<>'1'	2A. Raw Score <i>(xx)</i>	text (integer, Min: 0, Max: 50) Field Annotation: @PLACEHOLDER="___"
	759	[mlfmnd] Show the field ONLY if: [mlfmr]=""	3. Fine Motor not done	checkbox 55 mlfmnd__55 Not Done
	760	[mlfmr] Show the field ONLY if: [mlfmnd(55)]<>'1'	3A. Raw Score <i>(xx)</i>	text (integer, Min: 0, Max: 50) Field Annotation: @PLACEHOLDER="___"
	761	[mlrlnd] Show the field ONLY if: [mlrlr]=""	4. Receptive Language not done	checkbox 55 mlrlnd__55 Not Done
	762	[mlrlr] Show the field ONLY if: [mlrlnd(55)]<>'1'	4A. Raw Score <i>(xx)</i>	text (integer, Min: 0, Max: 50) Field Annotation: @PLACEHOLDER="___"
	763	[mlelnd] Show the field ONLY if: [mlelr]=""	5. Expressive Language not done	checkbox 55 mlelnd__55 Not Done
	764	[mlelr] Show the field ONLY if: [mlelnd(55)]<>'1'	5A. Raw Score <i>(xx)</i>	text (integer, Min: 0, Max: 50) Field Annotation: @PLACEHOLDER="___"
	765	[mlusrid]	Data Entry User ID	text Field Annotation: @USERNAME @HIDDEN
	766	[mullen_scales_of_learning_com plete]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete
Instrument: Study Drug Exposure Prompt (study_drug_exposure_prompt)				
	767	[exyn]	Were/was any study treatment(s) taken? <i>Indicate if the subject took any study medications. If Yes, include the appropriate details where indicated on the following form(s).</i>	yesno, Required 1 Yes 0 No Custom alignment: RH
	768	[exusrid1]	User ID:	text Field Annotation: @USERNAME @HIDDEN
	769	[study_drug_exposure_prompt_co mplete]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete
Instrument: Study Drug Exposure (study_drug_exposure)				

	770	<div>[exstdat]</div> <div>Show the field ONLY if: [exyn]='1'</div>	<div>What was the actual study treatment start date?</div> <div>Please record the date in MM-DD-YYYY format.</div>	text (date_mdy, Max: today), Required Field Annotation: [exstdtc]																		
	771	<div>[exsttim]</div> <div>Show the field ONLY if: [exyn] = '1'</div>	<div>What was the actual study treatment start time?</div> <div>HH:MM (24-hour clock) Record the time, (as complete as possible) when study treatment administration started.</div>	text (time), Required Field Annotation: [exstdtc]																		
	772	<div>[exendat]</div> <div>Show the field ONLY if: [exyn] = '1'</div>	<div>What was the actual study treatment end date?</div> <div>Please record the date in MM-DD-YYYY format.</div>	text (date_mdy, Max: today), Required Field Annotation: [exendtc]																		
	773	<div>[exentim]</div> <div>Show the field ONLY if: [exyn] = '1'</div>	<div>What was the actual study treatment end time?</div> <div>HH:MM (24-hour clock) Record the time, (as complete as possible) when study treatment administration stopped (e.g., for infusions this is the time when the infusion ended).</div>	text (time), Required Field Annotation: [exendtc]																		
	774	<div>[exdstxt]</div> <div>Show the field ONLY if: [exyn] = '1'</div>	<div>What was the dose (per administration)?</div> <div>Record the dose or amount of study treatment that was administered to/taken by the subject in the period recorded; from the start date/time to the end date/time inclusive.</div>	text (number, Min: 0), Required Field Annotation: [exdstxt][exdose]																		
	775	<div>[exdosu]</div> <div>Show the field ONLY if: [exyn] = '1'</div>	<div>What were the units for the dose?</div> <div>Please select only one response.</div>	<div>dropdown, Required</div> <table><tr><td>1</td><td>Milligram (mg)</td></tr><tr><td>2</td><td>Microgram (ug)</td></tr><tr><td>3</td><td>Milliliter (mL)</td></tr><tr><td>4</td><td>Gram (g)</td></tr><tr><td>5</td><td>International Unit (IU)</td></tr><tr><td>6</td><td>Tablet (tab)</td></tr><tr><td>7</td><td>Capsule (cap)</td></tr><tr><td>8</td><td>Puff</td></tr><tr><td>99</td><td>Other</td></tr></table> <div>Field Annotation: [exdosu]</div>	1	Milligram (mg)	2	Microgram (ug)	3	Milliliter (mL)	4	Gram (g)	5	International Unit (IU)	6	Tablet (tab)	7	Capsule (cap)	8	Puff	99	Other
1	Milligram (mg)																					
2	Microgram (ug)																					
3	Milliliter (mL)																					
4	Gram (g)																					
5	International Unit (IU)																					
6	Tablet (tab)																					
7	Capsule (cap)																					
8	Puff																					
99	Other																					
	776	<div>[exdosusp]</div> <div>Show the field ONLY if: [exyn] = '1' and [exdosu]='99'</div>	<div>If Other, please specify the dose unit:</div> <div>Please select only one response.</div>	text, Required Field Annotation: [exdosu]																		
	777	<div>[exdosfrq]</div> <div>Show the field ONLY if: [exyn] = '1'</div>	<div>What was the frequency of the study treatment dosing?</div> <div>Please select only one response.</div>	<div>dropdown, Required</div> <table><tr><td>1</td><td>Once Daily (QD)</td></tr><tr><td>2</td><td>Twice Daily (BID)</td></tr><tr><td>3</td><td>Three Times a Day (TID)</td></tr><tr><td>4</td><td>Four Times a Day (QID)</td></tr><tr><td>5</td><td>Every Other Day (QOD)</td></tr><tr><td>6</td><td>Every Month (QM)</td></tr><tr><td>7</td><td>As Needed (PRN)</td></tr><tr><td>99</td><td>Other</td></tr></table> <div>Field Annotation: [exdosfrq]</div>	1	Once Daily (QD)	2	Twice Daily (BID)	3	Three Times a Day (TID)	4	Four Times a Day (QID)	5	Every Other Day (QOD)	6	Every Month (QM)	7	As Needed (PRN)	99	Other		
1	Once Daily (QD)																					
2	Twice Daily (BID)																					
3	Three Times a Day (TID)																					
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5	Every Other Day (QOD)																					
6	Every Month (QM)																					
7	As Needed (PRN)																					
99	Other																					
	778	<div>[exdosfsp]</div> <div>Show the field ONLY if: [exyn] = '1' and [exdosfrq]='99'</div>	<div>If Other, please specify the dose frequency:</div> <div>Please select only one response.</div>	text, Required Field Annotation: [exdosfrq]																		
	779	<div>[exroute]</div> <div>Show the field ONLY if: [exyn] = '1'</div>	<div>What was the route of administration of the study treatment?</div> <div>Please select only one response.</div>	<div>dropdown, Required</div> <table><tr><td>1</td><td>Oral (PO)</td></tr><tr><td>2</td><td>Topical (TOP)</td></tr><tr><td>3</td><td>Subcutaneous (SC)</td></tr><tr><td>4</td><td>Transdermal</td></tr><tr><td>5</td><td>Intraocular</td></tr><tr><td>6</td><td>Intramuscular</td></tr><tr><td>7</td><td>Inhalation</td></tr><tr><td>8</td><td>Nasal</td></tr><tr><td>99</td><td>Other</td></tr></table> <div>Field Annotation: [exroute]</div>	1	Oral (PO)	2	Topical (TOP)	3	Subcutaneous (SC)	4	Transdermal	5	Intraocular	6	Intramuscular	7	Inhalation	8	Nasal	99	Other
1	Oral (PO)																					
2	Topical (TOP)																					
3	Subcutaneous (SC)																					
4	Transdermal																					
5	Intraocular																					
6	Intramuscular																					
7	Inhalation																					
8	Nasal																					
99	Other																					

780	<div>[exrtesp]</div> <div>Show the field ONLY if: [exyn] = '1' and [exroute]='99'</div>	<div>If Other, please specify the dose route of administration: <i>Please select only one response.</i></div>	text, Required Field Annotation: [exroute]						
781	<div>[exintrp]</div> <div>Show the field ONLY if: [exyn] = '1'</div>	<div>Was the study treatment interrupted? <i>Record if there was an interruption in the study treatment or dosing.</i></div>	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH Field Annotation: [exintrpyn]	1	Yes	0	No		
1	Yes								
0	No								
782	<div>[exdesc2]</div> <div>Show the field ONLY if: [exyn]='1'</div>	Please add a new instance of this form for each/all study drug exposure to ensure any gaps or changes in dosing are accounted for.	descriptive						
783	<div>[exdesc3]</div> <div>Show the field ONLY if: [exyn]='0'</div>	Since it was indicated on the "[form-link: study_drug_exposure_prompt]" that the subject did not take study drug, this form is intentionally left blank and should be saved with a "Complete" form status.	descriptive						
784	<div>[exdesc4]</div> <div>Show the field ONLY if: [exyn]=""</div>	Please complete the "[form-link: study_drug_exposure_prompt]" form before attempting to complete this form.	descriptive						
785	<div>[exusrid2]</div>	User ID:	text Field Annotation: @USERNAME @HIDDEN						
786	<div>[study_drug_exposure_complete]</div>	<div>Section Header: <i>Form Status</i></div> <div>Complete?</div>	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete								
1	Unverified								
2	Complete								

Instrument: Drug Accountability (drug_accountability)

787	[davisdat]	What was the visit date? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required						
788	[daperf]	Was study treatment dispensed?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No		
1	Yes								
0	No								
789	[daddat] Show the field ONLY if: [daperf]="1"	What was the date study treatment was dispensed? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [dadtc]						
790	[daorresd] Show the field ONLY if: [daperf]="1"	What was the amount dispensed? <i>(tablets)</i>	text (number, Min: 0, Max: 999), Required Field Annotation: [daorres]						
791	[daret] Show the field ONLY if: [daperf]="1"	Was the study treatment returned?	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No		
1	Yes								
0	No								
792	[dardat] Show the field ONLY if: [daret]="1"	What was the date study treatment was returned? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [dadtc]						
793	[daorresr] Show the field ONLY if: [daret]="1"	What was the amount of study treatment returned? <i>(tablets)</i>	text (number, Min: 0, Max: 999), Required Field Annotation: [daorres]						
794	[dausrid]	User ID:	text Field Annotation: @USERNAME @HIDDEN						
795	[drug_accountability_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete								
1	Unverified								
2	Complete								

Instrument: Adverse Events Prompt (adverse_events_prompt)

	796	[aeyn]	Were any adverse events experienced? <i>Indicate if the subject experienced any adverse events. If yes, please proceed to the following Adverse Events page to provide further specific details.</i>	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH Field Annotation: [aeyn]	1	Yes	0	No		
1	Yes									
0	No									
	797	[aeusrid1]	User ID:	text Field Annotation: @USERNAME @HIDDEN						
	798	[adverse_events_prompt_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete									
1	Unverified									
2	Complete									
Instrument: Adverse Events (CTCAE: V5) (adverse_events_ctcae_v5)										
	799	[aeinst1]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** ***Notes to Data Manager*** ***For RDCRN, CTCAE should be used*** ***For non-RDCRN studies, see below*** If CTCAE Utilized Ensure Instant Field Concatenation external module has been configured properly; if the module is not available in the REDCap instance, please reach out to the REDCap administrator at help-redcap@bmi.cchmc.org and request this module to be activated on your project If CTCAE is not being Utilized Remove all the CTCAE variables; e.g. CTCAE quick reference guide, all [aeterm(X)-v(X)] through [aetoxgr_v(X)] Ensure the "Adverse Event Description" header is moved to the correct location. Add an [aeterm] variable to collect adverse event terms. We encourage the use of an ontology/dictionary (e.g., SNOWMED CT). If the Log Form event name is changed, ensure that you update the [aeyn] branching logic appropriately.	descriptive Field Annotation: @HIDDEN						
	800	[aectcae_v5] Show the field ONLY if: [aeyn]='1'	CTCAE Version 5.0 Quick Reference The quick reference guide can be downloaded by clicking on the file link. Please use this quick reference guide as an aid for the completion of adverse events in the correct Common Terminology Criteria for Adverse Events (CTCAE) terminology.	descriptive Field Annotation: Information downloaded from https://ctep.cancer.gov/protocoldevelopment/electronic_applications/						
	801	[aedesc01] Show the field ONLY if: [aeyn]=1	Section Header: <i>Adverse Event Description</i> Reminder: Record only 1 diagnosis, sign or symptom per line (e.g., nausea and vomiting should not be recorded in the same entry, but as 2 separate entries). Using accepted medical terminology, enter the diagnosis (if known); otherwise enter a sign or symptom. <i>(select only one response)</i>	descriptive						

802	<div>[aesoc_v5]</div> <div>Show the field ONLY if: [aeyn]='1'</div>	<div>In what system organ class (SOC) can this adverse event be classified?</div> <div>Please select only one response.</div>	<div>dropdown (autocomplete), Required</div> <div><div>1</div><div>Blood and lymphatic system disorders</div></div> <div><div>2</div><div>Cardiac disorders</div></div> <div><div>3</div><div>Congenital, familial and genetic disorders</div></div> <div><div>4</div><div>Ear and labyrinth disorders</div></div> <div><div>5</div><div>Endocrine disorders</div></div> <div><div>6</div><div>Eye disorders</div></div> <div><div>7</div><div>Gastrointestinal disorders</div></div> <div><div>8</div><div>General disorders and administration site conditions</div></div> <div><div>9</div><div>Hepatobiliary disorders</div></div> <div><div>10</div><div>Immune system disorders</div></div> <div><div>11</div><div>Infections and infestations</div></div> <div><div>12</div><div>Injury, poisoning and procedural complications</div></div> <div><div>13</div><div>Investigations</div></div> <div><div>14</div><div>Metabolism and nutrition disorders</div></div> <div><div>15</div><div>Musculoskeletal and connective tissue disorders</div></div> <div><div>16</div><div>Neoplasms benign, malignant and unspecified (incl cysts and polyps)</div></div> <div><div>17</div><div>Nervous system disorders</div></div> <div><div>18</div><div>Pregnancy, puerperium and perinatal conditions</div></div> <div><div>19</div><div>Psychiatric disorders</div></div> <div><div>20</div><div>Renal and urinary disorders</div></div> <div><div>21</div><div>Reproductive system and breast disorders</div></div> <div><div>22</div><div>Respiratory, thoracic and mediastinal disorders</div></div> <div><div>23</div><div>Skin and subcutaneous tissue disorders</div></div> <div><div>24</div><div>Social circumstances</div></div> <div><div>25</div><div>Surgical and medical procedures</div></div> <div><div>26</div><div>Vascular disorders</div></div>	<div>Field Annotation: [aesoc]</div>
803	<div>[aeterm01_v5]</div> <div>Show the field ONLY if: [aesoc_v5] = '1'</div>	<div>Adverse Event (CTCAE v5.0)</div> <div>Blood and lymphatic system disorders</div> <div>Please select only one response.</div>	<div>dropdown (autocomplete), Required</div> <div><div>10002272</div><div>Anemia</div></div> <div><div>10048580</div><div>Bone marrow hypocellular</div></div> <div><div>10013442</div><div>Disseminated intravascular coagulation</div></div> <div><div>10014950</div><div>Eosinophilia</div></div> <div><div>10016288</div><div>Febrile neutropenia</div></div> <div><div>10019491</div><div>Hemolysis</div></div> <div><div>10019515</div><div>Hemolytic uremic syndrome</div></div> <div><div>10024378</div><div>Leukocytosis</div></div> <div><div>10025182</div><div>Lymph node pain</div></div> <div><div>10027506</div><div>Methemoglobinemia</div></div> <div><div>10043648</div><div>Thrombotic thrombocytopenic purpura</div></div> <div><div>10005329</div><div>Blood and lymphatic system disorders - Other, specify</div></div>	<div>Field Annotation: [aeterm]</div>

804	<div>[aeterm02_v5]</div> <div>Show the field ONLY if: [aesoc_v5] = '2'</div>	<div>Adverse Event (CTCAE v5.0)</div> <div>Cardiac Disorders</div> <div>Please select only one response.</div>	<div>dropdown (autocomplete), Required</div> <table><tr><td>10061589</td><td>Aortic valve disease</td></tr><tr><td>10003586</td><td>Asystole</td></tr><tr><td>10003658</td><td>Atrial fibrillation</td></tr><tr><td>10003662</td><td>Atrial flutter</td></tr><tr><td>10003673</td><td>Atrioventricular block complete</td></tr><tr><td>10003674</td><td>Atrioventricular block first degree</td></tr><tr><td>10007515</td><td>Cardiac arrest</td></tr><tr><td>10008481</td><td>Chest pain - cardiac</td></tr><tr><td>10010276</td><td>Conduction disorder</td></tr><tr><td>10011703</td><td>Cyanosis</td></tr><tr><td>10019279</td><td>Heart failure</td></tr><tr><td>10069501</td><td>Left ventricular systolic dysfunction</td></tr><tr><td>10061532</td><td>Mitral valve disease</td></tr><tr><td>10027786</td><td>Mobitz (type) II atrioventricular block</td></tr><tr><td>10027787</td><td>Mobitz type I</td></tr><tr><td>10028596</td><td>Myocardial infarction</td></tr><tr><td>10028606</td><td>Myocarditis</td></tr><tr><td>10033557</td><td>Palpitations</td></tr><tr><td>10034040</td><td>Paroxysmal atrial tachycardia</td></tr><tr><td>10034474</td><td>Pericardial effusion</td></tr><tr><td>10053565</td><td>Pericardial tamponade</td></tr><tr><td>10034484</td><td>Pericarditis</td></tr><tr><td>10061541</td><td>Pulmonary valve disease</td></tr><tr><td>10038748</td><td>Restrictive cardiomyopathy</td></tr><tr><td>10058597</td><td>Right ventricular dysfunction</td></tr><tr><td>10040639</td><td>Sick sinus syndrome</td></tr><tr><td>10040741</td><td>Sinus bradycardia</td></tr><tr><td>10040752</td><td>Sinus tachycardia</td></tr><tr><td>10042604</td><td>Supraventricular tachycardia</td></tr><tr><td>10061389</td><td>Tricuspid valve disease</td></tr><tr><td>10047281</td><td>Ventricular arrhythmia</td></tr><tr><td>10047290</td><td>Ventricular fibrillation</td></tr><tr><td>10047302</td><td>Ventricular tachycardia</td></tr><tr><td>10007541</td><td>Cardiac disorders - Other, specify</td></tr></table> <div>Field Annotation: [aeterm]</div>	10061589	Aortic valve disease	10003586	Asystole	10003658	Atrial fibrillation	10003662	Atrial flutter	10003673	Atrioventricular block complete	10003674	Atrioventricular block first degree	10007515	Cardiac arrest	10008481	Chest pain - cardiac	10010276	Conduction disorder	10011703	Cyanosis	10019279	Heart failure	10069501	Left ventricular systolic dysfunction	10061532	Mitral valve disease	10027786	Mobitz (type) II atrioventricular block	10027787	Mobitz type I	10028596	Myocardial infarction	10028606	Myocarditis	10033557	Palpitations	10034040	Paroxysmal atrial tachycardia	10034474	Pericardial effusion	10053565	Pericardial tamponade	10034484	Pericarditis	10061541	Pulmonary valve disease	10038748	Restrictive cardiomyopathy	10058597	Right ventricular dysfunction	10040639	Sick sinus syndrome	10040741	Sinus bradycardia	10040752	Sinus tachycardia	10042604	Supraventricular tachycardia	10061389	Tricuspid valve disease	10047281	Ventricular arrhythmia	10047290	Ventricular fibrillation	10047302	Ventricular tachycardia	10007541	Cardiac disorders - Other, specify
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805	<div>[aeterm03_v5]</div> <div>Show the field ONLY if: [aesoc_v5] = '3'</div>	<div>Adverse Event (CTCAE v5.0)</div> <div>Congenital, familial and genetic disorders</div> <div>Please select only one response.</div>	<div>dropdown (autocomplete), Required</div> <table><tr><td>10010331</td><td>Congenital, familial and genetic disorders - Other, specify</td></tr></table> <div>Field Annotation: [aeterm]</div>	10010331	Congenital, familial and genetic disorders - Other, specify																																																																		
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806	<div>[aeterm04_v5]</div> <div>Show the field ONLY if: [aesoc_v5] = '4'</div>	<div>Adverse Event (CTCAE v5.0)</div> <div>Ear and labyrinth disorders</div> <div>Please select only one response.</div>	<div>dropdown (autocomplete), Required</div> <table><tr><td>10014020</td><td>Ear pain</td></tr><tr><td>10065785</td><td>External ear pain</td></tr><tr><td>10019245</td><td>Hearing impaired</td></tr><tr><td>10065838</td><td>Middle ear inflammation</td></tr><tr><td>10043882</td><td>Tinnitus</td></tr><tr><td>10047340</td><td>Vertigo</td></tr><tr><td>10047386</td><td>Vestibular disorder</td></tr><tr><td>10013993</td><td>Ear and labyrinth disorders - Other, specify</td></tr></table> <div>Field Annotation: [aeterm]</div>	10014020	Ear pain	10065785	External ear pain	10019245	Hearing impaired	10065838	Middle ear inflammation	10043882	Tinnitus	10047340	Vertigo	10047386	Vestibular disorder	10013993	Ear and labyrinth disorders - Other, specify																																																				
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807	<div>[aeterm05_v5]</div> <div>Show the field ONLY if: [aesoc_v5] = '5'</div>	<div>Adverse Event (CTCAE v5.0)</div> <div>Endocrine disorders</div> <div>Please select only one response.</div>	<div>dropdown (autocomplete), Required</div> <table><tr><td>10001367</td><td>Adrenal insufficiency</td></tr><tr><td>10011655</td><td>Cushingoid</td></tr><tr><td>10012205</td><td>Delayed puberty</td></tr><tr><td>10018746</td><td>Growth accelerated</td></tr><tr><td>10020705</td><td>Hyperparathyroidism</td></tr><tr><td>10020850</td><td>Hyperthyroidism</td></tr><tr><td>10021041</td><td>Hypoparathyroidism</td></tr><tr><td>10062767</td><td>Hypophysitis</td></tr><tr><td>10021067</td><td>Hypopituitarism</td></tr><tr><td>10021114</td><td>Hypothyroidism</td></tr><tr><td>10058084</td><td>Precocious puberty</td></tr><tr><td>10067734</td><td>Testosterone deficiency</td></tr><tr><td>10047488</td><td>Virilization</td></tr><tr><td>10014698</td><td>Endocrine disorders - Other, specify</td></tr></table> <div>Field Annotation: [aeterm]</div>	10001367	Adrenal insufficiency	10011655	Cushingoid	10012205	Delayed puberty	10018746	Growth accelerated	10020705	Hyperparathyroidism	10020850	Hyperthyroidism	10021041	Hypoparathyroidism	10062767	Hypophysitis	10021067	Hypopituitarism	10021114	Hypothyroidism	10058084	Precocious puberty	10067734	Testosterone deficiency	10047488	Virilization	10014698	Endocrine disorders - Other, specify																								
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808	<div>[aeterm06_v5]</div> <div>Show the field ONLY if: [aesoc_v5] = '6'</div>	<div>Adverse Event (CTCAE v5.0)</div> <div>Eye disorders</div> <div>Please select only one response.</div>	<div>dropdown (autocomplete), Required</div> <table><tr><td>10005886</td><td>Blurred vision</td></tr><tr><td>10007739</td><td>Cataract</td></tr><tr><td>10048492</td><td>Corneal ulcer</td></tr><tr><td>10013774</td><td>Dry eye</td></tr><tr><td>10015829</td><td>Extraocular muscle paresis</td></tr><tr><td>10015958</td><td>Eye pain</td></tr><tr><td>10061145</td><td>Eyelid function disorder</td></tr><tr><td>10016757</td><td>Flashing lights</td></tr><tr><td>10016778</td><td>Floaters</td></tr><tr><td>10018304</td><td>Glaucoma</td></tr><tr><td>10023332</td><td>Keratitis</td></tr><tr><td>10029404</td><td>Night blindness</td></tr><tr><td>10061322</td><td>Optic nerve disorder</td></tr><tr><td>10033703</td><td>Papilledema</td></tr><tr><td>10054541</td><td>Periorbital edema</td></tr><tr><td>10034960</td><td>Photophobia</td></tr><tr><td>10038848</td><td>Retinal detachment</td></tr><tr><td>10038897</td><td>Retinal tear</td></tr><tr><td>10038901</td><td>Retinal vascular disorder</td></tr><tr><td>10038923</td><td>Retinopathy</td></tr><tr><td>10061510</td><td>Scleral disorder</td></tr><tr><td>10046851</td><td>Uveitis</td></tr><tr><td>10047516</td><td>Vision decreased</td></tr><tr><td>10047656</td><td>Vitreous hemorrhage</td></tr><tr><td>10047848</td><td>Watering eyes</td></tr><tr><td>10015919</td><td>Eye disorders - Other, specify</td></tr></table> <div>Field Annotation: [aeterm]</div>	10005886	Blurred vision	10007739	Cataract	10048492	Corneal ulcer	10013774	Dry eye	10015829	Extraocular muscle paresis	10015958	Eye pain	10061145	Eyelid function disorder	10016757	Flashing lights	10016778	Floaters	10018304	Glaucoma	10023332	Keratitis	10029404	Night blindness	10061322	Optic nerve disorder	10033703	Papilledema	10054541	Periorbital edema	10034960	Photophobia	10038848	Retinal detachment	10038897	Retinal tear	10038901	Retinal vascular disorder	10038923	Retinopathy	10061510	Scleral disorder	10046851	Uveitis	10047516	Vision decreased	10047656	Vitreous hemorrhage	10047848	Watering eyes	10015919	Eye disorders - Other, specify
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809	[aeterm07_v5] Show the field ONLY if: [aesoc_v5] = '7'	Adverse Event (CTCAE v5.0) Gastrointestinal disorders <i>Please select only one response.</i>	dropdown (autocomplete), Required
			10000060 Abdominal distension
			10000081 Abdominal pain
			10002153 Anal fissure
			10002156 Anal fistula
			10055226 Anal hemorrhage
			10065721 Anal mucositis
			10065722 Anal necrosis
			10002167 Anal pain
			10002176 Anal stenosis
			10002180 Anal ulcer
			10003445 Ascites
			10004222 Belching
			10005265 Bloating
			10065747 Cecal hemorrhage
			10008417 Cheilitis
			10009167 Chylous ascites
			10009887 Colitis
			10009995 Colonic fistula
			10009998 Colonic hemorrhage
			10010000 Colonic obstruction
			10010001 Colonic perforation
			10010004 Colonic stenosis
			10010006 Colonic ulcer
			10010774 Constipation
			10012318 Dental caries
			10012727 Diarrhea
			10013781 Dry mouth
			10013828 Duodenal fistula
			10055242 Duodenal hemorrhage
			10013830 Duodenal obstruction
			10013832 Duodenal perforation
			10050094 Duodenal stenosis
			10013836 Duodenal ulcer
			10013946 Dyspepsia
			10013950 Dysphagia
			10014893 Enterocolitis
			10062570 Enterovesical fistula
			10065851 Esophageal fistula
			10015384 Esophageal hemorrhage
			10065727 Esophageal necrosis
			10015387 Esophageal obstruction
			10015388 Esophageal pain
			10055472 Esophageal perforation
			10015448 Esophageal stenosis
			10015451 Esophageal ulcer
			10015453 Esophageal varices hemorrhage
			10015461 Esophagitis
			10016296 Fecal incontinence
			10016766 Flatulence
			10065713 Gastric fistula
			10017789 Gastric hemorrhage
			10051886 Gastric necrosis
			10017815 Gastric perforation

10061970	Gastric stenosis
10017822	Gastric ulcer
10017853	Gastritis
10066874	Gastroesophageal reflux disease
10017877	Gastrointestinal fistula
10017999	Gastrointestinal pain
10018043	Gastroparesis
10018286	Gingival pain
10060640	Hemorrhoidal hemorrhage
10019611	Hemorrhoids
10065728	Ileal fistula
10055287	Ileal hemorrhage
10065730	Ileal obstruction
10021305	Ileal perforation
10021307	Ileal stenosis
10021309	Ileal ulcer
10021328	Ileus
10055291	Intra-abdominal hemorrhage
10065719	Jejunal fistula
10055300	Jejunal hemorrhage
10065732	Jejunal obstruction
10023174	Jejunal perforation
10023176	Jejunal stenosis
10023177	Jejunal ulcer
10024561	Lip pain
10051746	Lower gastrointestinal hemorrhage
10025476	Malabsorption
10028130	Mucositis oral
10028813	Nausea
10029957	Obstruction gastric
10065720	Oral cavity fistula
10054520	Oral dysesthesia
10030980	Oral hemorrhage
10031009	Oral pain
10065703	Pancreatic duct stenosis
10049192	Pancreatic fistula
10033626	Pancreatic hemorrhage
10058096	Pancreatic necrosis
10033645	Pancreatitis
10034536	Periodontal disease
10065704	Peritoneal necrosis
10036774	Proctitis
10064993	Rectal fissure
10038062	Rectal fistula
10038064	Rectal hemorrhage
10063190	Rectal mucositis
10065709	Rectal necrosis
10065707	Rectal obstruction
10038072	Rectal pain
10038073	Rectal perforation
10038079	Rectal stenosis
10038080	Rectal ulcer
10038981	Retroperitoneal hemorrhage
10056681	Salivary duct inflammation

				<table><tr><td>10039411</td><td>Salivary gland fistula</td></tr><tr><td>10065710</td><td>Small intestinal mucositis</td></tr><tr><td>10041101</td><td>Small intestinal obstruction</td></tr><tr><td>10041103</td><td>Small intestinal perforation</td></tr><tr><td>10062263</td><td>Small intestinal stenosis</td></tr><tr><td>10041133</td><td>Small intestine ulcer</td></tr><tr><td>10042112</td><td>Stomach pain</td></tr><tr><td>10044030</td><td>Tooth development disorder</td></tr><tr><td>10044031</td><td>Tooth discoloration</td></tr><tr><td>10044055</td><td>Toothache</td></tr><tr><td>10045271</td><td>Typhlitis</td></tr><tr><td>10055356</td><td>Upper gastrointestinal hemorrhage</td></tr><tr><td>10054692</td><td>Visceral arterial ischemia</td></tr><tr><td>10047700</td><td>Vomiting</td></tr><tr><td>10017947</td><td>Gastrointestinal disorders - Other, specify</td></tr></table>	10039411	Salivary gland fistula	10065710	Small intestinal mucositis	10041101	Small intestinal obstruction	10041103	Small intestinal perforation	10062263	Small intestinal stenosis	10041133	Small intestine ulcer	10042112	Stomach pain	10044030	Tooth development disorder	10044031	Tooth discoloration	10044055	Toothache	10045271	Typhlitis	10055356	Upper gastrointestinal hemorrhage	10054692	Visceral arterial ischemia	10047700	Vomiting	10017947	Gastrointestinal disorders - Other, specify																						
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810	[aeterm08_v5] Show the field ONLY if: [aesoc_v5] = '8'	Adverse Event (CTCAE v5.0) General disorders and administration site conditions <i>Please select only one response.</i>	<table><tr><td colspan="2">dropdown (autocomplete), Required</td></tr><tr><td>10008531</td><td>Chills</td></tr><tr><td>10011912</td><td>Death neonatal</td></tr><tr><td>10011914</td><td>Death NOS</td></tr><tr><td>10061818</td><td>Disease progression</td></tr><tr><td>10014222</td><td>Edema face</td></tr><tr><td>10050068</td><td>Edema limbs</td></tr><tr><td>10058720</td><td>Edema trunk</td></tr><tr><td>10016059</td><td>Facial pain</td></tr><tr><td>10016256</td><td>Fatigue</td></tr><tr><td>10016558</td><td>Fever</td></tr><tr><td>10016791</td><td>Flu like symptoms</td></tr><tr><td>10017577</td><td>Gait disturbance</td></tr><tr><td>10018112</td><td>Generalized edema</td></tr><tr><td>10021113</td><td>Hypothermia</td></tr><tr><td>10064774</td><td>Infusion site extravasation</td></tr><tr><td>10022095</td><td>Injection site reaction</td></tr><tr><td>10062466</td><td>Localized edema</td></tr><tr><td>10025482</td><td>Malaise</td></tr><tr><td>10028154</td><td>Multi-organ failure</td></tr><tr><td>10054482</td><td>Neck edema</td></tr><tr><td>10062501</td><td>Non-cardiac chest pain</td></tr><tr><td>10033371</td><td>Pain</td></tr><tr><td>10042435</td><td>Sudden death NOS</td></tr><tr><td>10069480</td><td>Vaccination site lymphadenopathy</td></tr><tr><td>10018065</td><td>General disorders and administration site conditions - Other, specify</td></tr></table>		dropdown (autocomplete), Required		10008531	Chills	10011912	Death neonatal	10011914	Death NOS	10061818	Disease progression	10014222	Edema face	10050068	Edema limbs	10058720	Edema trunk	10016059	Facial pain	10016256	Fatigue	10016558	Fever	10016791	Flu like symptoms	10017577	Gait disturbance	10018112	Generalized edema	10021113	Hypothermia	10064774	Infusion site extravasation	10022095	Injection site reaction	10062466	Localized edema	10025482	Malaise	10028154	Multi-organ failure	10054482	Neck edema	10062501	Non-cardiac chest pain	10033371	Pain	10042435	Sudden death NOS	10069480	Vaccination site lymphadenopathy	10018065	General disorders and administration site conditions - Other, specify
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Field Annotation: [aeterm]																																																								

Show the field ONLY if:
[aesoc_v5] = '8'

811	<div>[aeterm09_v5]</div> <div>Show the field ONLY if: [aesoc_v5] = '9'</div>	<div>Adverse Event (CTCAE v5.0)</div> <div>Hepatobiliary disorders</div> <div>Please select only one response.</div>	<div>dropdown (autocomplete), Required</div> <table><tr><td>10051341</td><td>Bile duct stenosis</td></tr><tr><td>10004665</td><td>Biliary fistula</td></tr><tr><td>10006537</td><td>Budd-Chiari syndrome</td></tr><tr><td>10008612</td><td>Cholecystitis</td></tr><tr><td>10017631</td><td>Gallbladder fistula</td></tr><tr><td>10059446</td><td>Gallbladder necrosis</td></tr><tr><td>10017636</td><td>Gallbladder obstruction</td></tr><tr><td>10017638</td><td>Gallbladder pain</td></tr><tr><td>10017639</td><td>Gallbladder perforation</td></tr><tr><td>10019663</td><td>Hepatic failure</td></tr><tr><td>10019678</td><td>Hepatic hemorrhage</td></tr><tr><td>10019692</td><td>Hepatic necrosis</td></tr><tr><td>10019705</td><td>Hepatic pain</td></tr><tr><td>10034405</td><td>Perforation bile duct</td></tr><tr><td>10036200</td><td>Portal hypertension</td></tr><tr><td>10036206</td><td>Portal vein thrombosis</td></tr><tr><td>10063675</td><td>Sinusoidal obstruction syndrome</td></tr><tr><td>10019805</td><td>Hepatobiliary disorders - Other, specify</td></tr></table> <div>Field Annotation: [aeterm]</div>	10051341	Bile duct stenosis	10004665	Biliary fistula	10006537	Budd-Chiari syndrome	10008612	Cholecystitis	10017631	Gallbladder fistula	10059446	Gallbladder necrosis	10017636	Gallbladder obstruction	10017638	Gallbladder pain	10017639	Gallbladder perforation	10019663	Hepatic failure	10019678	Hepatic hemorrhage	10019692	Hepatic necrosis	10019705	Hepatic pain	10034405	Perforation bile duct	10036200	Portal hypertension	10036206	Portal vein thrombosis	10063675	Sinusoidal obstruction syndrome	10019805	Hepatobiliary disorders - Other, specify
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10019805	Hepatobiliary disorders - Other, specify																																						
812	<div>[aeterm10_v5]</div> <div>Show the field ONLY if: [aesoc_v5] = '10'</div>	<div>Adverse Event (CTCAE v5.0)</div> <div>Immune system disorders</div> <div>Please select only one response.</div>	<div>dropdown (autocomplete), Required</div> <table><tr><td>10001718</td><td>Allergic reaction</td></tr><tr><td>10002218</td><td>Anaphylaxis</td></tr><tr><td>10061664</td><td>Autoimmune disorder</td></tr><tr><td>10052015</td><td>Cytokine release syndrome</td></tr><tr><td>10040400</td><td>Serum sickness</td></tr><tr><td>10021428</td><td>Immune system disorders - Other, specify</td></tr></table> <div>Field Annotation: [aeterm]</div>	10001718	Allergic reaction	10002218	Anaphylaxis	10061664	Autoimmune disorder	10052015	Cytokine release syndrome	10040400	Serum sickness	10021428	Immune system disorders - Other, specify																								
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813	[aeterm11_v5] Show the field ONLY if: [aesoc_v5] = '11'	Adverse Event (CTCAE v5.0) Infections and infestations <i>Please select only one response.</i>	dropdown (autocomplete), Required <table><tr><td>10056519</td><td>Abdominal infection</td></tr><tr><td>10061640</td><td>Anorectal infection</td></tr><tr><td>10003011</td><td>Appendicitis</td></tr><tr><td>10003012</td><td>Appendicitis perforated</td></tr><tr><td>10065744</td><td>Arteritis infective</td></tr><tr><td>10003999</td><td>Bacteremia</td></tr><tr><td>10061695</td><td>Biliary tract infection</td></tr><tr><td>10005047</td><td>Bladder infection</td></tr><tr><td>10061017</td><td>Bone infection</td></tr><tr><td>10006259</td><td>Breast infection</td></tr><tr><td>10055078</td><td>Bronchial infection</td></tr><tr><td>10007810</td><td>Catheter related infection</td></tr><tr><td>10065761</td><td>Cecal infection</td></tr><tr><td>10008330</td><td>Cervicitis infection</td></tr><tr><td>10010741</td><td>Conjunctivitis</td></tr><tr><td>10010742</td><td>Conjunctivitis infective</td></tr><tr><td>10061788</td><td>Corneal infection</td></tr><tr><td>10065765</td><td>Cranial nerve infection</td></tr><tr><td>10058666</td><td>Cytomegalovirus infection reactivation</td></tr><tr><td>10064687</td><td>Device related infection</td></tr><tr><td>10065752</td><td>Duodenal infection</td></tr><tr><td>10014594</td><td>Encephalitis infection</td></tr><tr><td>10014621</td><td>Encephalomyelitis infection</td></tr><tr><td>10014678</td><td>Endocarditis infective</td></tr><tr><td>10014801</td><td>Endophthalmitis</td></tr><tr><td>10058838</td><td>Enterocolitis infectious</td></tr><tr><td>10015109</td><td>Epstein-Barr virus infection reactivation</td></tr><tr><td>10058804</td><td>Esophageal infection</td></tr><tr><td>10015929</td><td>Eye infection</td></tr><tr><td>10016936</td><td>Folliculitis</td></tr><tr><td>10017544</td><td>Fungemia</td></tr><tr><td>10062632</td><td>Gallbladder infection</td></tr><tr><td>10018784</td><td>Gum infection</td></tr><tr><td>10056522</td><td>Hepatic infection</td></tr><tr><td>10058827</td><td>Hepatitis B reactivation</td></tr><tr><td>10019799</td><td>Hepatitis viral</td></tr><tr><td>10080137</td><td>Herpes simplex reactivation</td></tr><tr><td>10021918</td><td>Infective myositis</td></tr><tr><td>10023216</td><td>Joint infection</td></tr><tr><td>10023424</td><td>Kidney infection</td></tr><tr><td>10023874</td><td>Laryngitis</td></tr><tr><td>10065755</td><td>Lip infection</td></tr><tr><td>10061229</td><td>Lung infection</td></tr><tr><td>10050823</td><td>Lymph gland infection</td></tr><tr><td>10057483</td><td>Mediastinal infection</td></tr><tr><td>10027199</td><td>Meningitis</td></tr><tr><td>10065764</td><td>Mucosal infection</td></tr><tr><td>10028524</td><td>Myelitis</td></tr><tr><td>10061304</td><td>Nail infection</td></tr><tr><td>10033072</td><td>Otitis externa</td></tr><tr><td>10033078</td><td>Otitis media</td></tr><tr><td>10055005</td><td>Ovarian infection</td></tr><tr><td>10051741</td><td>Pancreas infection</td></tr></table>	10056519	Abdominal infection	10061640	Anorectal infection	10003011	Appendicitis	10003012	Appendicitis perforated	10065744	Arteritis infective	10003999	Bacteremia	10061695	Biliary tract infection	10005047	Bladder infection	10061017	Bone infection	10006259	Breast infection	10055078	Bronchial infection	10007810	Catheter related infection	10065761	Cecal infection	10008330	Cervicitis infection	10010741	Conjunctivitis	10010742	Conjunctivitis infective	10061788	Corneal infection	10065765	Cranial nerve infection	10058666	Cytomegalovirus infection reactivation	10064687	Device related infection	10065752	Duodenal infection	10014594	Encephalitis infection	10014621	Encephalomyelitis infection	10014678	Endocarditis infective	10014801	Endophthalmitis	10058838	Enterocolitis infectious	10015109	Epstein-Barr virus infection reactivation	10058804	Esophageal infection	10015929	Eye infection	10016936	Folliculitis	10017544	Fungemia	10062632	Gallbladder infection	10018784	Gum infection	10056522	Hepatic infection	10058827	Hepatitis B reactivation	10019799	Hepatitis viral	10080137	Herpes simplex reactivation	10021918	Infective myositis	10023216	Joint infection	10023424	Kidney infection	10023874	Laryngitis	10065755	Lip infection	10061229	Lung infection	10050823	Lymph gland infection	10057483	Mediastinal infection	10027199	Meningitis	10065764	Mucosal infection	10028524	Myelitis	10061304	Nail infection	10033072	Otitis externa	10033078	Otitis media	10055005	Ovarian infection	10051741	Pancreas infection
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10069138	Papulopustular rash
10034016	Paronychia
10058674	Pelvic infection
10061912	Penile infection
10051472	Periorbital infection
10065766	Peripheral nerve infection
10057262	Peritoneal infection
10034835	Pharyngitis
10056627	Phlebitis infective
10061351	Pleural infection
10050662	Prostate infection
10037888	Rash pustular
10059827	Rhinitis infective
10039413	Salivary gland infection
10062156	Scrotal infection
10040047	Sepsis
10040555	Shingles
10040753	Sinusitis
10040872	Skin infection
10065771	Small intestine infection
10062255	Soft tissue infection
10062112	Splenic infection
10064505	Stoma site infection
10043649	Thrush
10048762	Tooth infection
10044302	Tracheitis
10046300	Upper respiratory infection
10052298	Urethral infection
10046571	Urinary tract infection
10062233	Uterine infection
10046914	Vaginal infection
10054688	Viremia
10065772	Vulval infection
10048038	Wound infection
10021881	Infections and infestations - Other, specify

Field Annotation: [aeterm]

814	[aeterm12_v5] Show the field ONLY if: [aesoc_v5] = '12'	Adverse Event (CTCAE v5.0) Injury, poisoning and procedural complications <i>Please select only one response.</i>	dropdown (autocomplete), Required
			10002544 Ankle fracture
			10002899 Aortic injury
			10003162 Arterial injury
			10050458 Biliary anastomotic leak
			10065802 Bladder anastomotic leak
			10006504 Bruising
			10006634 Burn
			10061103 Dermatitis radiation
			10065961 Esophageal anastomotic leak
			10016173 Fall
			10065788 Fallopian tube anastomotic leak
			10065790 Fallopian tube perforation
			10017076 Fracture
			10065893 Gastric anastomotic leak
			10065879 Gastrointestinal anastomotic leak
			10065712 Gastrointestinal stoma necrosis
			10020100 Hip fracture
			10051792 Infusion related reaction
			10022161 Injury to carotid artery
			10022213 Injury to inferior vena cava
			10065849 Injury to jugular vein
			10022356 Injury to superior vena cava
			10059095 Intestinal stoma leak
			10059094 Intestinal stoma obstruction
			10049468 Intestinal stoma site bleeding
			10065826 Intraoperative arterial injury
			10065831 Intraoperative breast injury
			10065843 Intraoperative cardiac injury
			10065844 Intraoperative ear injury
			10065834 Intraoperative endocrine injury
			10065825 Intraoperative gastrointestinal injury
			10065842 Intraoperative head and neck injury
			10055298 Intraoperative hemorrhage
			10065827 Intraoperative hepatobiliary injury
			10065829 Intraoperative musculoskeletal injury
			10065830 Intraoperative neurological injury
			10065841 Intraoperative ocular injury
			10065845 Intraoperative renal injury
			10065840 Intraoperative reproductive tract injury
			10065832 Intraoperative respiratory injury
			10065847 Intraoperative splenic injury
			10065828 Intraoperative urinary injury
			10065848 Intraoperative venous injury
			10065803 Kidney anastomotic leak
			10065891 Large intestinal anastomotic leak
			10050457 Pancreatic anastomotic leak
			10065705 Pharyngeal anastomotic leak
			10055322 Postoperative hemorrhage
			10056745 Postoperative thoracic procedure complication
			10065745 Prolapse of intestinal stoma
			10065822 Prolapse of urostomy
			10037767 Radiation recall reaction (dermatologic)
			10065894 Rectal anastomotic leak

					10040102	Seroma
					10065892	Small intestinal anastomotic leak
					10065897	Spermatic cord anastomotic leak
					10041569	Spinal fracture
					10065898	Stenosis of gastrointestinal stoma
					10042127	Stomal ulcer
					10062548	Tracheal hemorrhage
					10044291	Tracheal obstruction
					10065749	Tracheostomy site bleeding
					10065814	Ureteric anastomotic leak
					10065815	Urethral anastomotic leak
					10065882	Urostomy leak
					10065883	Urostomy obstruction
					10065748	Urostomy site bleeding
					10065885	Urostomy stenosis
					10065886	Uterine anastomotic leak
					10046810	Uterine perforation
					10046861	Vaccination complication
					10065887	Vaginal anastomotic leak
					10065888	Vas deferens anastomotic leak
					10062169	Vascular access complication
					10047228	Venous injury
					10053692	Wound complication
					10048031	Wound dehiscence
					10048049	Wrist fracture
					10022117	Injury, poisoning and procedural complications - Other, specify
					Field Annotation: [aeterm]	

815	[aeterm13_v5]	Adverse Event (CTCAE v5.0)	dropdown (autocomplete), Required																																																																																				
	Show the field ONLY if: [aesoc_v5] = '13'	Investigations <i>Please select only one response.</i>	<table border="1"> <tr><td>10000636</td><td>Activated partial thromboplastin time prolonged</td></tr> <tr><td>10001551</td><td>Alanine aminotransferase increased</td></tr> <tr><td>10001675</td><td>Alkaline phosphatase increased</td></tr> <tr><td>10003481</td><td>Aspartate aminotransferase increased</td></tr> <tr><td>10005332</td><td>Blood antidiuretic hormone abnormal</td></tr> <tr><td>10005359</td><td>Blood bicarbonate decreased</td></tr> <tr><td>10005364</td><td>Blood bilirubin increased</td></tr> <tr><td>10005452</td><td>Blood corticotrophin decreased</td></tr> <tr><td>10005561</td><td>Blood gonadotrophin abnormal</td></tr> <tr><td>10005630</td><td>Blood lactate dehydrogenase increased</td></tr> <tr><td>10005778</td><td>Blood prolactin abnormal</td></tr> <tr><td>10065906</td><td>Carbon monoxide diffusing capacity decreased</td></tr> <tr><td>10007612</td><td>Cardiac troponin I increased</td></tr> <tr><td>10007613</td><td>Cardiac troponin T increased</td></tr> <tr><td>10007839</td><td>CD4 lymphocytes decreased</td></tr> <tr><td>10008661</td><td>Cholesterol high</td></tr> <tr><td>10011268</td><td>CPK increased</td></tr> <tr><td>10011368</td><td>Creatinine increased</td></tr> <tr><td>10050528</td><td>Ejection fraction decreased</td></tr> <tr><td>10014383</td><td>Electrocardiogram QT corrected interval prolonged</td></tr> <tr><td>10050380</td><td>Electrocardiogram T wave abnormal</td></tr> <tr><td>10016596</td><td>Fibrinogen decreased</td></tr> <tr><td>10016987</td><td>Forced expiratory volume decreased</td></tr> <tr><td>10056910</td><td>GGT increased</td></tr> <tr><td>10018748</td><td>Growth hormone abnormal</td></tr> <tr><td>10019150</td><td>Haptoglobin decreased</td></tr> <tr><td>10055599</td><td>Hemoglobin increased</td></tr> <tr><td>10022402</td><td>INR increased</td></tr> <tr><td>10024574</td><td>Lipase increased</td></tr> <tr><td>10025256</td><td>Lymphocyte count decreased</td></tr> <tr><td>10025258</td><td>Lymphocyte count increased</td></tr> <tr><td>10029366</td><td>Neutrophil count decreased</td></tr> <tr><td>10062646</td><td>Pancreatic enzymes decreased</td></tr> <tr><td>10035528</td><td>Platelet count decreased</td></tr> <tr><td>10040139</td><td>Serum amylase increased</td></tr> <tr><td>10043770</td><td>Thyroid stimulating hormone increased</td></tr> <tr><td>10059895</td><td>Urine output decreased</td></tr> <tr><td>10047580</td><td>Vital capacity abnormal</td></tr> <tr><td>10047896</td><td>Weight gain</td></tr> <tr><td>10047900</td><td>Weight loss</td></tr> <tr><td>10049182</td><td>White blood cell decreased</td></tr> <tr><td>10022891</td><td>Investigations - Other, specify</td></tr> </table>	10000636	Activated partial thromboplastin time prolonged	10001551	Alanine aminotransferase increased	10001675	Alkaline phosphatase increased	10003481	Aspartate aminotransferase increased	10005332	Blood antidiuretic hormone abnormal	10005359	Blood bicarbonate decreased	10005364	Blood bilirubin increased	10005452	Blood corticotrophin decreased	10005561	Blood gonadotrophin abnormal	10005630	Blood lactate dehydrogenase increased	10005778	Blood prolactin abnormal	10065906	Carbon monoxide diffusing capacity decreased	10007612	Cardiac troponin I increased	10007613	Cardiac troponin T increased	10007839	CD4 lymphocytes decreased	10008661	Cholesterol high	10011268	CPK increased	10011368	Creatinine increased	10050528	Ejection fraction decreased	10014383	Electrocardiogram QT corrected interval prolonged	10050380	Electrocardiogram T wave abnormal	10016596	Fibrinogen decreased	10016987	Forced expiratory volume decreased	10056910	GGT increased	10018748	Growth hormone abnormal	10019150	Haptoglobin decreased	10055599	Hemoglobin increased	10022402	INR increased	10024574	Lipase increased	10025256	Lymphocyte count decreased	10025258	Lymphocyte count increased	10029366	Neutrophil count decreased	10062646	Pancreatic enzymes decreased	10035528	Platelet count decreased	10040139	Serum amylase increased	10043770	Thyroid stimulating hormone increased	10059895	Urine output decreased	10047580	Vital capacity abnormal	10047896	Weight gain	10047900	Weight loss	10049182	White blood cell decreased	10022891	Investigations - Other, specify
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816	[aeterm14_v5]	Show the field ONLY if: [aesoc_v5] = '14'	Adverse Event (CTCAE v5.0) Metabolism and nutrition disorders <i>Please select only one response.</i>	dropdown (autocomplete), Required	
				10000486	Acidosis
				10001598	Alcohol intolerance
				10001680	Alkalosis
				10002646	Anorexia
				10012174	Dehydration
				10052426	Glucose intolerance
				10020587	Hypercalcemia
				10020639	Hyperglycemia
				10020647	Hyperkalemia
				10020667	Hyperlipidemia
				10020670	Hypermagnesemia
				10020680	Hypernatremia
				10020712	Hyperphosphatemia
				10020870	Hypertriglyceridemia
				10020907	Hyperuricemia
				10020943	Hypoalbuminemia
				10020949	Hypocalcemia
				10021005	Hypoglycemia
				10021018	Hypokalemia
				10021028	Hypomagnesemia
				10021038	Hyponatremia
				10021059	Hypophosphatemia
				10065973	Iron overload
				10029883	Obesity
				10045152	Tumor lysis syndrome
				10027433	Metabolism and nutrition disorders - Other, specify
Field Annotation: [aeterm]					

817	[aeterm15_v5] Show the field ONLY if: [aesoc_v5] = '15'	Adverse Event (CTCAE v5.0) Musculoskeletal and connective tissue disorders <i>Please select only one response.</i>	<div>dropdown (autocomplete), Required</div> <table><tr><td>10065775</td><td>Abdominal soft tissue necrosis</td></tr><tr><td>10003239</td><td>Arthralgia</td></tr><tr><td>10003246</td><td>Arthritis</td></tr><tr><td>10066480</td><td>Avascular necrosis</td></tr><tr><td>10003988</td><td>Back pain</td></tr><tr><td>10006002</td><td>Bone pain</td></tr><tr><td>10048677</td><td>Buttock pain</td></tr><tr><td>10048831</td><td>Chest wall necrosis</td></tr><tr><td>10008496</td><td>Chest wall pain</td></tr><tr><td>10015688</td><td>Exostosis</td></tr><tr><td>10065799</td><td>Fibrosis deep connective tissue</td></tr><tr><td>10016750</td><td>Flank pain</td></tr><tr><td>10062572</td><td>Generalized muscle weakness</td></tr><tr><td>10018761</td><td>Growth suppression</td></tr><tr><td>10065779</td><td>Head soft tissue necrosis</td></tr><tr><td>10023215</td><td>Joint effusion</td></tr><tr><td>10048706</td><td>Joint range of motion decreased</td></tr><tr><td>10065796</td><td>Joint range of motion decreased cervical spine</td></tr><tr><td>10065800</td><td>Joint range of motion decreased lumbar spine</td></tr><tr><td>10023509</td><td>Kyphosis</td></tr><tr><td>10024842</td><td>Lordosis</td></tr><tr><td>10028294</td><td>Muscle cramp</td></tr><tr><td>10065776</td><td>Muscle weakness lower limb</td></tr><tr><td>10065795</td><td>Muscle weakness trunk</td></tr><tr><td>10065895</td><td>Muscle weakness upper limb</td></tr><tr><td>10065783</td><td>Musculoskeletal deformity</td></tr><tr><td>10028411</td><td>Myalgia</td></tr><tr><td>10028653</td><td>Myositis</td></tr><tr><td>10028836</td><td>Neck pain</td></tr><tr><td>10065781</td><td>Neck soft tissue necrosis</td></tr><tr><td>10031264</td><td>Osteonecrosis</td></tr><tr><td>10064658</td><td>Osteonecrosis of jaw</td></tr><tr><td>10031282</td><td>Osteoporosis</td></tr><tr><td>10033425</td><td>Pain in extremity</td></tr><tr><td>10065793</td><td>Pelvic soft tissue necrosis</td></tr><tr><td>10039020</td><td>Rhabdomyolysis</td></tr><tr><td>10039226</td><td>Rotator cuff injury</td></tr><tr><td>10039722</td><td>Scoliosis</td></tr><tr><td>10065777</td><td>Soft tissue necrosis lower limb</td></tr><tr><td>10065778</td><td>Soft tissue necrosis upper limb</td></tr><tr><td>10065798</td><td>Superficial soft tissue fibrosis</td></tr><tr><td>10044684</td><td>Trismus</td></tr><tr><td>10065738</td><td>Unequal limb length</td></tr><tr><td>10028395</td><td>Musculoskeletal and connective tissue disorder - Other, specify</td></tr></table> <div>Field Annotation: [aeterm]</div>	10065775	Abdominal soft tissue necrosis	10003239	Arthralgia	10003246	Arthritis	10066480	Avascular necrosis	10003988	Back pain	10006002	Bone pain	10048677	Buttock pain	10048831	Chest wall necrosis	10008496	Chest wall pain	10015688	Exostosis	10065799	Fibrosis deep connective tissue	10016750	Flank pain	10062572	Generalized muscle weakness	10018761	Growth suppression	10065779	Head soft tissue necrosis	10023215	Joint effusion	10048706	Joint range of motion decreased	10065796	Joint range of motion decreased cervical spine	10065800	Joint range of motion decreased lumbar spine	10023509	Kyphosis	10024842	Lordosis	10028294	Muscle cramp	10065776	Muscle weakness lower limb	10065795	Muscle weakness trunk	10065895	Muscle weakness upper limb	10065783	Musculoskeletal deformity	10028411	Myalgia	10028653	Myositis	10028836	Neck pain	10065781	Neck soft tissue necrosis	10031264	Osteonecrosis	10064658	Osteonecrosis of jaw	10031282	Osteoporosis	10033425	Pain in extremity	10065793	Pelvic soft tissue necrosis	10039020	Rhabdomyolysis	10039226	Rotator cuff injury	10039722	Scoliosis	10065777	Soft tissue necrosis lower limb	10065778	Soft tissue necrosis upper limb	10065798	Superficial soft tissue fibrosis	10044684	Trismus	10065738	Unequal limb length	10028395	Musculoskeletal and connective tissue disorder - Other, specify
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818	[aeterm16_v5] Show the field ONLY if: [aesoc_v5] = '16'	Adverse Event (CTCAE v5.0) Neoplasms benign, malignant and unspecified (incl cysts and polyps) <i>Please select only one response.</i>	dropdown (autocomplete), Required	
			10048293	Leukemia secondary to oncology chemotherapy
			10028533	Myelodysplastic syndrome
			10040907	Skin papilloma
			10049737	Treatment related secondary malignancy
			10055351	Tumor hemorrhage
			10045158	Tumor pain
			10029104	Neoplasms benign, malignant and unspecified (incl cysts and polyps) - Other, specify
			Field Annotation: [aeterm]	

819	[aeterm17_v5] Show the field ONLY if: [aesoc_v5] = '17'	Adverse Event (CTCAE v5.0) Nervous system disorders <i>Please select only one response.</i>	dropdown (autocomplete), Required
			10053662 Abducens nerve disorder
			10060929 Accessory nerve disorder
			10000521 Acoustic nerve disorder NOS
			10001540 Akathisia
			10001949 Amnesia
			10002653 Anosmia
			10002953 Aphonia
			10003074 Arachnoiditis
			10003591 Ataxia
			10065417 Brachial plexopathy
			10065784 Central nervous system necrosis
			10008164 Cerebrospinal fluid leakage
			10009845 Cognitive disturbance
			10010250 Concentration impairment
			10012373 Depressed level of consciousness
			10013573 Dizziness
			10013887 Dysarthria
			10062872 Dysesthesia
			10013911 Dysgeusia
			10013951 Dysphasia
			10014217 Edema cerebral
			10014625 Encephalopathy
			10015832 Extrapyrarnidal disorder
			10051272 Facial muscle weakness
			10061457 Facial nerve disorder
			10061185 Glossopharyngeal nerve disorder
			10018767 Guillain-Barre syndrome
			10019211 Headache
			10020508 Hydrocephalus
			10020765 Hypersomnia
			10061212 Hypoglossal nerve disorder
			10022763 Intracranial hemorrhage
			10023030 Ischemia cerebrovascular
			10024264 Lethargy
			10024382 Leukoencephalopathy
			10027175 Memory impairment
			10027198 Meningismus
			10028041 Movements involuntary
			10065780 Muscle weakness left-sided
			10065794 Muscle weakness right-sided
			10028417 Myasthenia gravis
			10029223 Neuralgia
			10029864 Nystagmus
			10053661 Oculomotor nerve disorder
			10056388 Olfactory nerve disorder
			10033987 Paresthesia
			10034580 Peripheral motor neuropathy
			10034620 Peripheral sensory neuropathy
			10056238 Phantom pain
			10036653 Presyncope
			10063636 Pyramidal tract syndrome
			10061928 Radiculitis
			10038130 Recurrent laryngeal nerve palsy

				<table><tr><td>10063761</td><td>Reversible posterior leukoencephalopathy syndrome</td></tr><tr><td>10039906</td><td>Seizure</td></tr><tr><td>10041349</td><td>Somnolence</td></tr><tr><td>10041416</td><td>Spasticity</td></tr><tr><td>10041549</td><td>Spinal cord compression</td></tr><tr><td>10042244</td><td>Stroke</td></tr><tr><td>10042772</td><td>Syncope</td></tr><tr><td>10043245</td><td>Tendon reflex decreased</td></tr><tr><td>10044391</td><td>Transient ischemic attacks</td></tr><tr><td>10044565</td><td>Tremor</td></tr><tr><td>10060890</td><td>Trigeminal nerve disorder</td></tr><tr><td>10074765</td><td>Trochlear nerve disorder</td></tr><tr><td>10061403</td><td>Vagus nerve disorder</td></tr><tr><td>10047166</td><td>Vasovagal reaction</td></tr><tr><td>10029205</td><td>Nervous system disorders - Other, specify</td></tr></table>	10063761	Reversible posterior leukoencephalopathy syndrome	10039906	Seizure	10041349	Somnolence	10041416	Spasticity	10041549	Spinal cord compression	10042244	Stroke	10042772	Syncope	10043245	Tendon reflex decreased	10044391	Transient ischemic attacks	10044565	Tremor	10060890	Trigeminal nerve disorder	10074765	Trochlear nerve disorder	10061403	Vagus nerve disorder	10047166	Vasovagal reaction	10029205	Nervous system disorders - Other, specify												
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820	[aeterm18_v5]	Adverse Event (CTCAE v5.0) Pregnancy, puerperium and perinatal conditions <i>Please select only one response.</i>	dropdown (autocomplete), Required	<table><tr><td>10054746</td><td>Fetal growth retardation</td></tr><tr><td>10072314</td><td>Pregnancy loss</td></tr><tr><td>10036595</td><td>Premature delivery</td></tr><tr><td>10036585</td><td>Pregnancy, puerperium and perinatal conditions - Other, specify</td></tr></table>	10054746	Fetal growth retardation	10072314	Pregnancy loss	10036595	Premature delivery	10036585	Pregnancy, puerperium and perinatal conditions - Other, specify																																		
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821	[aeterm19_v5]	Adverse Event (CTCAE v5.0) Psychiatric disorders <i>Please select only one response.</i>	dropdown (autocomplete), Required	<table><tr><td>10001497</td><td>Agitation</td></tr><tr><td>10002652</td><td>Anorgasmia</td></tr><tr><td>10002855</td><td>Anxiety</td></tr><tr><td>10010300</td><td>Confusion</td></tr><tr><td>10057066</td><td>Delayed orgasm</td></tr><tr><td>10012218</td><td>Delirium</td></tr><tr><td>10012260</td><td>Delusions</td></tr><tr><td>10012378</td><td>Depression</td></tr><tr><td>10015533</td><td>Euphoria</td></tr><tr><td>10019077</td><td>Hallucinations</td></tr><tr><td>10022437</td><td>Insomnia</td></tr><tr><td>10022998</td><td>Irritability</td></tr><tr><td>10024419</td><td>Libido decreased</td></tr><tr><td>10024421</td><td>Libido increased</td></tr><tr><td>10026749</td><td>Mania</td></tr><tr><td>10034719</td><td>Personality change</td></tr><tr><td>10037234</td><td>Psychosis</td></tr><tr><td>10038743</td><td>Restlessness</td></tr><tr><td>10042458</td><td>Suicidal ideation</td></tr><tr><td>10042464</td><td>Suicide attempt</td></tr><tr><td>10037175</td><td>Psychiatric disorders - Other, specify</td></tr></table>	10001497	Agitation	10002652	Anorgasmia	10002855	Anxiety	10010300	Confusion	10057066	Delayed orgasm	10012218	Delirium	10012260	Delusions	10012378	Depression	10015533	Euphoria	10019077	Hallucinations	10022437	Insomnia	10022998	Irritability	10024419	Libido decreased	10024421	Libido increased	10026749	Mania	10034719	Personality change	10037234	Psychosis	10038743	Restlessness	10042458	Suicidal ideation	10042464	Suicide attempt	10037175	Psychiatric disorders - Other, specify
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822	[aeterm20_v5]	Show the field ONLY if: [aesoc_v5] = '20'	Adverse Event (CTCAE v5.0) Renal and urinary disorders <i>Please select only one response.</i>	dropdown (autocomplete), Required	
				10069339	Acute kidney injury
				10063575	Bladder perforation
				10048994	Bladder spasm
				10064848	Chronic kidney disease
				10063057	Cystitis noninfective
				10013990	Dysuria
				10068405	Glucosuria
				10019450	Hematuria
				10019489	Hemoglobinuria
				10029164	Nephrotic syndrome
				10037032	Proteinuria
				10038385	Renal calculi
				10038419	Renal colic
				10038463	Renal hemorrhage
				10065368	Urinary fistula
				10046539	Urinary frequency
				10046543	Urinary incontinence
				10046555	Urinary retention
				10061574	Urinary tract obstruction
				10062225	Urinary tract pain
				10046593	Urinary urgency
				10046628	Urine discoloration
				10038359	Renal and urinary disorders - Other, specify
				Field Annotation: [aeterm]	

823	[aeterm21_v5] Show the field ONLY if: [aesoc_v5] = '21'	Adverse Event (CTCAE v5.0) Reproductive system and breast disorders <i>Please select only one response.</i>	dropdown (autocomplete), Required <table><tr><td>10001927</td><td>Amenorrhea</td></tr><tr><td>10003883</td><td>Azoospermia</td></tr><tr><td>10006179</td><td>Breast atrophy</td></tr><tr><td>10006298</td><td>Breast pain</td></tr><tr><td>10013934</td><td>Dysmenorrhea</td></tr><tr><td>10013941</td><td>Dyspareunia</td></tr><tr><td>10014326</td><td>Ejaculation disorder</td></tr><tr><td>10061461</td><td>Erectile dysfunction</td></tr><tr><td>10065789</td><td>Fallopian tube obstruction</td></tr><tr><td>10054382</td><td>Feminization acquired</td></tr><tr><td>10018146</td><td>Genital edema</td></tr><tr><td>10018801</td><td>Gynecomastia</td></tr><tr><td>10060602</td><td>Hematosalpinx</td></tr><tr><td>10022992</td><td>Irregular menstruation</td></tr><tr><td>10061261</td><td>Lactation disorder</td></tr><tr><td>10027313</td><td>Menorrhagia</td></tr><tr><td>10065823</td><td>Nipple deformity</td></tr><tr><td>10030300</td><td>Oligospermia</td></tr><tr><td>10065763</td><td>Ovarian hemorrhage</td></tr><tr><td>10033279</td><td>Ovarian rupture</td></tr><tr><td>10033314</td><td>Ovulation pain</td></tr><tr><td>10064026</td><td>Pelvic floor muscle weakness</td></tr><tr><td>10034263</td><td>Pelvic pain</td></tr><tr><td>10034310</td><td>Penile pain</td></tr><tr><td>10061339</td><td>Perineal pain</td></tr><tr><td>10036601</td><td>Premature menopause</td></tr><tr><td>10055325</td><td>Prostatic hemorrhage</td></tr><tr><td>10055026</td><td>Prostatic obstruction</td></tr><tr><td>10036968</td><td>Prostatic pain</td></tr><tr><td>10039757</td><td>Scrotal pain</td></tr><tr><td>10065762</td><td>Spermatic cord hemorrhage</td></tr><tr><td>10065805</td><td>Spermatic cord obstruction</td></tr><tr><td>10043306</td><td>Testicular disorder</td></tr><tr><td>10055347</td><td>Testicular hemorrhage</td></tr><tr><td>10043345</td><td>Testicular pain</td></tr><tr><td>10065811</td><td>Uterine fistula</td></tr><tr><td>10046789</td><td>Uterine hemorrhage</td></tr><tr><td>10065928</td><td>Uterine obstruction</td></tr><tr><td>10046809</td><td>Uterine pain</td></tr><tr><td>10046901</td><td>Vaginal discharge</td></tr><tr><td>10046904</td><td>Vaginal dryness</td></tr><tr><td>10065813</td><td>Vaginal fistula</td></tr><tr><td>10046912</td><td>Vaginal hemorrhage</td></tr><tr><td>10046916</td><td>Vaginal inflammation</td></tr><tr><td>10065817</td><td>Vaginal obstruction</td></tr><tr><td>10046937</td><td>Vaginal pain</td></tr><tr><td>10065818</td><td>Vaginal perforation</td></tr><tr><td>10053496</td><td>Vaginal stricture</td></tr><tr><td>10038604</td><td>Reproductive system and breast disorders - Other, specify</td></tr></table>	10001927	Amenorrhea	10003883	Azoospermia	10006179	Breast atrophy	10006298	Breast pain	10013934	Dysmenorrhea	10013941	Dyspareunia	10014326	Ejaculation disorder	10061461	Erectile dysfunction	10065789	Fallopian tube obstruction	10054382	Feminization acquired	10018146	Genital edema	10018801	Gynecomastia	10060602	Hematosalpinx	10022992	Irregular menstruation	10061261	Lactation disorder	10027313	Menorrhagia	10065823	Nipple deformity	10030300	Oligospermia	10065763	Ovarian hemorrhage	10033279	Ovarian rupture	10033314	Ovulation pain	10064026	Pelvic floor muscle weakness	10034263	Pelvic pain	10034310	Penile pain	10061339	Perineal pain	10036601	Premature menopause	10055325	Prostatic hemorrhage	10055026	Prostatic obstruction	10036968	Prostatic pain	10039757	Scrotal pain	10065762	Spermatic cord hemorrhage	10065805	Spermatic cord obstruction	10043306	Testicular disorder	10055347	Testicular hemorrhage	10043345	Testicular pain	10065811	Uterine fistula	10046789	Uterine hemorrhage	10065928	Uterine obstruction	10046809	Uterine pain	10046901	Vaginal discharge	10046904	Vaginal dryness	10065813	Vaginal fistula	10046912	Vaginal hemorrhage	10046916	Vaginal inflammation	10065817	Vaginal obstruction	10046937	Vaginal pain	10065818	Vaginal perforation	10053496	Vaginal stricture	10038604	Reproductive system and breast disorders - Other, specify
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Field Annotation: [aeterm]																																																																																																					

824	[aeterm22_v5]	Adverse Event (CTCAE v5.0) Respiratory, thoracic and mediastinal disorders <i>Please select only one response.</i>	dropdown (autocomplete), Required
	Show the field ONLY if: [aesoc_v5] = '22'		10001409 Adult respiratory distress syndrome
			10001723 Allergic rhinitis
			10002972 Apnea
			10003504 Aspiration
			10003598 Atelectasis
			10006437 Bronchial fistula
			10006440 Bronchial obstruction
			10063524 Bronchial stricture
			10053481 Bronchopleural fistula
			10065746 Bronchopulmonary hemorrhage
			10006482 Bronchospasm
			10051228 Chylothorax
			10011224 Cough
			10013963 Dyspnea
			10015090 Epistaxis
			10020039 Hiccups
			10020201 Hoarseness
			10021143 Hypoxia
			10023838 Laryngeal edema
			10065786 Laryngeal fistula
			10065759 Laryngeal hemorrhage
			10065735 Laryngeal inflammation
			10065880 Laryngeal mucositis
			10059639 Laryngeal obstruction
			10023862 Laryngeal stenosis
			10062667 Laryngopharyngeal dysesthesia
			10023891 Laryngospasm
			10056356 Mediastinal hemorrhage
			10028735 Nasal congestion
			10068319 Oropharyngeal pain
			10034825 Pharyngeal fistula
			10055315 Pharyngeal hemorrhage
			10065881 Pharyngeal mucositis
			10065706 Pharyngeal necrosis
			10050028 Pharyngeal stenosis
			10034844 Pharyngolaryngeal pain
			10035598 Pleural effusion
			10055319 Pleural hemorrhage
			10035623 Pleuritic pain
			10035742 Pneumonitis
			10035759 Pneumothorax
			10036402 Postnasal drip
			10036790 Productive cough
			10037375 Pulmonary edema
			10037383 Pulmonary fibrosis
			10065873 Pulmonary fistula
			10037400 Pulmonary hypertension
			10038695 Respiratory failure
			10038921 Retinoic acid syndrome
			10039100 Rhinorrhea
			10062244 Sinus disorder
			10040747 Sinus pain
			10040975 Sleep apnea

				<table><tr><td>10041232</td><td>Sneezing</td></tr><tr><td>10041367</td><td>Sore throat</td></tr><tr><td>10042241</td><td>Stridor</td></tr><tr><td>10065787</td><td>Tracheal fistula</td></tr><tr><td>10065900</td><td>Tracheal mucositis</td></tr><tr><td>10050816</td><td>Tracheal stenosis</td></tr><tr><td>10047681</td><td>Voice alteration</td></tr><tr><td>10047924</td><td>Wheezing</td></tr><tr><td>10038738</td><td>Respiratory, thoracic and mediastinal disorders - Other, specify</td></tr></table>	10041232	Sneezing	10041367	Sore throat	10042241	Stridor	10065787	Tracheal fistula	10065900	Tracheal mucositis	10050816	Tracheal stenosis	10047681	Voice alteration	10047924	Wheezing	10038738	Respiratory, thoracic and mediastinal disorders - Other, specify																																																														
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				Field Annotation: [aeterm]																																																																																
825	[aeterm23_v5] Show the field ONLY if: [aesoc_v5] = '23'	Adverse Event (CTCAE v5.0) Skin and subcutaneous tissue disorders <i>Please select only one response.</i>	<table><tr><td colspan="2">dropdown (autocomplete), Required</td></tr><tr><td>10001760</td><td>Alopecia</td></tr><tr><td>10005901</td><td>Body odor</td></tr><tr><td>10006556</td><td>Bullous dermatitis</td></tr><tr><td>10013786</td><td>Dry skin</td></tr><tr><td>10014184</td><td>Eczema</td></tr><tr><td>10015218</td><td>Erythema multiforme</td></tr><tr><td>10015277</td><td>Erythroderma</td></tr><tr><td>10016241</td><td>Fat atrophy</td></tr><tr><td>10055525</td><td>Hair color changes</td></tr><tr><td>10019049</td><td>Hair texture abnormal</td></tr><tr><td>10020112</td><td>Hirsutism</td></tr><tr><td>10020642</td><td>Hyperhidrosis</td></tr><tr><td>10020649</td><td>Hyperkeratosis</td></tr><tr><td>10020864</td><td>Hypertrichosis</td></tr><tr><td>10021013</td><td>Hypohidrosis</td></tr><tr><td>10062315</td><td>Lipohypertrophy</td></tr><tr><td>10028689</td><td>Nail changes</td></tr><tr><td>10028691</td><td>Nail discoloration</td></tr><tr><td>10049281</td><td>Nail loss</td></tr><tr><td>10062283</td><td>Nail ridging</td></tr><tr><td>10033474</td><td>Pain of skin</td></tr><tr><td>10054524</td><td>Palmar-plantar erythrodysesthesia syndrome</td></tr><tr><td>10034966</td><td>Photosensitivity</td></tr><tr><td>10037087</td><td>Pruritus</td></tr><tr><td>10037549</td><td>Purpura</td></tr><tr><td>10037847</td><td>Rash acneiform</td></tr><tr><td>10037868</td><td>Rash maculo-papular</td></tr><tr><td>10049120</td><td>Scalp pain</td></tr><tr><td>10040799</td><td>Skin atrophy</td></tr><tr><td>10040865</td><td>Skin hyperpigmentation</td></tr><tr><td>10040868</td><td>Skin hypopigmentation</td></tr><tr><td>10051837</td><td>Skin induration</td></tr><tr><td>10040947</td><td>Skin ulceration</td></tr><tr><td>10042033</td><td>Stevens-Johnson syndrome</td></tr><tr><td>10042344</td><td>Subcutaneous emphysema</td></tr><tr><td>10043189</td><td>Telangiectasia</td></tr><tr><td>10044223</td><td>Toxic epidermal necrolysis</td></tr><tr><td>10046735</td><td>Urticaria</td></tr><tr><td>10040785</td><td>Skin and subcutaneous tissue disorders - Other, specify</td></tr></table>	dropdown (autocomplete), Required		10001760	Alopecia	10005901	Body odor	10006556	Bullous dermatitis	10013786	Dry skin	10014184	Eczema	10015218	Erythema multiforme	10015277	Erythroderma	10016241	Fat atrophy	10055525	Hair color changes	10019049	Hair texture abnormal	10020112	Hirsutism	10020642	Hyperhidrosis	10020649	Hyperkeratosis	10020864	Hypertrichosis	10021013	Hypohidrosis	10062315	Lipohypertrophy	10028689	Nail changes	10028691	Nail discoloration	10049281	Nail loss	10062283	Nail ridging	10033474	Pain of skin	10054524	Palmar-plantar erythrodysesthesia syndrome	10034966	Photosensitivity	10037087	Pruritus	10037549	Purpura	10037847	Rash acneiform	10037868	Rash maculo-papular	10049120	Scalp pain	10040799	Skin atrophy	10040865	Skin hyperpigmentation	10040868	Skin hypopigmentation	10051837	Skin induration	10040947	Skin ulceration	10042033	Stevens-Johnson syndrome	10042344	Subcutaneous emphysema	10043189	Telangiectasia	10044223	Toxic epidermal necrolysis	10046735	Urticaria	10040785	Skin and subcutaneous tissue disorders - Other, specify	Field Annotation: [aeterm]
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825 [aeterm23_v5]

Show the field ONLY if:
[aesoc_v5] = '23'

	826	[aeterm24_v5] Show the field ONLY if: [aesoc_v5] = '24'	Adverse Event (CTCAE v5.0) Social circumstances <i>Please select only one response.</i>	dropdown (autocomplete), Required 10041244 Social circumstances - Other, specify Field Annotation: [aeterm]
	827	[aeterm25_v5] Show the field ONLY if: [aesoc_v5] = '25'	Adverse Event (CTCAE v5.0) Surgical and medical procedures <i>Please select only one response.</i>	dropdown (autocomplete), Required 10042613 Surgical and medical procedures - Other, specify Field Annotation: [aeterm]
	828	[aeterm26_v5] Show the field ONLY if: [aesoc_v5] = '26'	Adverse Event (CTCAE v5.0) Vascular disorders <i>Please select only one response.</i>	dropdown (autocomplete), Required 10073529 Arterial thromboembolism 10007196 Capillary leak syndrome 10016825 Flushing 10019428 Hematoma 10020407 Hot flashes 10020772 Hypertension 10021097 Hypotension 10065773 Lymph leakage 10025233 Lymphedema 10048642 Lymphocele 10034578 Peripheral ischemia 10034879 Phlebitis 10042554 Superficial thrombophlebitis 10042569 Superior vena cava syndrome 10043565 Thromboembolic event 10047115 Vasculitis 10047065 Vascular disorders - Other, specify Field Annotation: [aeterm]

829	[aeterm_v5]	Adverse Event (CTCAE v5.0)	dropdown
			10002272 Anemia
			10005329 Blood and lymphatic system disorders - Other, specify
			10048580 Bone marrow hypocellular
			10013442 Disseminated intravascular coagulation
			10014950 Eosinophilia
			10016288 Febrile neutropenia
			10019491 Hemolysis
			10019515 Hemolytic uremic syndrome
			10024378 Leukocytosis
			10025182 Lymph node pain
			10027506 Methemoglobinemia
			10043648 Thrombotic thrombocytopenic purpura
			10061589 Aortic valve disease
			10003586 Asystole
			10003658 Atrial fibrillation
			10003662 Atrial flutter
			10003673 Atrioventricular block complete
			10003674 Atrioventricular block first degree
			10007515 Cardiac arrest
			10007541 Cardiac disorders - Other, specify
			10008481 Chest pain - cardiac
			10010276 Conduction disorder
			10011703 Cyanosis
			10019279 Heart failure
			10069501 Left ventricular systolic dysfunction
			10061532 Mitral valve disease
			10027786 Mobitz (type) II atrioventricular block
			10027787 Mobitz type I
			10028596 Myocardial infarction
			10028606 Myocarditis
			10033557 Palpitations
			10034040 Paroxysmal atrial tachycardia
			10034474 Pericardial effusion
			10053565 Pericardial tamponade
			10034484 Pericarditis
			10061541 Pulmonary valve disease
			10038748 Restrictive cardiomyopathy
			10058597 Right ventricular dysfunction
			10040639 Sick sinus syndrome
			10040741 Sinus bradycardia
			10040752 Sinus tachycardia
			10042604 Supraventricular tachycardia
			10061389 Tricuspid valve disease
			10047281 Ventricular arrhythmia
			10047290 Ventricular fibrillation
			10047302 Ventricular tachycardia
			10010331 Congenital, familial and genetic disorders - Other, specify
			10013993 Ear and labyrinth disorders - Other, specify
			10014020 Ear pain
			10065785 External ear pain
			10019245 Hearing impaired
			10065838 Middle ear inflammation

10043882	Tinnitus
10047340	Vertigo
10047386	Vestibular disorder
10001367	Adrenal insufficiency
10011655	Cushingoid
10012205	Delayed puberty
10014698	Endocrine disorders - Other, specify
10018746	Growth accelerated
10020705	Hyperparathyroidism
10020850	Hyperthyroidism
10021041	Hypoparathyroidism
10062767	Hypophysitis
10021067	Hypopituitarism
10021114	Hypothyroidism
10058084	Precocious puberty
10067734	Testosterone deficiency
10047488	Virilization
10005886	Blurred vision
10007739	Cataract
10048492	Corneal ulcer
10013774	Dry eye
10015829	Extraocular muscle paresis
10015919	Eye disorders - Other, specify
10015958	Eye pain
10061145	Eyelid function disorder
10016757	Flashing lights
10016778	Floaters
10018304	Glaucoma
10023332	Keratitis
10029404	Night blindness
10061322	Optic nerve disorder
10033703	Papilledema
10054541	Periorbital edema
10034960	Photophobia
10038848	Retinal detachment
10038897	Retinal tear
10038901	Retinal vascular disorder
10038923	Retinopathy
10061510	Scleral disorder
10046851	Uveitis
10047516	Vision decreased
10047656	Vitreous hemorrhage
10047848	Watering eyes
10000060	Abdominal distension
10000081	Abdominal pain
10002153	Anal fissure
10002156	Anal fistula
10055226	Anal hemorrhage
10065721	Anal mucositis
10065722	Anal necrosis
10002167	Anal pain
10002176	Anal stenosis
10002180	Anal ulcer
10003445	Ascites

10004222	Belching
10005265	Bloating
10065747	Cecal hemorrhage
10008417	Cheilitis
10009167	Chylous ascites
10009887	Colitis
10009995	Colonic fistula
10009998	Colonic hemorrhage
10010000	Colonic obstruction
10010001	Colonic perforation
10010004	Colonic stenosis
10010006	Colonic ulcer
10010774	Constipation
10012318	Dental caries
10012727	Diarrhea
10013781	Dry mouth
10013828	Duodenal fistula
10055242	Duodenal hemorrhage
10013830	Duodenal obstruction
10013832	Duodenal perforation
10050094	Duodenal stenosis
10013836	Duodenal ulcer
10013946	Dyspepsia
10013950	Dysphagia
10014893	Enterocolitis
10062570	Enterovesical fistula
10065851	Esophageal fistula
10015384	Esophageal hemorrhage
10065727	Esophageal necrosis
10015387	Esophageal obstruction
10015388	Esophageal pain
10055472	Esophageal perforation
10015448	Esophageal stenosis
10015451	Esophageal ulcer
10015453	Esophageal varices hemorrhage
10015461	Esophagitis
10016296	Fecal incontinence
10016766	Flatulence
10065713	Gastric fistula
10017789	Gastric hemorrhage
10051886	Gastric necrosis
10017815	Gastric perforation
10061970	Gastric stenosis
10017822	Gastric ulcer
10017853	Gastritis
10066874	Gastroesophageal reflux disease
10017947	Gastrointestinal disorders - Other, specify
10017877	Gastrointestinal fistula
10017999	Gastrointestinal pain
10018043	Gastroparesis
10018286	Gingival pain
10060640	Hemorrhoidal hemorrhage
10019611	Hemorrhoids
10065728	Ileal fistula

10055287	Ileal hemorrhage
10065730	Ileal obstruction
10021305	Ileal perforation
10021307	Ileal stenosis
10021309	Ileal ulcer
10021328	Ileus
10055291	Intra-abdominal hemorrhage
10065719	Jejunal fistula
10055300	Jejunal hemorrhage
10065732	Jejunal obstruction
10023174	Jejunal perforation
10023176	Jejunal stenosis
10023177	Jejunal ulcer
10024561	Lip pain
10051746	Lower gastrointestinal hemorrhage
10025476	Malabsorption
10028130	Mucositis oral
10028813	Nausea
10029957	Obstruction gastric
10065720	Oral cavity fistula
10054520	Oral dysesthesia
10030980	Oral hemorrhage
10031009	Oral pain
10065703	Pancreatic duct stenosis
10049192	Pancreatic fistula
10033626	Pancreatic hemorrhage
10058096	Pancreatic necrosis
10033645	Pancreatitis
10034536	Periodontal disease
10065704	Peritoneal necrosis
10036774	Proctitis
10064993	Rectal fissure
10038062	Rectal fistula
10038064	Rectal hemorrhage
10063190	Rectal mucositis
10065709	Rectal necrosis
10065707	Rectal obstruction
10038072	Rectal pain
10038073	Rectal perforation
10038079	Rectal stenosis
10038080	Rectal ulcer
10038981	Retroperitoneal hemorrhage
10056681	Salivary duct inflammation
10039411	Salivary gland fistula
10065710	Small intestinal mucositis
10041101	Small intestinal obstruction
10041103	Small intestinal perforation
10062263	Small intestinal stenosis
10041133	Small intestine ulcer
10042112	Stomach pain
10044030	Tooth development disorder
10044031	Tooth discoloration
10044055	Toothache
10045271	Typhlitis

10055356	Upper gastrointestinal hemorrhage
10054692	Visceral arterial ischemia
10047700	Vomiting
10008531	Chills
10011912	Death neonatal
10011914	Death NOS
10061818	Disease progression
10014222	Edema face
10050068	Edema limbs
10058720	Edema trunk
10016059	Facial pain
10016256	Fatigue
10016558	Fever
10016791	Flu like symptoms
10017577	Gait disturbance
10018065	General disorders and administration site conditions - Other, specify
10018112	Generalized edema
10021113	Hypothermia
10064774	Infusion site extravasation
10022095	Injection site reaction
10062466	Localized edema
10025482	Malaise
10028154	Multi-organ failure
10054482	Neck edema
10062501	Non-cardiac chest pain
10033371	Pain
10042435	Sudden death NOS
10069480	Vaccination site lymphadenopathy
10051341	Bile duct stenosis
10004665	Biliary fistula
10006537	Budd-Chiari syndrome
10008612	Cholecystitis
10017631	Gallbladder fistula
10059446	Gallbladder necrosis
10017636	Gallbladder obstruction
10017638	Gallbladder pain
10017639	Gallbladder perforation
10019663	Hepatic failure
10019678	Hepatic hemorrhage
10019692	Hepatic necrosis
10019705	Hepatic pain
10019805	Hepatobiliary disorders - Other, specify
10034405	Perforation bile duct
10036200	Portal hypertension
10036206	Portal vein thrombosis
10063675	Sinusoidal obstruction syndrome
10001718	Allergic reaction
10002218	Anaphylaxis
10061664	Autoimmune disorder
10052015	Cytokine release syndrome
10021428	Immune system disorders - Other, specify
10040400	Serum sickness
10056519	Abdominal infection

10061640	Anorectal infection
10003011	Appendicitis
10003012	Appendicitis perforated
10065744	Arteritis infective
10003999	Bacteremia
10061695	Biliary tract infection
10005047	Bladder infection
10061017	Bone infection
10006259	Breast infection
10055078	Bronchial infection
10007810	Catheter related infection
10065761	Cecal infection
10008330	Cervicitis infection
10010741	Conjunctivitis
10010742	Conjunctivitis infective
10061788	Corneal infection
10065765	Cranial nerve infection
10058666	Cytomegalovirus infection reactivation
10064687	Device related infection
10065752	Duodenal infection
10014594	Encephalitis infection
10014621	Encephalomyelitis infection
10014678	Endocarditis infective
10014801	Endophthalmitis
10058838	Enterocolitis infectious
10015109	Epstein-Barr virus infection reactivation
10058804	Esophageal infection
10015929	Eye infection
10016936	Folliculitis
10017544	Fungemia
10062632	Gallbladder infection
10018784	Gum infection
10056522	Hepatic infection
10058827	Hepatitis B reactivation
10019799	Hepatitis viral
10080137	Herpes simplex reactivation
10021881	Infections and infestations - Other, specify
10021918	Infective myositis
10023216	Joint infection
10023424	Kidney infection
10023874	Laryngitis
10065755	Lip infection
10061229	Lung infection
10050823	Lymph gland infection
10057483	Mediastinal infection
10027199	Meningitis
10065764	Mucosal infection
10028524	Myelitis
10061304	Nail infection
10033072	Otitis externa
10033078	Otitis media
10055005	Ovarian infection
10051741	Pancreas infection
10069138	Papulopustular rash

10034016	Paronychia
10058674	Pelvic infection
10061912	Penile infection
10051472	Periorbital infection
10065766	Peripheral nerve infection
10057262	Peritoneal infection
10034835	Pharyngitis
10056627	Phlebitis infective
10061351	Pleural infection
10050662	Prostate infection
10037888	Rash pustular
10059827	Rhinitis infective
10039413	Salivary gland infection
10062156	Scrotal infection
10040047	Sepsis
10040555	Shingles
10040753	Sinusitis
10040872	Skin infection
10065771	Small intestine infection
10062255	Soft tissue infection
10062112	Splenic infection
10064505	Stoma site infection
10043649	Thrush
10048762	Tooth infection
10044302	Tracheitis
10046300	Upper respiratory infection
10052298	Urethral infection
10046571	Urinary tract infection
10062233	Uterine infection
10046914	Vaginal infection
10054688	Viremia
10065772	Vulval infection
10048038	Wound infection
10002544	Ankle fracture
10002899	Aortic injury
10003162	Arterial injury
10050458	Biliary anastomotic leak
10065802	Bladder anastomotic leak
10006504	Bruising
10006634	Burn
10061103	Dermatitis radiation
10065961	Esophageal anastomotic leak
10016173	Fall
10065788	Fallopian tube anastomotic leak
10065790	Fallopian tube perforation
10017076	Fracture
10065893	Gastric anastomotic leak
10065879	Gastrointestinal anastomotic leak
10065712	Gastrointestinal stoma necrosis
10020100	Hip fracture
10051792	Infusion related reaction
10022161	Injury to carotid artery
10022213	Injury to inferior vena cava
10065849	Injury to jugular vein

10022356	Injury to superior vena cava
10022117	Injury, poisoning and procedural complications - Other, specify
10059095	Intestinal stoma leak
10059094	Intestinal stoma obstruction
10049468	Intestinal stoma site bleeding
10065826	Intraoperative arterial injury
10065831	Intraoperative breast injury
10065843	Intraoperative cardiac injury
10065844	Intraoperative ear injury
10065834	Intraoperative endocrine injury
10065825	Intraoperative gastrointestinal injury
10065842	Intraoperative head and neck injury
10055298	Intraoperative hemorrhage
10065827	Intraoperative hepatobiliary injury
10065829	Intraoperative musculoskeletal injury
10065830	Intraoperative neurological injury
10065841	Intraoperative ocular injury
10065845	Intraoperative renal injury
10065840	Intraoperative reproductive tract injury
10065832	Intraoperative respiratory injury
10065847	Intraoperative splenic injury
10065828	Intraoperative urinary injury
10065848	Intraoperative venous injury
10065803	Kidney anastomotic leak
10065891	Large intestinal anastomotic leak
10050457	Pancreatic anastomotic leak
10065705	Pharyngeal anastomotic leak
10055322	Postoperative hemorrhage
10056745	Postoperative thoracic procedure complication
10065745	Prolapse of intestinal stoma
10065822	Prolapse of urostomy
10037767	Radiation recall reaction (dermatologic)
10065894	Rectal anastomotic leak
10040102	Seroma
10065892	Small intestinal anastomotic leak
10065897	Spermatic cord anastomotic leak
10041569	Spinal fracture
10065898	Stenosis of gastrointestinal stoma
10042127	Stomal ulcer
10062548	Tracheal hemorrhage
10044291	Tracheal obstruction
10065749	Tracheostomy site bleeding
10065814	Ureteric anastomotic leak
10065815	Urethral anastomotic leak
10065882	Urostomy leak
10065883	Urostomy obstruction
10065748	Urostomy site bleeding
10065885	Urostomy stenosis
10065886	Uterine anastomotic leak
10046810	Uterine perforation
10046861	Vaccination complication
10065887	Vaginal anastomotic leak
10065888	Vas deferens anastomotic leak

10062169	Vascular access complication
10047228	Venous injury
10053692	Wound complication
10048031	Wound dehiscence
10048049	Wrist fracture
10000636	Activated partial thromboplastin time prolonged
10001551	Alanine aminotransferase increased
10001675	Alkaline phosphatase increased
10003481	Aspartate aminotransferase increased
10005332	Blood antidiuretic hormone abnormal
10005359	Blood bicarbonate decreased
10005364	Blood bilirubin increased
10005452	Blood corticotrophin decreased
10005561	Blood gonadotrophin abnormal
10005630	Blood lactate dehydrogenase increased
10005778	Blood prolactin abnormal
10065906	Carbon monoxide diffusing capacity decreased
10007612	Cardiac troponin I increased
10007613	Cardiac troponin T increased
10007839	CD4 lymphocytes decreased
10008661	Cholesterol high
10011268	CPK increased
10011368	Creatinine increased
10050528	Ejection fraction decreased
10014383	Electrocardiogram QT corrected interval prolonged
10050380	Electrocardiogram T wave abnormal
10016596	Fibrinogen decreased
10016987	Forced expiratory volume decreased
10056910	GGT increased
10018748	Growth hormone abnormal
10019150	Haptoglobin decreased
10055599	Hemoglobin increased
10022402	INR increased
10022891	Investigations - Other, specify
10024574	Lipase increased
10025256	Lymphocyte count decreased
10025258	Lymphocyte count increased
10029366	Neutrophil count decreased
10062646	Pancreatic enzymes decreased
10035528	Platelet count decreased
10040139	Serum amylase increased
10043770	Thyroid stimulating hormone increased
10059895	Urine output decreased
10047580	Vital capacity abnormal
10047896	Weight gain
10047900	Weight loss
10049182	White blood cell decreased
10000486	Acidosis
10001598	Alcohol intolerance
10001680	Alkalosis
10002646	Anorexia
10012174	Dehydration
10052426	Glucose intolerance

10020587	Hypercalcemia
10020639	Hyperglycemia
10020647	Hyperkalemia
10020667	Hyperlipidemia
10020670	Hypermagnesemia
10020680	Hypernatremia
10020712	Hyperphosphatemia
10020870	Hypertriglyceridemia
10020907	Hyperuricemia
10020943	Hypoalbuminemia
10020949	Hypocalcemia
10021005	Hypoglycemia
10021018	Hypokalemia
10021028	Hypomagnesemia
10021038	Hyponatremia
10021059	Hypophosphatemia
10065973	Iron overload
10027433	Metabolism and nutrition disorders - Other, specify
10029883	Obesity
10045152	Tumor lysis syndrome
10065775	Abdominal soft tissue necrosis
10003239	Arthralgia
10003246	Arthritis
10066480	Avascular necrosis
10003988	Back pain
10006002	Bone pain
10048677	Buttock pain
10048831	Chest wall necrosis
10008496	Chest wall pain
10015688	Exostosis
10065799	Fibrosis deep connective tissue
10016750	Flank pain
10062572	Generalized muscle weakness
10018761	Growth suppression
10065779	Head soft tissue necrosis
10023215	Joint effusion
10048706	Joint range of motion decreased
10065796	Joint range of motion decreased cervical spine
10065800	Joint range of motion decreased lumbar spine
10023509	Kyphosis
10024842	Lordosis
10028294	Muscle cramp
10065776	Muscle weakness lower limb
10065795	Muscle weakness trunk
10065895	Muscle weakness upper limb
10028395	Musculoskeletal and connective tissue disorder - Other, specify
10065783	Musculoskeletal deformity
10028411	Myalgia
10028653	Myositis
10028836	Neck pain
10065781	Neck soft tissue necrosis
10031264	Osteonecrosis
10064658	Osteonecrosis of jaw

10031282	Osteoporosis
10033425	Pain in extremity
10065793	Pelvic soft tissue necrosis
10039020	Rhabdomyolysis
10039226	Rotator cuff injury
10039722	Scoliosis
10065777	Soft tissue necrosis lower limb
10065778	Soft tissue necrosis upper limb
10065798	Superficial soft tissue fibrosis
10044684	Trismus
10065738	Unequal limb length
10048293	Leukemia secondary to oncology chemotherapy
10028533	Myelodysplastic syndrome
10029104	Neoplasms benign, malignant and unspecified (incl cysts and polyps) - Other, specify
10040907	Skin papilloma
10049737	Treatment related secondary malignancy
10055351	Tumor hemorrhage
10045158	Tumor pain
10053662	Abducens nerve disorder
10060929	Accessory nerve disorder
10000521	Acoustic nerve disorder NOS
10001540	Akathisia
10001949	Amnesia
10002653	Anosmia
10002953	Aphonia
10003074	Arachnoiditis
10003591	Ataxia
10065417	Brachial plexopathy
10065784	Central nervous system necrosis
10008164	Cerebrospinal fluid leakage
10009845	Cognitive disturbance
10010250	Concentration impairment
10012373	Depressed level of consciousness
10013573	Dizziness
10013887	Dysarthria
10062872	Dysesthesia
10013911	Dysgeusia
10013951	Dysphasia
10014217	Edema cerebral
10014625	Encephalopathy
10015832	Extrapyrarnidal disorder
10051272	Facial muscle weakness
10061457	Facial nerve disorder
10061185	Glossopharyngeal nerve disorder
10018767	Guillain-Barre syndrome
10019211	Headache
10020508	Hydrocephalus
10020765	Hypersomnia
10061212	Hypoglossal nerve disorder
10022763	Intracranial hemorrhage
10023030	Ischemia cerebrovascular
10024264	Lethargy
10024382	Leukoencephalopathy

10027175	Memory impairment
10027198	Meningismus
10028041	Movements involuntary
10065780	Muscle weakness left-sided
10065794	Muscle weakness right-sided
10028417	Myasthenia gravis
10029205	Nervous system disorders - Other, specify
10029223	Neuralgia
10029864	Nystagmus
10053661	Oculomotor nerve disorder
10056388	Olfactory nerve disorder
10033987	Paresthesia
10034580	Peripheral motor neuropathy
10034620	Peripheral sensory neuropathy
10056238	Phantom pain
10036653	Presyncope
10063636	Pyramidal tract syndrome
10061928	Radiculitis
10038130	Recurrent laryngeal nerve palsy
10063761	Reversible posterior leukoencephalopathy syndrome
10039906	Seizure
10041349	Somnolence
10041416	Spasticity
10041549	Spinal cord compression
10042244	Stroke
10042772	Syncope
10043245	Tendon reflex decreased
10044391	Transient ischemic attacks
10044565	Tremor
10060890	Trigeminal nerve disorder
10074765	Trochlear nerve disorder
10061403	Vagus nerve disorder
10047166	Vasovagal reaction
10054746	Fetal growth retardation
10072314	Pregnancy loss
10036585	Pregnancy, puerperium and perinatal conditions - Other, specify
10036595	Premature delivery
10001497	Agitation
10002652	Anorgasmia
10002855	Anxiety
10010300	Confusion
10057066	Delayed orgasm
10012218	Delirium
10012260	Delusions
10012378	Depression
10015533	Euphoria
10019077	Hallucinations
10022437	Insomnia
10022998	Irritability
10024419	Libido decreased
10024421	Libido increased
10026749	Mania
10034719	Personality change

10037175	Psychiatric disorders - Other, specify
10037234	Psychosis
10038743	Restlessness
10042458	Suicidal ideation
10042464	Suicide attempt
10069339	Acute kidney injury
10063575	Bladder perforation
10048994	Bladder spasm
10064848	Chronic kidney disease
10063057	Cystitis noninfective
10013990	Dysuria
10068405	Glucosuria
10019450	Hematuria
10019489	Hemoglobinuria
10029164	Nephrotic syndrome
10037032	Proteinuria
10038359	Renal and urinary disorders - Other, specify
10038385	Renal calculi
10038419	Renal colic
10038463	Renal hemorrhage
10065368	Urinary fistula
10046539	Urinary frequency
10046543	Urinary incontinence
10046555	Urinary retention
10061574	Urinary tract obstruction
10062225	Urinary tract pain
10046593	Urinary urgency
10046628	Urine discoloration
10001927	Amenorrhea
10003883	Azoospermia
10006179	Breast atrophy
10006298	Breast pain
10013934	Dysmenorrhea
10013941	Dyspareunia
10014326	Ejaculation disorder
10061461	Erectile dysfunction
10065789	Fallopian tube obstruction
10054382	Feminization acquired
10018146	Genital edema
10018801	Gynecomastia
10060602	Hematosalpinx
10022992	Irregular menstruation
10061261	Lactation disorder
10027313	Menorrhagia
10065823	Nipple deformity
10030300	Oligospermia
10065763	Ovarian hemorrhage
10033279	Ovarian rupture
10033314	Ovulation pain
10064026	Pelvic floor muscle weakness
10034263	Pelvic pain
10034310	Penile pain
10061339	Perineal pain
10036601	Premature menopause

10055325	Prostatic hemorrhage
10055026	Prostatic obstruction
10036968	Prostatic pain
10038604	Reproductive system and breast disorders - Other, specify
10039757	Scrotal pain
10065762	Spermatic cord hemorrhage
10065805	Spermatic cord obstruction
10043306	Testicular disorder
10055347	Testicular hemorrhage
10043345	Testicular pain
10065811	Uterine fistula
10046789	Uterine hemorrhage
10065928	Uterine obstruction
10046809	Uterine pain
10046901	Vaginal discharge
10046904	Vaginal dryness
10065813	Vaginal fistula
10046912	Vaginal hemorrhage
10046916	Vaginal inflammation
10065817	Vaginal obstruction
10046937	Vaginal pain
10065818	Vaginal perforation
10053496	Vaginal stricture
10001409	Adult respiratory distress syndrome
10001723	Allergic rhinitis
10002972	Apnea
10003504	Aspiration
10003598	Atelectasis
10006437	Bronchial fistula
10006440	Bronchial obstruction
10063524	Bronchial stricture
10053481	Bronchopleural fistula
10065746	Bronchopulmonary hemorrhage
10006482	Bronchospasm
10051228	Chylothorax
10011224	Cough
10013963	Dyspnea
10015090	Epistaxis
10020039	Hiccups
10020201	Hoarseness
10021143	Hypoxia
10023838	Laryngeal edema
10065786	Laryngeal fistula
10065759	Laryngeal hemorrhage
10065735	Laryngeal inflammation
10065880	Laryngeal mucositis
10059639	Laryngeal obstruction
10023862	Laryngeal stenosis
10062667	Laryngopharyngeal dysesthesia
10023891	Laryngospasm
10056356	Mediastinal hemorrhage
10028735	Nasal congestion
10068319	Oropharyngeal pain

10034825	Pharyngeal fistula
10055315	Pharyngeal hemorrhage
10065881	Pharyngeal mucositis
10065706	Pharyngeal necrosis
10050028	Pharyngeal stenosis
10034844	Pharyngolaryngeal pain
10035598	Pleural effusion
10055319	Pleural hemorrhage
10035623	Pleuritic pain
10035742	Pneumonitis
10035759	Pneumothorax
10036402	Postnasal drip
10036790	Productive cough
10037375	Pulmonary edema
10037383	Pulmonary fibrosis
10065873	Pulmonary fistula
10037400	Pulmonary hypertension
10038695	Respiratory failure
10038738	Respiratory, thoracic and mediastinal disorders - Other, specify
10038921	Retinoic acid syndrome
10039100	Rhinorrhea
10062244	Sinus disorder
10040747	Sinus pain
10040975	Sleep apnea
10041232	Sneezing
10041367	Sore throat
10042241	Stridor
10065787	Tracheal fistula
10065900	Tracheal mucositis
10050816	Tracheal stenosis
10047681	Voice alteration
10047924	Wheezing
10001760	Alopecia
10005901	Body odor
10006556	Bullous dermatitis
10013786	Dry skin
10014184	Eczema
10015218	Erythema multiforme
10015277	Erythroderma
10016241	Fat atrophy
10055525	Hair color changes
10019049	Hair texture abnormal
10020112	Hirsutism
10020642	Hyperhidrosis
10020649	Hyperkeratosis
10020864	Hypertrichosis
10021013	Hypohidrosis
10062315	Lipohypertrophy
10028689	Nail changes
10028691	Nail discoloration
10049281	Nail loss
10062283	Nail ridging
10033474	Pain of skin

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10042344	Subcutaneous emphysema																																																																													
10043189	Telangiectasia																																																																													
10044223	Toxic epidermal necrolysis																																																																													
10046735	Urticaria																																																																													
10041244	Social circumstances - Other, specify																																																																													
10042613	Surgical and medical procedures - Other, specify																																																																													
10073529	Arterial thromboembolism																																																																													
10007196	Capillary leak syndrome																																																																													
10016825	Flushing																																																																													
10019428	Hematoma																																																																													
10020407	Hot flashes																																																																													
10020772	Hypertension																																																																													
10021097	Hypotension																																																																													
10065773	Lymph leakage																																																																													
10025233	Lymphedema																																																																													
10048642	Lymphocele																																																																													
10034578	Peripheral ischemia																																																																													
10034879	Phlebitis																																																																													
10042554	Superficial thrombophlebitis																																																																													
10042569	Superior vena cava syndrome																																																																													
10043565	Thromboembolic event																																																																													
10047065	Vascular disorders - Other, specify																																																																													
10047115	Vasculitis																																																																													
				Field Annotation: @HIDDEN [aeterm]																																																																										
830	[aeterm_sum_v5]	Adverse Event (CTCAE v5.0)	calc Calculation: sum([aeterm01_v5],[aeterm02_v5],[aeterm03_v5],[aeterm04_v5],[aeterm05_v5],[aeterm06_v5],[aeterm07_v5],[aeterm08_v5],[aeterm09_v5],[aeterm10_v5],[aeterm11_v5],[aeterm12_v5],[aeterm13_v5],[aeterm14_v5],[aeterm15_v5],[aeterm16_v5],[aeterm17_v5],[aeterm18_v5],[aeterm19_v5],[aeterm20_v5],[aeterm21_v5],[aeterm22_v5],[aeterm23_v5],[aeterm24_v5],[aeterm25_v5],[aeterm26_v5]) Field Annotation: @HIDDEN																																																																											

831	<div>[aether_v5]</div> <div>Show the field ONLY if: [aeterm01_v5] = '10005329' or [aeterm02_v5] = '10007541' or [aeterm03_v5] = '10010331' or [aeterm04_v5] = '10013993' or [aeterm05_v5] = '10014698' or [aeterm06_v5] = '10015919' or [aeterm07_v5] = '10017947' or [aeterm08_v5] = '10018065' or [aeterm09_v5] = '10019805' or [aeterm10_v5] = '10021428' or [aeterm11_v5] = '10021881' or [aeterm12_v5] = '10022117' or [aeterm13_v5] = '10022891' or [aeterm14_v5] = '10027433' or [aeterm15_v5] = '10028395' or [aeterm16_v5] = '10029104' or [aeterm17_v5] = '10029205' or [aeterm18_v5] = '10036585' or [aeterm19_v5] = '10037175' or [aeterm20_v5] = '10038359' or [aeterm21_v5] = '10038604' or [aeterm22_v5] = '10038738' or [aeterm23_v5] = '10040785' or [aeterm24_v5] = '10041244' or [aeterm25_v5] = '10042613' or [aeterm26_v5] = '10047065'</div>	Adverse Event Other	text, Required Field Annotation: [aeterm]										
832	<div>[aetoxgr_v5]</div> <div>Show the field ONLY if: [aeyn]='1'</div>	<div>What was the severity/grade of the adverse event?Note:A Semi-colon indicates 'or' within the description of the grade. In the CTCAE Users Guide, a single dash (-) indicates a grade is not available. Not all Grades are appropriate for all AEs. Therefore, some AEs are listed with fewer than five options for Grade selection.</div> <div>Please select only one response. Activities of Daily Living (ADL) *Instrumental ADL refer to preparing meals, shopping for groceries or clothes, using the telephone, managing money, etc. **Self care ADL refer to bathing, dressing and undressing, feeding self, using the toilet, taking medications, and not bedridden.</div>	<div>radio, Required</div> <table><tr><td>1</td><td>Grade 1 - Mild; asymptomatic or mild symptoms; clinical or diagnostic observations only; intervention not indicated.</td></tr><tr><td>2</td><td>Grade 2 - Moderate; minimal, local or noninvasive intervention indicated; limiting age-appropriate instrumental ADL*.</td></tr><tr><td>3</td><td>Grade 3 - Severe or medically significant but not immediately life-threatening; hospitalization or prolongation of hospitalization indicated; disabling; limiting self care ADL**.</td></tr><tr><td>4</td><td>Grade 4 - Life-threatening consequences; urgent intervention indicated.</td></tr><tr><td>5</td><td>Grade 5 - Death related to AE.</td></tr></table> <div>Field Annotation: [aetoxgr]</div>	1	Grade 1 - Mild; asymptomatic or mild symptoms; clinical or diagnostic observations only; intervention not indicated.	2	Grade 2 - Moderate; minimal, local or noninvasive intervention indicated; limiting age-appropriate instrumental ADL*.	3	Grade 3 - Severe or medically significant but not immediately life-threatening; hospitalization or prolongation of hospitalization indicated; disabling; limiting self care ADL**.	4	Grade 4 - Life-threatening consequences; urgent intervention indicated.	5	Grade 5 - Death related to AE.
1	Grade 1 - Mild; asymptomatic or mild symptoms; clinical or diagnostic observations only; intervention not indicated.												
2	Grade 2 - Moderate; minimal, local or noninvasive intervention indicated; limiting age-appropriate instrumental ADL*.												
3	Grade 3 - Severe or medically significant but not immediately life-threatening; hospitalization or prolongation of hospitalization indicated; disabling; limiting self care ADL**.												
4	Grade 4 - Life-threatening consequences; urgent intervention indicated.												
5	Grade 5 - Death related to AE.												
833	<div>[aesev]</div> <div>Show the field ONLY if: [aeyn]=1</div>	<div>What was the severity of the adverse event?</div> <div>The reporting physician/healthcare professional will assess the severity of the event using the sponsor-defined categories. This assessment is subjective and the reporting physician/healthcare professional should use medical judgment to compare the reported adverse event to similar type events observed in clinical practice. Severity is not equivalent to seriousness.</div>	<div>dropdown, Required</div> <table><tr><td>1</td><td>Mild</td></tr><tr><td>2</td><td>Moderate</td></tr><tr><td>3</td><td>Severe</td></tr></table> <div>Field Annotation: [aesev]</div>	1	Mild	2	Moderate	3	Severe				
1	Mild												
2	Moderate												
3	Severe												
834	<div>[aestdat]</div> <div>Show the field ONLY if: [aeyn]='1'</div>	<div>What is the date the adverse event started?</div> <div>Please record the date in MM-DD-YYYY format.</div>	<div>text (date_mdy, Max: today), Required</div> <div>Field Annotation: [aestdtc]</div>										
835	<div>[aeongo]</div> <div>Show the field ONLY if: [aeyn]='1'</div>	<div>Is the adverse event ongoing within the reporting period?</div> <div>Indicate if the adverse event has not resolved.</div>	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <div>Custom alignment: RH</div> <div>Field Annotation: [aeenrpt][aeenrf]</div>	1	Yes	0	No						
1	Yes												
0	No												
836	<div>[aeendat]</div> <div>Show the field ONLY if: [aeongo] = '0'</div>	<div>If not ongoing, what date did the adverse event end?</div> <div>Please record the date in MM-DD-YYYY format.</div>	<div>text (date_mdy, Max: today), Required</div> <div>Field Annotation: [aeendtc]</div>										
837	<div>[aeser]</div> <div>Show the field ONLY if: [aeyn]='1'</div>	<div>Is the adverse event serious?</div> <div>Assess if an adverse event should be classified as serious based on the serious criteria defined in the protocol.</div>	<div>yesno, Required</div> <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> <div>Custom alignment: RH</div> <div>Field Annotation: [aeser]</div>	1	Yes	0	No						
1	Yes												
0	No												

838	<div>[aesdth]</div> <div>Show the field ONLY if: [aeser]='1'</div>	<div>Did the adverse event result in death?</div> <div>Record whether the serious adverse event resulted in death. The date of death should be recorded on the Subject Disposition Form.</div>	<div>yesno, Required</div> <div><div>1 Yes</div><div>0 No</div></div> <div>Custom alignment: RH</div> <div>Field Annotation: [aesdth]</div>
839	<div>[aeslife]</div> <div>Show the field ONLY if: [aeser]='1'</div>	<div>Is the adverse event Life Threatening?</div> <div>Record whether the serious adverse event is life threatening.</div>	<div>yesno, Required</div> <div><div>1 Yes</div><div>0 No</div></div> <div>Custom alignment: RH</div> <div>Field Annotation: [aeslife]</div>
840	<div>[aeshosp]</div> <div>Show the field ONLY if: [aeser]='1'</div>	<div>Did the adverse event result in initial or prolonged hospitalization for the subject?</div> <div>Record whether the serious adverse event resulted in an initial or prolonged hospitalization.</div>	<div>yesno, Required</div> <div><div>1 Yes</div><div>0 No</div></div> <div>Custom alignment: RH</div> <div>Field Annotation: [aeshosp]</div>
841	<div>[aesdisab]</div> <div>Show the field ONLY if: [aeser]='1'</div>	<div>Did the adverse event result in Persistent or significant disability or incapacity?</div> <div>Record whether the serious adverse event resulted in a persistent or significant disability or incapacity.</div>	<div>yesno, Required</div> <div><div>1 Yes</div><div>0 No</div></div> <div>Custom alignment: RH</div> <div>Field Annotation: [aesdisab]</div>
842	<div>[aescong]</div> <div>Show the field ONLY if: [aeser]='1'</div>	<div>Is the adverse event associated with a congenital anomaly or birth defect?</div> <div>Record whether the serious adverse event was associated with congenital anomaly or birth defect.</div>	<div>yesno, Required</div> <div><div>1 Yes</div><div>0 No</div></div> <div>Custom alignment: RH</div> <div>Field Annotation: [aescong]</div>
843	<div>[aesmie]</div> <div>Show the field ONLY if: [aeser]='1'</div>	<div>Is the adverse event a medically important event not covered by other "serious" criteria?</div> <div>Record whether the serious adverse event is an important medical event, which may be defined in the protocol or in the Investigator Brochure.</div>	<div>yesno, Required</div> <div><div>1 Yes</div><div>0 No</div></div> <div>Custom alignment: RH</div> <div>Field Annotation: [aesmie]</div>
844	<div>[aerel]</div> <div>Show the field ONLY if: [aeyn]='1'</div>	<div>Was this adverse event related to study treatment/intervention?</div> <div>Please select only one response. Indicate if the cause of the adverse event is related to the study treatment and cannot be reasonably explained by other factors (e.g., subject's clinical state, concomitant therapy, and/or other interventions).</div>	<div>dropdown, Required</div> <div><div>1 Not Related</div><div>2 Unlikely Related</div><div>3 Possibly Related</div><div>4 Related</div></div> <div>Field Annotation: [aerel]</div>
845	<div>[aeacn]</div> <div>Show the field ONLY if: [aeyn]='1'</div>	<div>What action was taken with study treatment/intervention?</div> <div>Please select only one response. Record changes made to the study treatment resulting from the adverse event.</div>	<div>dropdown, Required</div> <div><div>1 No Change</div><div>2 Interrupted</div><div>3 Withdrawn</div><div>22 Not Applicable</div><div>33 Unknown</div></div> <div>Field Annotation: [aeacn]</div>
846	<div>[aewthdat]</div> <div>Show the field ONLY if: [aeacn][current-instance]='3'</div>	<div>What was the date of withdrawal from study treatment/intervention?</div> <div>Please record the date in MM-DD-YYYY format.</div>	<div>text (date_mdy, Max: today), Required</div>
847	<div>[aeout]</div> <div>Show the field ONLY if: [aeyn]='1'</div>	<div>What was the outcome of this adverse event?</div> <div>Please select only one response. Record the appropriate outcome of the event in relation to the subject's status.</div>	<div>dropdown, Required</div> <div><div>1 Fatal</div><div>2 Not Recovered/Not Resolved</div><div>3 Recovered/Resolved</div><div>4 Recovered/Resolved With Sequelae</div><div>5 Recovering/Resolving</div><div>33 Unknown</div></div>

848	[aedis] Show the field ONLY if: [aeyn]='1'	Did the adverse event cause the participant to be discontinued from the study? <i>Record if the AE caused the subject to discontinue from the study.</i>	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No		
1	Yes								
0	No								
849	[aeexp] Show the field ONLY if: [aeyn]='1'	Was this adverse event expected? <i>Please select only one response.</i>	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No		
1	Yes								
0	No								
850	[aedesc02] Show the field ONLY if: [aeyn]='1'	If more than one adverse event should be recorded, please add a new instance of this form to document each.	descriptive						
851	[aedesc03] Show the field ONLY if: [aeyn] = '0'	Since it was indicated on the "[form-link:adverse_events_prompt]" form that there are no adverse events to report, this form is intentionally left blank and should be saved with a "Complete" status.	descriptive						
852	[aedesc04] Show the field ONLY if: [aeyn] = "	Please complete the "[form-link:adverse_events_prompt]" form before attempting to complete this form.	descriptive						
853	[aeinst2]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** Use the section below only if applicable to the protocol.	descriptive Field Annotation: @HIDDEN						
854	[aervdat] Show the field ONLY if: [aeyn]='1'	Section Header: <i>Medical Monitor Review</i> What was the date of the initial review? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today)						
855	[aervstat] Show the field ONLY if: [aeyn]='1'	What is the status of the medical monitor review? <i>Please select only one response.</i>	dropdown <table><tr><td>1</td><td>Reviewed with Unresolved Issues</td></tr><tr><td>2</td><td>Reviewed and Approved</td></tr></table>	1	Reviewed with Unresolved Issues	2	Reviewed and Approved		
1	Reviewed with Unresolved Issues								
2	Reviewed and Approved								
856	[aervcom] Show the field ONLY if: [aeyn]='1'	What are the reviewer comments, if any?	notes						
857	[aeusrid2]	User ID:	text Field Annotation: @USERNAME @HIDDEN						
858	[adverse_events_ctcae_v5_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete								
1	Unverified								
2	Complete								
Instrument: Prior And Concomitant Medications Prompt (prior_and_concomitant_medications_prompt)									
859	[cmyn]	Were any Prior and/or Concomitant Medications taken during the study period? <i>Indicate if the subject took any (concomitant) [medications/treatments]. If Yes, include the appropriate details on the Prior and Concomitant medications CRF.</i>	yesno, Required <table><tr><td>1</td><td>Yes</td></tr><tr><td>0</td><td>No</td></tr></table> Custom alignment: RH	1	Yes	0	No		
1	Yes								
0	No								
860	[cmusrid1]	User ID:	text Field Annotation: @USERNAME @HIDDEN						
861	[prior_and_concomitant_medications_prompt_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete								
1	Unverified								
2	Complete								
Instrument: Prior And Concomitant Medications (prior_and_concomitant_medications)									
862	[cminst1]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** ***Notes to Data Manager*** If RDCRN RXNORM should be used. If non-RDCRN Other ontologies can be assigned. Make the proper determinations with the study team. This form is intended only to collect pharmacological therapies (medications).	descriptive Field Annotation: @HIDDEN						
863	[cmtrt] Show the field ONLY if: [cmyn]=1	What is the medication name? <i>Record only 1 medication/treatment/therapy per line. Provide the full trade or proprietary name of the medication/treatment/therapy; otherwise the generic name may be recorded.</i>	text, Required <table><tr><td>BIOPORTAL:RXNORM</td><td>BIOPORTAL:RXNORM</td></tr></table> Field Annotation: [cmtrt]	BIOPORTAL:RXNORM	BIOPORTAL:RXNORM				
BIOPORTAL:RXNORM	BIOPORTAL:RXNORM								

864	<div>[cmindc]</div> <div>Show the field ONLY if: [cmtrt]<>""</div>	<div>For what indication was/is the medication taken?</div> <div>Record the reason the medication was taken based on clinical investigator's evaluation. If taken to treat a condition, and a diagnosis was made, the indication should be the diagnosis. If taken to treat a condition, and no diagnosis was made, the indication should be the signs and symptoms. If taken as prophylaxis, report "Prophylaxis" and include a description of the condition below.</div>	<div>text, Required</div> <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div> <div>Field Annotation: [cmindc]</div>																				
865	<div>[cmproph]</div> <div>Show the field ONLY if: [cmproph]='262073000'</div>	<div>If used as a prophylactic, please specify the condition for which the medication is being taken prophylactically:</div>	<div>text, Required</div> <div>BIOPORTAL:SNOMEDCTBIOPORTAL:SNOMEDCT</div>																				
866	<div>[cmdose]</div> <div>Show the field ONLY if: [cmtrt]<>""</div>	<div>What was the individual dose of the concomitant medication/treatment/therapy per administration?</div> <div>Record the dose of concomitant medication/treatment taken per administration (e.g., 200).</div>	<div>text, Required</div> <div>Field Annotation: [cmdose] or [cmdstxt]</div>																				
867	<div>[cmdosu]</div> <div>Show the field ONLY if: [cmtrt]<>""</div>	<div>What was the unit for the dose?</div> <div>Please select only one response. Record the dose unit of the dose of concomitant medication/treatment/therapy taken (e.g., mg).</div>	<div>dropdown, Required</div> <table><tr><td>1</td><td>Milligram (mg)</td></tr><tr><td>2</td><td>Microgram (ug)</td></tr><tr><td>3</td><td>Milliliter (mL)</td></tr><tr><td>4</td><td>Gram (g)</td></tr><tr><td>5</td><td>International Unit (IU)</td></tr><tr><td>6</td><td>Tablet (tab)</td></tr><tr><td>7</td><td>Capsule (cap)</td></tr><tr><td>8</td><td>Puff</td></tr><tr><td>99</td><td>Other</td></tr></table> <div>Field Annotation: [cmdosu]</div>	1	Milligram (mg)	2	Microgram (ug)	3	Milliliter (mL)	4	Gram (g)	5	International Unit (IU)	6	Tablet (tab)	7	Capsule (cap)	8	Puff	99	Other		
1	Milligram (mg)																						
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4	Gram (g)																						
5	International Unit (IU)																						
6	Tablet (tab)																						
7	Capsule (cap)																						
8	Puff																						
99	Other																						
868	<div>[cmdosusp]</div> <div>Show the field ONLY if: [cmtrt]<>"" and [cmdosu]='99'</div>	<div>If Other, please specify the unit for the dose:</div> <div>Please select only one response. Record the dose unit of the dose of concomitant medication/treatment/therapy taken (e.g., mg).</div>	<div>text, Required</div> <div>Field Annotation: [cmdosu]</div>																				
869	<div>[cmdosfrq]</div> <div>Show the field ONLY if: [cmtrt]<>""</div>	<div>What was the frequency of this dose?</div> <div>Please select only one response. Record how often the (concomitant) medication/treatment/therapy was taken (e.g., BID, PRN).</div>	<div>dropdown, Required</div> <table><tr><td>1</td><td>Once Daily (qd)</td></tr><tr><td>2</td><td>Twice Daily (bid)</td></tr><tr><td>3</td><td>Three Times a Day (tid)</td></tr><tr><td>4</td><td>Four Times a Day (qid)</td></tr><tr><td>5</td><td>Every Other Day (qod)</td></tr><tr><td>6</td><td>Every Month (qm)</td></tr><tr><td>7</td><td>As Needed (prn)</td></tr><tr><td>99</td><td>Other</td></tr></table> <div>Field Annotation: [cmdosfrq]</div>	1	Once Daily (qd)	2	Twice Daily (bid)	3	Three Times a Day (tid)	4	Four Times a Day (qid)	5	Every Other Day (qod)	6	Every Month (qm)	7	As Needed (prn)	99	Other				
1	Once Daily (qd)																						
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7	As Needed (prn)																						
99	Other																						
870	<div>[cmdosfsp]</div> <div>Show the field ONLY if: [cmtrt]<>"" and [cmdosfrq]='99'</div>	<div>If Other, please specify the frequency of this dose:</div> <div>Please select only one response. Record how often the (concomitant) medication/treatment/therapy was taken (e.g., BID, PRN).</div>	<div>text, Required</div> <div>Field Annotation: [cmdosfrq]</div>																				
871	<div>[cmroute]</div> <div>Show the field ONLY if: [cmtrt]<>""</div>	<div>What was the route of administration?</div> <div>Please select only one response. Provide the route of administration for the (concomitant) medication/treatment/therapy.</div>	<div>dropdown, Required</div> <table><tr><td>1</td><td>Oral (po)</td></tr><tr><td>2</td><td>Topical (top)</td></tr><tr><td>3</td><td>Subcutaneous (sc)</td></tr><tr><td>4</td><td>Transdermal</td></tr><tr><td>5</td><td>Intraocular</td></tr><tr><td>6</td><td>Intramuscular</td></tr><tr><td>7</td><td>Inhalation</td></tr><tr><td>8</td><td>Nasal</td></tr><tr><td>9</td><td>Intravenous</td></tr><tr><td>99</td><td>Other</td></tr></table> <div>Field Annotation: [cmroute]</div>	1	Oral (po)	2	Topical (top)	3	Subcutaneous (sc)	4	Transdermal	5	Intraocular	6	Intramuscular	7	Inhalation	8	Nasal	9	Intravenous	99	Other
1	Oral (po)																						
2	Topical (top)																						
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4	Transdermal																						
5	Intraocular																						
6	Intramuscular																						
7	Inhalation																						
8	Nasal																						
9	Intravenous																						
99	Other																						
872	<div>[cmroutsp]</div> <div>Show the field ONLY if: [cmtrt]<>"" and [cmroute]='99'</div>	<div>If Other, please specify the route of administration:</div> <div>Please select only one response. Provide the route of administration for the (concomitant) medication/treatment/therapy.</div>	<div>text, Required</div> <div>Field Annotation: [cmroute]</div>																				
873	<div>[cmstdat]</div> <div>Show the field ONLY if: [cmtrt]<>""</div>	<div>What was the start date?</div> <div>Please record the date in MM-DD-YYYY format.</div>	<div>text (date_mdy, Max: today), Required</div> <div>Field Annotation: [CMSTDTC]</div>																				

874	[cmongo] Show the field ONLY if: [cmtrt]<>"	Was the medication ongoing at study completion/discontinuation? <i>Record the concomitant [medication/treatment/therapy] as ongoing if the subject has not stopped taking the concomitant [medication/treatment/therapy] at [the timepoint defined by the study]. If the concomitant medication is ongoing, the end date should be left blank.</i>	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH Field Annotation: [cmenrf] [cmenrtpt]	1	Yes	0	No												
1	Yes																		
0	No																		
875	[cmendat] Show the field ONLY if: [cmongo]="0"	If not ongoing, what was the stop date? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [CMENDTC]																
876	[cmdesc1] Show the field ONLY if: [cmyn]="1"	If more than one medication should be recorded, please add a new instance of this form to document each.	descriptive																
877	[cmdesc2] Show the field ONLY if: [cmyn]="0"	Since it was indicated on the "[form-link:prior_and_concomitant_medications_prompt]" form that there were no prior or concomitant medications to record, this form is intentionally left blank and should be saved with a "Complete" form status.	descriptive																
878	[cmdesc3] Show the field ONLY if: [cmyn]=""	Please complete the "[form-link:prior_and_concomitant_medications_prompt]" form before attempting to complete this form.	descriptive																
879	[cmusrid2]	User ID:	text Field Annotation: @USERNAME @HIDDEN																
880	[prior_and_concomitant_medications_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete										
0	Incomplete																		
1	Unverified																		
2	Complete																		
Instrument: Protocol Deviations Prompt (protocol_deviations_prompt)																			
881	[dvyn]	Were there any protocol deviations during the study? <i>Enter Yes if a protocol deviation occurred and No if none occurred. Ensure that any adverse event which triggers a protocol deviation (e.g., concomitant medication use, newly discovered medical history) is noted in the respective CRF. If yes, please proceed to the following Protocol Deviations page to provide further specific details.</i>	yesno, Required <table border="1"> <tr><td>1</td><td>Yes</td></tr> <tr><td>0</td><td>No</td></tr> </table> Custom alignment: RH	1	Yes	0	No												
1	Yes																		
0	No																		
882	[dvusrid1]	User ID:	text Field Annotation: @USERNAME @HIDDEN																
883	[protocol_deviations_prompt_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table border="1"> <tr><td>0</td><td>Incomplete</td></tr> <tr><td>1</td><td>Unverified</td></tr> <tr><td>2</td><td>Complete</td></tr> </table>	0	Incomplete	1	Unverified	2	Complete										
0	Incomplete																		
1	Unverified																		
2	Complete																		
Instrument: Protocol Deviations (protocol_deviations)																			
884	[dvinst1]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** Below is the list of general protocol deviations. Please choose only what is applicable for your study and remove the others that do not apply. Avoid using "Other" as much as possible and try to identify or add your study's known protocol deviation risks to the list.	descriptive Field Annotation: @HIDDEN																
885	[dvdecod] Show the field ONLY if: [dvyn]=1	What was the protocol deviation? <i>Please select only one response.</i>	radio, Required <table border="1"> <tr><td>1</td><td>Informed Consent not obtained</td></tr> <tr><td>2</td><td>Ineligible participant</td></tr> <tr><td>3</td><td>Missing data / outcome measure</td></tr> <tr><td>4</td><td>Visit not completed</td></tr> <tr><td>5</td><td>Visit out of window</td></tr> <tr><td>6</td><td>Study drug non-compliance</td></tr> <tr><td>7</td><td>Randomization error</td></tr> <tr><td>99</td><td>Other</td></tr> </table> Field Annotation: [dvdecod]	1	Informed Consent not obtained	2	Ineligible participant	3	Missing data / outcome measure	4	Visit not completed	5	Visit out of window	6	Study drug non-compliance	7	Randomization error	99	Other
1	Informed Consent not obtained																		
2	Ineligible participant																		
3	Missing data / outcome measure																		
4	Visit not completed																		
5	Visit out of window																		
6	Study drug non-compliance																		
7	Randomization error																		
99	Other																		
886	[dvterm] Show the field ONLY if: [dvdecod] = '99'	If other protocol deviation, please specify:	text, Required Field Annotation: [dvterm]																

887	[dvstdat] Show the field ONLY if: [dvyn]=1	What was the date of the deviation? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [DVSTDTC]																																				
888	[dvdetail] Show the field ONLY if: [dvyn]='1'	What are any additional protocol deviation details?	notes, Required																																				
889	[dvdesc1] Show the field ONLY if: [dvyn] = '1'	If more than one protocol deviation should be recorded, please add a new instance of this form to document each deviation.	descriptive																																				
890	[dvdesc2] Show the field ONLY if: [dvyn] = "0"	Since it was indicated on the "[form-link:protocol_deviations_prompt]" form that there were no protocol deviations to record, this form is intentionally left blank and should be saved with a "Complete" form status.	descriptive																																				
891	[dvdesc3] Show the field ONLY if: [dvyn]=""	Please complete the "[form-link:protocol_deviations_prompt]" form before attempting to complete this form.	descriptive																																				
892	[dvusrid2]	User ID:	text Field Annotation: @USERNAME @HIDDEN																																				
893	[protocol_deviations_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete																														
0	Incomplete																																						
1	Unverified																																						
2	Complete																																						
Instrument: Subject Disposition (subject_disposition)																																							
894	[dsinst1]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** This Disposition form is designed to collect end of study disposition. If a study has to document other protocol milestone statuses - for example, a Run-In Period or a Wash-Out period - the Disposition form(s) can be added to document that status as well.	descriptive Field Annotation: @HIDDEN																																				
895	[dsstat]	What was the subject's study status? <i>Please select only one response.</i>	radio, Required <table><tr><td>1</td><td>Subject Completed the Study</td></tr><tr><td>2</td><td>Subject Discontinued from the Study</td></tr></table> Field Annotation: [dsdecod] = 'COMPLETE' if [dsyn] = 1	1	Subject Completed the Study	2	Subject Discontinued from the Study																																
1	Subject Completed the Study																																						
2	Subject Discontinued from the Study																																						
896	[dsdat]	What was the date of study completion/discontinuation? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [dsstdat]																																				
897	[dsdecod] Show the field ONLY if: [dsstat]="2"	If the subject discontinued from the study, what was the primary reason? <i>Please select only one response.</i>	dropdown, Required <table><tr><td>1</td><td>Adverse Event</td></tr><tr><td>2</td><td>Death</td></tr><tr><td>3</td><td>Lack of Efficacy</td></tr><tr><td>4</td><td>Lost to Follow-Up</td></tr><tr><td>5</td><td>Non-Compliance with Study Drug</td></tr><tr><td>6</td><td>Non-Compliance with Study Schedule</td></tr><tr><td>7</td><td>Physician Decision</td></tr><tr><td>8</td><td>Pregnancy</td></tr><tr><td>9</td><td>Progressive Disease</td></tr><tr><td>10</td><td>Protocol Violation</td></tr><tr><td>11</td><td>Protocol-Specified Withdrawal Criterion Met</td></tr><tr><td>12</td><td>Recovery</td></tr><tr><td>13</td><td>Screen Failure</td></tr><tr><td>14</td><td>Study Terminated by Sponsor</td></tr><tr><td>15</td><td>Technical Problems</td></tr><tr><td>16</td><td>Withdrawal by Parent/Guardian</td></tr><tr><td>17</td><td>Withdrawal by Subject</td></tr><tr><td>999</td><td>Other</td></tr></table> Field Annotation: [dsdecod] if [dsyn]<>1	1	Adverse Event	2	Death	3	Lack of Efficacy	4	Lost to Follow-Up	5	Non-Compliance with Study Drug	6	Non-Compliance with Study Schedule	7	Physician Decision	8	Pregnancy	9	Progressive Disease	10	Protocol Violation	11	Protocol-Specified Withdrawal Criterion Met	12	Recovery	13	Screen Failure	14	Study Terminated by Sponsor	15	Technical Problems	16	Withdrawal by Parent/Guardian	17	Withdrawal by Subject	999	Other
1	Adverse Event																																						
2	Death																																						
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8	Pregnancy																																						
9	Progressive Disease																																						
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11	Protocol-Specified Withdrawal Criterion Met																																						
12	Recovery																																						
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14	Study Terminated by Sponsor																																						
15	Technical Problems																																						
16	Withdrawal by Parent/Guardian																																						
17	Withdrawal by Subject																																						
999	Other																																						
898	[dthdat] Show the field ONLY if: [dsdecod]='2'	What was the subject's date of death? <i>Please record the date in MM-DD-YYYY format.</i>	text (date_mdy, Max: today), Required Field Annotation: [dm.dthdct]																																				

	899	[dsterm] Show the field ONLY if: [dsdecod]='999'	Other reason, specify:	text, Required Field Annotation: [dsterm]						
	900	[dsusrid]	User ID:	text Field Annotation: @USERNAME @HIDDEN						
	901	[subject_disposition_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete									
1	Unverified									
2	Complete									
Instrument: BRIEF2 - Self Report (brief2_selfreport)										
	902	[b2dats]	Section Header: <i>BRIEF2 - Self Report</i> Date of assessment <i>DD-MM-YYYY</i>	text (date_mdy, Max: today)						
	903	[b2intb1s]	Section Header: <i>Index/Scale</i> Raw Score Raw Score Unknown T-Score T-Score Unknown Inhibit {b2inrs} {b2inrus} {b2ints} {b2intus} Self-Monitor {b2slfmsr} {b2slmrus} {b2slfmts} {b2slmtus} Behavioral Regulation Index (BRI) {b2sftrs} {b2sftrus} {b2sftts} {b2sfttus} Shift {b2ecrs} {b2ecrus} {b2ects} {b2ectus} Emotional Control {b2wmrs} {b2wmrus} {b2wmts} {b2wmtus} Emotion Regulation Index (ERI) {b2pors} {b2porus} {b2pots} {b2potus} Task-Completion {b2tmrs} {b2tmrus} {b2tmnts} {b2tmtus} Working Memory {b2brirs} {b2brirus} {b2brits} {b2britus} Plan/Organize {b2erirs} {b2erirus} {b2erits} {b2eritus} Cognitive Regulation Index (CRI) {b2crirs} {b2crirus} {b2crits} {b2critus} Global Executive Composite (GEC) {b2gecrs} {b2gecrus} {b2gects} {b2gectus}	descriptive						
	904	[b2v1tb1s]	Section Header: <i>Validity Scale</i> Raw Score Raw Score Unknown Negativity {b2negrs} {b2negrus} Inconsistency {b2incrs} {b2incrus} Infrequency {b2infrs} {b2infrus}	descriptive						
	905	[b2inrs] Show the field ONLY if: [b2inrus(1)]<>'1'	Inhibit raw score	text (number)						
	906	[b2inrus] Show the field ONLY if: [b2inrs]=''	Inhibit raw score unknown	checkbox <table><tr><td>33</td><td>b2inrus__33</td><td>Unknown</td></tr></table>	33	b2inrus__33	Unknown			
33	b2inrus__33	Unknown								
	907	[b2ints] Show the field ONLY if: [b2intus(1)]<>'1'	Inhibit T-score	text (integer, Min: 0, Max: 99)						
	908	[b2intus] Show the field ONLY if: [b2ints]=''	Inhibit T-Score unknown	checkbox <table><tr><td>33</td><td>b2intus__33</td><td>Unknown</td></tr></table>	33	b2intus__33	Unknown			
33	b2intus__33	Unknown								
	909	[b2slfmsr] Show the field ONLY if: [b2slmrus(1)]<>'1'	Self-Monitor raw score	text (number)						
	910	[b2slmrus] Show the field ONLY if: [b2slfmsr]=''	Self-Monitor raw score unknown	checkbox <table><tr><td>33</td><td>b2slmrus__33</td><td>Unknown</td></tr></table>	33	b2slmrus__33	Unknown			
33	b2slmrus__33	Unknown								
	911	[b2slfmts] Show the field ONLY if: [b2slmtus(1)]<>'1'	Self-Monitor t-score	text (integer, Min: 0, Max: 99)						
	912	[b2slmtus] Show the field ONLY if: [b2slfmts]=''	Self-Monitor t-score unknown	checkbox <table><tr><td>33</td><td>b2slmtus__33</td><td>Unknown</td></tr></table>	33	b2slmtus__33	Unknown			
33	b2slmtus__33	Unknown								
	913	[b2sftrs] Show the field ONLY if: [b2sftrus(1)]<>'1'	Shift raw score	text (number)						
	914	[b2sftrus] Show the field ONLY if: [b2sftrs]=''	Shift raw score unknown	checkbox <table><tr><td>33</td><td>b2sftrus__33</td><td>Unknown</td></tr></table>	33	b2sftrus__33	Unknown			
33	b2sftrus__33	Unknown								
	915	[b2sftts] Show the field ONLY if: [b2sfttus(1)]<>'1'	Shift t-score	text (integer, Min: 0, Max: 99)						

916	[b2sfttus] Show the field ONLY if: [b2sftts]=""	Shift t-score unknown	checkbox 33 b2sfttus__33 Unknown
917	[b2ecrs] Show the field ONLY if: [b2ecrus(1)]<>'1'	Emotional Control raw score	text (number)
918	[b2ecrus] Show the field ONLY if: [b2ecrs]=""	Emotional Control raw score unknown	checkbox 33 b2ecrus__33 Unknown
919	[b2ects] Show the field ONLY if: [b2ectus(1)]<>'1'	Emotional Control t-score	text (integer, Min: 0, Max: 99)
920	[b2ectus] Show the field ONLY if: [b2ects]=""	Emotional Control t-score unknown	checkbox 33 b2ectus__33 Unknown
921	[b2wmrs] Show the field ONLY if: [b2wmrus(1)]<>'1'	Working Memory raw score	text (number)
922	[b2wmrus] Show the field ONLY if: [b2wmrs]=""	Working Memory raw score unknown	checkbox 33 b2wmrus__33 Unknown
923	[b2wmts] Show the field ONLY if: [b2wmtus(1)]<>'1'	Working Memory t-score	text (integer, Min: 0, Max: 99)
924	[b2wmtus] Show the field ONLY if: [b2wmts]=""	Working Memory t-score unknown	checkbox 33 b2wmtus__33 Unknown
925	[b2pors] Show the field ONLY if: [b2porus(1)]<>'1'	Plan/Organize raw score	text (number)
926	[b2porus] Show the field ONLY if: [b2pors]=""	Plan/Organize raw score unknown	checkbox 33 b2porus__33 Unknown
927	[b2pots] Show the field ONLY if: [b2potus(1)]<>'1'	Plan/Organize t-score	text (integer, Min: 0, Max: 99)
928	[b2potus] Show the field ONLY if: [b2pots]=""	Plan/Organize t-score unknown	checkbox 33 b2potus__33 Unknown
929	[b2tmrs] Show the field ONLY if: [b2tmrus(1)]<>'1'	Task-Completion raw score	text (number)
930	[b2tmrus] Show the field ONLY if: [b2tmrs]=""	Task-Completion raw score unknown	checkbox 33 b2tmrus__33 Unknown
931	[b2tmts] Show the field ONLY if: [b2tmtus(1)]<>'1'	Task-Completion t-score	text (integer, Min: 0, Max: 99)
932	[b2tmtus] Show the field ONLY if: [b2tmts]=""	Task-Completion t-score unknown	checkbox 33 b2tmtus__33 Unknown
933	[b2brirs] Show the field ONLY if: [b2brirus(1)]<>'1'	Behavioral Regulation Index (BRI) raw score	text (number)
934	[b2brirus] Show the field ONLY if: [b2brirs]=""	Behavioral Regulation Index (BRI) raw score unknown	checkbox 33 b2brirus__33 Unknown
935	[b2brits] Show the field ONLY if: [b2britus(1)]<>'1'	Behavioral Regulation Index (BRI) t-score	text (integer, Min: 0, Max: 99)

936	[b2britus] Show the field ONLY if: [b2britus]=""	Behavioral Regulation Index (BRI) t-score unknown	checkbox 33 b2britus__33 Unknown
937	[b2erirs] Show the field ONLY if: [b2erirus(1)]<>'1'	Emotion Regulation Index (ERI) raw score	text (number)
938	[b2erirus] Show the field ONLY if: [b2erirs]=""	Emotion Regulation Index (ERI) raw score unknown	checkbox 33 b2erirus__33 Unknown
939	[b2erits] Show the field ONLY if: [b2eritus(1)]<>'1'	Emotion Regulation Index (ERI) t-score	text (integer, Min: 0, Max: 99)
940	[b2eritus] Show the field ONLY if: [b2erits]=""	Emotion Regulation Index (ERI) t-score unknown	checkbox 33 b2eritus__33 Unknown
941	[b2crrirs] Show the field ONLY if: [b2crrirus(1)]<>'1'	Cognitive Regulation Index (CRI) raw score	text (number)
942	[b2crrirus] Show the field ONLY if: [b2crrirs]=""	Cognitive Regulation Index (CRI) raw score unknown	checkbox 33 b2crrirus__33 Unknown
943	[b2crrits] Show the field ONLY if: [b2crritus(1)]<>'1'	Cognitive Regulation Index (CRI) t-score	text (integer, Min: 0, Max: 99)
944	[b2crritus] Show the field ONLY if: [b2crrits]=""	Cognitive Regulation Index (CRI) t-score unknown	checkbox 33 b2crritus__33 Unknown
945	[b2gecrs] Show the field ONLY if: [b2gecrus(1)]<>'1'	Global Executive Composite (GEC) raw score	text (number)
946	[b2gecrus] Show the field ONLY if: [b2gecrs]=""	Global Executive Composite (GEC) raw score unknown	checkbox 33 b2gecrus__33 Unknown
947	[b2gects] Show the field ONLY if: [b2gectus(1)]<>'1'	Global Executive Composite (GEC) t-score	text (integer, Min: 0, Max: 99)
948	[b2gectus] Show the field ONLY if: [b2gects]=""	Global Executive Composite (GEC) t-score unknown	checkbox 33 b2gectus__33 Unknown
949	[b2negrs] Show the field ONLY if: [b2negrus(1)]<>'1'	Negativity raw score	text (number)
950	[b2negrus] Show the field ONLY if: [b2negrs]=""	Negativity raw score unknown	checkbox 33 b2negrus__33 Unknown
951	[b2incrs] Show the field ONLY if: [b2incrus(1)]<>'1'	Inconsistency raw score	text (number)
952	[b2incrus] Show the field ONLY if: [b2incrs]=""	Inconsistency raw score unknown	checkbox 33 b2incrus__33 Unknown
953	[b2infrs] Show the field ONLY if: [b2infrus(1)]<>'1'	Infrequency raw score	text (number)
954	[b2infrus] Show the field ONLY if: [b2infrs]=""	Infrequency raw score unknown	checkbox 33 b2infrus__33 Unknown

	955	[brief2_selfreport_complete]	Section Header: <i>Form Status</i> Complete?	dropdown <table><tr><td>0</td><td>Incomplete</td></tr><tr><td>1</td><td>Unverified</td></tr><tr><td>2</td><td>Complete</td></tr></table>	0	Incomplete	1	Unverified	2	Complete
0	Incomplete									
1	Unverified									
2	Complete									
Instrument: BRIEF2 - Parent (brief2_parent)										
	956	[b2datp]	Section Header: <i>BRIEF2 - Parent</i> Date of assessment <i>DD-MM-YYYY</i>	text (date_mdy, Max: today)						
	957	[b2intb1p]	Section Header: <i>Index/Scale</i> Raw Score Raw Score Unknown T-Score T-Score Unknown Inhibit {b2inrp} {b2inrup} {b2intp} {b2intup} Self-Monitor {b2slfmrp} {b2slmrup} {b2slfmtup} {b2slmtup} Behavioral Regulation Index (BRI) {b2sfrtp} {b2sftrup} {b2sfttp} {b2sfttup} Shift {b2ecrp} {b2ecrup} {b2ectp} {b2ectup} Emotional Control {b2intrp} {b2intrup} {b2inttp} {b2inttup} Emotion Regulation Index (ERI) {b2wmrp} {b2wmrup} {b2wmtup} {b2wmtup} Initiate {b2porp} {b2porup} {b2potp} {b2potup} Working Memory {b2tmrp} {b2tmrup} {b2tmtup} {b2tmtup} Plan/ Organize {b2orgrp} {b2orgrup} {b2orgtp} {b2orgtup} Task-Monitor {b2brirp} {b2brirup} {b2britp} {b2britup} Organization of Materials {b2erirp} {b2erirup} {b2eritp} {b2eritup} Cognitive Regulation Index (CRI) {b2crrp} {b2crrup} {b2critp} {b2critup} Global Executive Composite (GEC) {b2gecrp} {b2gecrup} {b2gectp} {b2gectup}	descriptive						
	958	[b2v1tb1p]	Section Header: <i>Validity Scale</i> Raw Score Raw Score Unknown Negativity {b2negrp} {b2negrup} Inconsistency {b2incrp} {b2incrup} Infrequency {b2infrp} {b2infrup}	descriptive						
	959	[b2inrp] Show the field ONLY if: [b2inrup(1)]<>'1'	Inhibit raw score	text (number)						
	960	[b2inrup] Show the field ONLY if: [b2inrp]=""	Inhibit raw score unknown	checkbox <table><tr><td>33</td><td>b2inrup__33</td><td>Unknown</td></tr></table>	33	b2inrup__33	Unknown			
33	b2inrup__33	Unknown								
	961	[b2intp] Show the field ONLY if: [b2intup(1)]<>'1'	Inhibit T-score	text (integer, Min: 0, Max: 99)						
	962	[b2intup] Show the field ONLY if: [b2intp]=""	Inhibit T-Score unknown	checkbox <table><tr><td>33</td><td>b2intup__33</td><td>Unknown</td></tr></table>	33	b2intup__33	Unknown			
33	b2intup__33	Unknown								
	963	[b2s1fmrp] Show the field ONLY if: [b2slmrup(1)]<>'1'	Self-Monitor raw score	text (number)						
	964	[b2s1mrup] Show the field ONLY if: [b2slfmrp]=""	Self-Monitor raw score unknown	checkbox <table><tr><td>33</td><td>b2slmrup__33</td><td>Unknown</td></tr></table>	33	b2slmrup__33	Unknown			
33	b2slmrup__33	Unknown								
	965	[b2s1fmtup] Show the field ONLY if: [b2slmtup(1)]<>'1'	Self-Monitor t-score	text (integer, Min: 0, Max: 99)						
	966	[b2s1mtup] Show the field ONLY if: [b2slfmtup]=""	Self-Monitor t-score unknown	checkbox <table><tr><td>33</td><td>b2slmtup__33</td><td>Unknown</td></tr></table>	33	b2slmtup__33	Unknown			
33	b2slmtup__33	Unknown								
	967	[b2sftrp] Show the field ONLY if: [b2sftrup(1)]<>'1'	Shift raw score	text (number)						
	968	[b2sftrup] Show the field ONLY if: [b2sftrp]=""	Shift raw score unknown	checkbox <table><tr><td>33</td><td>b2sftrup__33</td><td>Unknown</td></tr></table>	33	b2sftrup__33	Unknown			
33	b2sftrup__33	Unknown								
	969	[b2sfttp] Show the field ONLY if: [b2sfttup(1)]<>'1'	Shift t-score	text (integer, Min: 0, Max: 99)						
	970	[b2sfttup] Show the field ONLY if: [b2sfttp]=""	Shift t-score unknown	checkbox <table><tr><td>33</td><td>b2sfttup__33</td><td>Unknown</td></tr></table>	33	b2sfttup__33	Unknown			
33	b2sfttup__33	Unknown								

971	[b2ecrp] Show the field ONLY if: [b2ecrup(1)]<>'1'	Emotional Control raw score	text (number)
972	[b2ecrup] Show the field ONLY if: [b2ecrp]=""	Emotional Control raw score unknown	checkbox 33 b2ecrup__33 Unknown
973	[b2ectp] Show the field ONLY if: [b2ectup(1)]<>'1'	Emotional Control t-score	text (integer, Min: 0, Max: 99)
974	[b2ectup] Show the field ONLY if: [b2ectp]=""	Emotional Control t-score unknown	checkbox 33 b2ectup__33 Unknown
975	[b2intrp] Show the field ONLY if: [b2intrup(1)]<>'1'	Initiate raw score	text (number)
976	[b2intrup] Show the field ONLY if: [b2intrp]=""	Initiate raw score unknown	checkbox 33 b2intrup__33 Unknown
977	[b2inttp] Show the field ONLY if: [b2inttup(1)]<>'1'	Initiate t-score	text (integer, Min: 0, Max: 99)
978	[b2inttup] Show the field ONLY if: [b2inttp]=""	Initiate t-score unknown	checkbox 33 b2inttup__33 Unknown
979	[b2wmrp] Show the field ONLY if: [b2wmrup(1)]<>'1'	Working Memory raw score	text (number)
980	[b2wmrup] Show the field ONLY if: [b2wmrp]=""	Working Memory raw score unknown	checkbox 33 b2wmrup__33 Unknown
981	[b2wmtp] Show the field ONLY if: [b2wmtup(1)]<>'1'	Working Memory t-score	text (integer, Min: 0, Max: 99)
982	[b2wmtup] Show the field ONLY if: [b2wmtp]=""	Working Memory t-score unknown	checkbox 33 b2wmtup__33 Unknown
983	[b2porp] Show the field ONLY if: [b2porup(1)]<>'1'	Plan/Organize raw score	text (number)
984	[b2porup] Show the field ONLY if: [b2porp]=""	Plan/Organize raw score unknown	checkbox 33 b2porup__33 Unknown
985	[b2potp] Show the field ONLY if: [b2potup(1)]<>'1'	Plan/Organize t-score	text (integer, Min: 0, Max: 99)
986	[b2potup] Show the field ONLY if: [b2potp]=""	Plan/Organize t-score unknown	checkbox 33 b2potup__33 Unknown
987	[b2tmrp] Show the field ONLY if: [b2tmrup(1)]<>'1'	Task-Monitor raw score	text (number)
988	[b2tmrup] Show the field ONLY if: [b2tmrp]=""	Task-Monitor raw score unknown	checkbox 33 b2tmrup__33 Unknown
989	[b2tmtp] Show the field ONLY if: [b2tmtup(1)]<>'1'	Task-Monitor t-score	text (integer, Min: 0, Max: 99)
990	[b2tmtup] Show the field ONLY if: [b2tmtp]=""	Task-Monitor t-score unknown	checkbox 33 b2tmtup__33 Unknown

991	[b2orgrp] Show the field ONLY if: [b2orgrup(1)]<>'1'	Organization of Materials raw score	text (number)
992	[b2orgrup] Show the field ONLY if: [b2orgrp]=""	Organization of Materials raw score unknown	checkbox 33 b2orgrup__33 Unknown
993	[b2orgtup] Show the field ONLY if: [b2orgtup(1)]<>'1'	Organization of Materials t-score	text (integer, Min: 0, Max: 99)
994	[b2orgtup] Show the field ONLY if: [b2orgtup]=""	Organization of Materials t-score unknown	checkbox 33 b2orgtup__33 Unknown
995	[b2brirup] Show the field ONLY if: [b2brirup(1)]<>'1'	Behavioral Regulation Index (BRI) raw score	text (number)
996	[b2brirup] Show the field ONLY if: [b2brirup]=""	Behavioral Regulation Index (BRI) raw score unknown	checkbox 33 b2brirup__33 Unknown
997	[b2britup] Show the field ONLY if: [b2britup(1)]<>'1'	Behavioral Regulation Index (BRI) t-score	text (integer, Min: 0, Max: 99)
998	[b2britup] Show the field ONLY if: [b2britup]=""	Behavioral Regulation Index (BRI) t-score unknown	checkbox 33 b2britup__33 Unknown
999	[b2erirup] Show the field ONLY if: [b2erirup(1)]<>'1'	Emotion Regulation Index (ERI) raw score	text (number)
1000	[b2erirup] Show the field ONLY if: [b2erirup]=""	Emotion Regulation Index (ERI) raw score unknown	checkbox 33 b2erirup__33 Unknown
1001	[b2eritup] Show the field ONLY if: [b2eritup(1)]<>'1'	Emotion Regulation Index (ERI) t-score	text (integer, Min: 0, Max: 99)
1002	[b2eritup] Show the field ONLY if: [b2eritup]=""	Emotion Regulation Index (ERI) t-score unknown	checkbox 33 b2eritup__33 Unknown
1003	[b2crrup] Show the field ONLY if: [b2crrup(1)]<>'1'	Cognitive Regulation Index (CRI) raw score	text (number)
1004	[b2crrup] Show the field ONLY if: [b2crrup]=""	Cognitive Regulation Index (CRI) raw score unknown	checkbox 33 b2crrup__33 Unknown
1005	[b2critup] Show the field ONLY if: [b2critup(1)]<>'1'	Cognitive Regulation Index (CRI) t-score	text (integer, Min: 0, Max: 99)
1006	[b2critup] Show the field ONLY if: [b2critup]=""	Cognitive Regulation Index (CRI) t-score unknown	checkbox 33 b2critup__33 Unknown
1007	[b2gecrup] Show the field ONLY if: [b2gecrup(1)]<>'1'	Global Executive Composite (GEC) raw score	text (number)
1008	[b2gecrup] Show the field ONLY if: [b2gecrup]=""	Global Executive Composite (GEC) raw score unknown	checkbox 33 b2gecrup__33 Unknown
1009	[b2gectup] Show the field ONLY if: [b2gectup(1)]<>'1'	Global Executive Composite (GEC) t-score	text (integer, Min: 0, Max: 99)
1010	[b2gectup] Show the field ONLY if: [b2gectup]=""	Global Executive Composite (GEC) t-score unknown	checkbox 33 b2gectup__33 Unknown

	1011	[b2negrp] Show the field ONLY if: [b2negrup(1)]<>'1'	Negativity raw score	text (number)
	1012	[b2negrup] Show the field ONLY if: [b2negrup]=""	Negativity raw score unknown	checkbox 33 b2negrup__33 Unknown
	1013	[b2incrp] Show the field ONLY if: [b2incrup(1)]<>'1'	Inconsistency raw score	text (number)
	1014	[b2incrup] Show the field ONLY if: [b2incrup]=""	Inconsistency raw score unknown	checkbox 33 b2incrup__33 Unknown
	1015	[b2infrp] Show the field ONLY if: [b2infrup(1)]<>'1'	Infrequency raw score	text (number)
	1016	[b2infrup] Show the field ONLY if: [b2infrup]=""	Infrequency raw score unknown	checkbox 33 b2infrup__33 Unknown
	1017	[brief2_parent_complete]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete
Instrument: BRIEF2 - Teacher (brief2_teacher)				
	1018	[b2datt]	Section Header: <i>BRIEF2 - Teacher</i> Date of assessment <i>DD-MM_YYYY</i>	text (date_mdy, Max: today)
	1019	[b2intb1t]	Section Header: <i>Index/Scale</i> Raw Score Raw Score Unknown T-Score T-Score Unknown Inhibit {b2inrt} {b2inrut} {b2inttt} {b2intut} Self-Monitor {b2slfmr} {b2slmrut} {b2slfmr} {b2slfmr} {b2slfmr} Behavioral Regulation Index (BRI) {b2sfrt} {b2sfrut} {b2sfttt} {b2sftut} Shift {b2ecrt} {b2ecrut} {b2ectt} {b2ectut} Emotional Control {b2intrt} {b2intrut} {b2inttt} {b2intut} Emotion Regulation Index (ERI) {b2wmrt} {b2wmrut} {b2wmtt} {b2wmtut} Initiate {b2port} {b2porut} {b2pott} {b2potut} Working Memory {b2tmrt} {b2tmrut} {b2tmrt} {b2tmrtut} Plan/Organize {b2orgrt} {b2orgrut} {b2orgtt} {b2orgtut} Task-Monitor {b2brirt} {b2brirut} {b2britt} {b2britut} Organization of Materials {b2erirt} {b2erirut} {b2eritt} {b2eritut} Cognitive Regulation Index (CRI) {b2crrt} {b2crrut} {b2crrtt} {b2crritut} Global Executive Composite (GEC) {b2gecrt} {b2gecrut} {b2gec} {b2gecut}	descriptive
	1020	[b2v1tb1t]	Section Header: <i>Validity Scale</i> Raw Score Raw Score Unknown Negativity {b2negrt} {b2negrut} Inconsistency {b2incrt} {b2incrut} Infrequency {b2infrt} {b2infrut}	descriptive
	1021	[b2inrt] Show the field ONLY if: [b2inrut(1)]<>'1'	Inhibit raw score	text (number)
	1022	[b2inrut] Show the field ONLY if: [b2inrt]=""	Inhibit raw score unknown	checkbox 33 b2inrut__33 Unknown
	1023	[b2intt] Show the field ONLY if: [b2intut(1)]<>'1'	Inhibit T-score	text (integer, Min: 0, Max: 99)
	1024	[b2intut] Show the field ONLY if: [b2intt]=""	Inhibit T-Score unknown	checkbox 33 b2intut__33 Unknown
	1025	[b2slfmr] Show the field ONLY if: [b2slmrut(1)]<>'1'	Self-Monitor raw score	text (number)
	1026	[b2slmrut] Show the field ONLY if: [b2slfmr]=""	Self-Monitor raw score unknown	checkbox 33 b2slmrut__33 Unknown

1027	[b2s1fmtt] Show the field ONLY if: [b2s1mtut(1)]<>'1'	Self-Monitor t-score	text (integer, Min: 0, Max: 99)
1028	[b2s1mtut] Show the field ONLY if: [b2s1fmtt]=""	Self-Monitor t-score unknown	checkbox 33 b2s1mtut__33 Unknown
1029	[b2sftrt] Show the field ONLY if: [b2sftrut(1)]<>'1'	Shift raw score	text (number)
1030	[b2sftrut] Show the field ONLY if: [b2sftrt]=""	Shift raw score unknown	checkbox 33 b2sftrut__33 Unknown
1031	[b2sfttt] Show the field ONLY if: [b2sfttut(1)]<>'1'	Shift t-score	text (integer, Min: 0, Max: 99)
1032	[b2sfttut] Show the field ONLY if: [b2sfttt]=""	Shift t-score unknown	checkbox 33 b2sfttut__33 Unknown
1033	[b2ecrt] Show the field ONLY if: [b2ecrut(1)]<>'1'	Emotional Control raw score	text (number)
1034	[b2ecrut] Show the field ONLY if: [b2ecrt]=""	Emotional Control raw score unknown	checkbox 33 b2ecrut__33 Unknown
1035	[b2ectt] Show the field ONLY if: [b2ectut(1)]<>'1'	Emotional Control t-score	text (integer, Min: 0, Max: 99)
1036	[b2ectut] Show the field ONLY if: [b2ectt]=""	Emotional Control t-score unknown	checkbox 33 b2ectut__33 Unknown
1037	[b2intrt] Show the field ONLY if: [b2intrut(1)]<>'1'	Initiate raw score	text (number)
1038	[b2intrut] Show the field ONLY if: [b2intrt]=""	Initiate raw score unknown	checkbox 33 b2intrut__33 Unknown
1039	[b2inttt] Show the field ONLY if: [b2inttut(1)]<>'1'	Initiate t-score	text (integer, Min: 0, Max: 99)
1040	[b2inttut] Show the field ONLY if: [b2inttt]=""	Initiate t-score unknown	checkbox 33 b2inttut__33 Unknown
1041	[b2wmrt] Show the field ONLY if: [b2wmrut(1)]<>'1'	Working Memory raw score	text (number)
1042	[b2wmrut] Show the field ONLY if: [b2wmrt]=""	Working Memory raw score unknown	checkbox 33 b2wmrut__33 Unknown
1043	[b2wmtt] Show the field ONLY if: [b2wmtut(1)]<>'1'	Working Memory t-score	text (integer, Min: 0, Max: 99)
1044	[b2wmtut] Show the field ONLY if: [b2wmtt]=""	Working Memory t-score unknown	checkbox 33 b2wmtut__33 Unknown
1045	[b2port] Show the field ONLY if: [b2porut(1)]<>'1'	Plan/Organize raw score	text (number)
1046	[b2porut] Show the field ONLY if: [b2port]=""	Plan/Organize raw score unknown	checkbox 33 b2porut__33 Unknown

	1047	[b2pott] Show the field ONLY if: [b2potut(1)]<>'1'	Plan/Organize t-score	text (integer, Min: 0, Max: 99)
	1048	[b2potut] Show the field ONLY if: [b2pott]=""	Plan/Organize t-score unknown	checkbox 33 b2potut__33 Unknown
	1049	[b2tmrt] Show the field ONLY if: [b2tmrut(1)]<>'1'	Task-Monitor raw score	text (number)
	1050	[b2tmrut] Show the field ONLY if: [b2tmrt]=""	Task-Monitor raw score unknown	checkbox 33 b2tmrut__33 Unknown
	1051	[b2tmrt] Show the field ONLY if: [b2tmrut(1)]<>'1'	Task-Monitor t-score	text (integer, Min: 0, Max: 99)
	1052	[b2tmrtut] Show the field ONLY if: [b2tmrt]=""	Task-Monitor t-score unknown	checkbox 33 b2tmrtut__33 Unknown
	1053	[b2orgrt] Show the field ONLY if: [b2orgrut(1)]<>'1'	Organization of Materials raw score	text (number)
	1054	[b2orgrut] Show the field ONLY if: [b2orgrt]=""	Organization of Materials raw score unknown	checkbox 33 b2orgrut__33 Unknown
	1055	[b2orgtt] Show the field ONLY if: [b2orgtut(1)]<>'1'	Organization of Materials t-score	text (integer, Min: 0, Max: 99)
	1056	[b2orgtut] Show the field ONLY if: [b2orgtt]=""	Organization of Materials t-score unknown	checkbox 33 b2orgtut__33 Unknown
	1057	[b2brirt] Show the field ONLY if: [b2brirut(1)]<>'1'	Behavioral Regulation Index (BRI) raw score	text (number)
	1058	[b2brirut] Show the field ONLY if: [b2brirt]=""	Behavioral Regulation Index (BRI) raw score unknown	checkbox 33 b2brirut__33 Unknown
	1059	[b2britt] Show the field ONLY if: [b2britut(1)]<>'1'	Behavioral Regulation Index (BRI) t-score	text (integer, Min: 0, Max: 99)
	1060	[b2britut] Show the field ONLY if: [b2britt]=""	Behavioral Regulation Index (BRI) t-score unknown	checkbox 33 b2britut__33 Unknown
	1061	[b2erirt] Show the field ONLY if: [b2erirut(1)]<>'1'	Emotion Regulation Index (ERI) raw score	text (number)
	1062	[b2erirut] Show the field ONLY if: [b2erirt]=""	Emotion Regulation Index (ERI) raw score unknown	checkbox 33 b2erirut__33 Unknown
	1063	[b2eritt] Show the field ONLY if: [b2eritut(1)]<>'1'	Emotion Regulation Index (ERI) t-score	text (integer, Min: 0, Max: 99)
	1064	[b2eritut] Show the field ONLY if: [b2eritt]=""	Emotion Regulation Index (ERI) t-score unknown	checkbox 33 b2eritut__33 Unknown
	1065	[b2crint] Show the field ONLY if: [b2crintut(1)]<>'1'	Cognitive Regulation Index (CRI) raw score	text (number)
	1066	[b2crintut] Show the field ONLY if: [b2crint]=""	Cognitive Regulation Index (CRI) raw score unknown	checkbox 33 b2crintut__33 Unknown

	1067	[b2critt] Show the field ONLY if: [b2critut(1)]<>'1'	Cognitive Regulation Index (CRI) t-score	text (integer, Min: 0, Max: 99)
	1068	[b2critut] Show the field ONLY if: [b2critt]=""	Cognitive Regulation Index (CRI) t-score unknown	checkbox 33 b2critut__33 Unknown
	1069	[b2gecrt] Show the field ONLY if: [b2gecrut(1)]<>'1'	Global Executive Composite (GEC) raw score	text (number)
	1070	[b2gecrut] Show the field ONLY if: [b2gecrt]=""	Global Executive Composite (GEC) raw score unknown	checkbox 33 b2gecrut__33 Unknown
	1071	[b2gectt] Show the field ONLY if: [b2gectut(1)]<>'1'	Global Executive Composite (GEC) t-score	text (integer, Min: 0, Max: 99)
	1072	[b2gectut] Show the field ONLY if: [b2gectt]=""	Global Executive Composite (GEC) t-score unknown	checkbox 33 b2gectut__33 Unknown
	1073	[b2negrt] Show the field ONLY if: [b2negrut(1)]<>'1'	Negativity raw score	text (number)
	1074	[b2negrut] Show the field ONLY if: [b2negrt]=""	Negativity raw score unknown	checkbox 33 b2negrut__33 Unknown
	1075	[b2incrt] Show the field ONLY if: [b2incrut(1)]<>'1'	Inconsistency raw score	text (number)
	1076	[b2incrut] Show the field ONLY if: [b2incrt]=""	Inconsistency raw score unknown	checkbox 33 b2incrut__33 Unknown
	1077	[b2infrt] Show the field ONLY if: [b2infrut(1)]<>'1'	Infrequency raw score	text (number)
	1078	[b2infrut] Show the field ONLY if: [b2infrt]=""	Infrequency raw score unknown	checkbox 33 b2infrut__33 Unknown
	1079	[brief2_teacher_complete]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete
Instrument: BRIEF-P (briefp)				
	1080	[bpdatt]	Section Header: <i>BRIEF-P (Preschool)</i> Date of assessment <i>DD-MM-YYYY</i>	text (date_mdy, Max: today)
	1081	[bpcmp]	Who is completing this form?	radio 1 Mother 2 Father 3 Teacher 99 Other Custom alignment: RH
	1082	[bpothr] Show the field ONLY if: [bpcmp] = '99'	Specify, Other (completing this form)	text

1083	[bpintbl]	Section Header: <i>Index/Scale</i> Raw Score Raw Score Unknown T-Score T-Score Unknown Inhibit {bpinr} {bpinru} {bpint} {bpintu} Shift {bpsftr} {bpsftru} {bpsftt} {bpsfttu} Emotional Control {bpecr} {bpecru} {bpect} {bpectu} Working Memory {bpwmr} {bpwmru} {bpwmt} {bpwmtu} Plan/Organize {bpor} {bporu} {bpot} {bpotu} Inhibitory Self-Control Index (ISCI) {bpiscr} {bpiscru} {bpisct} {bpisctu} Flexibility Index (FI) {bpfir} {bpfiru} {bpfit} {bpfitu} Emergent Metacognition Index (EMI) {bpemir} {bpemiru} {bpemit} {bpemitu} Global Executive Composite (GEC) {bpgecr} {bpgecru} {bpgect} {bpgectu}	descriptive
1084	[bpvltbl]	Section Header: <i>Validity Scale</i> Raw Score Raw Score Unknown Negativity {bpnegr} {bpnegru} Inconsistency {bpincr} {bpincru}	descriptive
1085	[bpinr] Show the field ONLY if: [bpinru(1)]<>'1'	Inhibit raw score	text (number)
1086	[bpinru] Show the field ONLY if: [bpinr]=""	Inhibit raw score unknown	checkbox 33 bpinru__33 Unknown
1087	[bpint] Show the field ONLY if: [bpintu(1)]<>'1'	Inhibit T-score	text (integer, Min: 0, Max: 99)
1088	[bpintu] Show the field ONLY if: [bpint]=""	Inhibit T-Score unknown	checkbox 33 bpintu__33 Unknown
1089	[bpsftr] Show the field ONLY if: [bpsftru(1)]<>'1'	Shift raw score	text (number)
1090	[bpsftru] Show the field ONLY if: [bpsftr]=""	Shift raw score unknown	checkbox 33 bpsftru__33 Unknown
1091	[bpsftt] Show the field ONLY if: [bpsfttu(1)]<>'1'	Shift t-score	text (integer, Min: 0, Max: 99)
1092	[bpsfttu] Show the field ONLY if: [bpsftt]=""	Shift t-score unknown	checkbox 33 bpsfttu__33 Unknown
1093	[bpecr] Show the field ONLY if: [bpecru(1)]<>'1'	Emotional Control raw score	text (number)
1094	[bpecru] Show the field ONLY if: [bpecr]=""	Emotional Control raw score unknown	checkbox 33 bpecru__33 Unknown
1095	[bpect] Show the field ONLY if: [bpectu(1)]<>'1'	Emotional Control t-score	text (integer, Min: 0, Max: 99)
1096	[bpectu] Show the field ONLY if: [bpect]=""	Emotional Control t-score unknown	checkbox 33 bpectu__33 Unknown
1097	[bpwmr] Show the field ONLY if: [bpwmru(1)]<>'1'	Working Memory raw score	text (number)
1098	[bpwmru] Show the field ONLY if: [bpwmr]=""	Working Memory raw score unknown	checkbox 33 bpwmru__33 Unknown
1099	[bpwmt] Show the field ONLY if: [bpwmtu(1)]<>'1'	Working Memory t-score	text (integer, Min: 0, Max: 99)
1100	[bpwmtu] Show the field ONLY if: [bpwmt]=""	Working Memory t-score unknown	checkbox 33 bpwmtu__33 Unknown

	1101	[bppor] Show the field ONLY if: [bpporu(1)]<>'1'	Plan/Organize raw score	text (number)
	1102	[bpporu] Show the field ONLY if: [bppor]=""	Plan/Organize raw score unknown	checkbox 33 bpporu__33 Unknown
	1103	[bppot] Show the field ONLY if: [bppotu(1)]<>'1'	Plan/Organize t-score	text (integer, Min: 0, Max: 99)
	1104	[bppotu] Show the field ONLY if: [bppot]=""	Plan/Organize t-score unknown	checkbox 33 bppotu__33 Unknown
	1105	[bpiscr] Show the field ONLY if: [bpiscru(1)]<>'1'	Inhibitory Self-Control (ISCI) raw score	text (number)
	1106	[bpiscru] Show the field ONLY if: [bpiscr]=""	Inhibitory Self-Control (ISCI) raw score unknown	checkbox 33 bpiscru__33 Unknown
	1107	[bpisct] Show the field ONLY if: [bpisctu(1)]<>'1'	Inhibitory Self-Control (ISCI) t-score	text (integer, Min: 0, Max: 99)
	1108	[bpisctu] Show the field ONLY if: [bpisct]=""	Inhibitory Self-Control (ISCI) t-score unknown	checkbox 33 bpisctu__33 Unknown
	1109	[bpfir] Show the field ONLY if: [bpfiru(1)]<>'1'	Flexibility Index (FI) raw score	text (number)
	1110	[bpfiru] Show the field ONLY if: [bpfir]=""	Flexibility Index (FI) raw score unknown	checkbox 33 bpfiru__33 Unknown
	1111	[bpfit] Show the field ONLY if: [bpfitu(1)]<>'1'	Flexibility Index (FI) t-score	text (integer, Min: 0, Max: 99)
	1112	[bpfitu] Show the field ONLY if: [bpfit]=""	Flexibility Index (FI) t-score unknown	checkbox 33 bpfitu__33 Unknown
	1113	[bpemir] Show the field ONLY if: [bpemiru(1)]<>'1'	Emergent Metacognition Index (EMI) raw score	text (number)
	1114	[bpemiru] Show the field ONLY if: [bpemir]=""	Emergent Metacognition Index (EMI) raw score unknown	checkbox 33 bpemiru__33 Unknown
	1115	[bpemit] Show the field ONLY if: [bpemitu(1)]<>'1'	Emergent Metacognition Index (EMI) t-score	text (integer, Min: 0, Max: 99)
	1116	[bpemitu] Show the field ONLY if: [bpemit]=""	Emergent Metacognition Index (EMI) t-score unknown	checkbox 33 bpemitu__33 Unknown
	1117	[bpgecr] Show the field ONLY if: [bpgecru(1)]<>'1'	Global Executive Composite (GEC) raw score	text (number)
	1118	[bpgecru] Show the field ONLY if: [bpgecr]=""	Global Executive Composite (GEC) raw score unknown	checkbox 33 bpgecru__33 Unknown
	1119	[bpgect] Show the field ONLY if: [bpgectu(1)]<>'1'	Global Executive Composite (GEC) t-score	text (integer, Min: 0, Max: 99)
	1120	[bpgectu] Show the field ONLY if: [bpgect]=""	Global Executive Composite (GEC) t-score unknown	checkbox 33 bpgectu__33 Unknown

	1121	[bpnegr] Show the field ONLY if: [bpnegru(1)]<>'1'	Negativity raw score	text (number)
	1122	[bpnegru] Show the field ONLY if: [bpnegr]=''	Negativity raw score unknown	checkbox 33 bpnegru__33 Unknown
	1123	[bpincru] Show the field ONLY if: [bpincru(1)]<>'1'	Inconsistency raw score	text (number)
	1124	[bpincru] Show the field ONLY if: [bpincru]=''	Inconsistency raw score unknown	checkbox 33 bpincru__33 Unknown
	1125	[briefp_complete]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete

Instrument: BRIEF-A (briefa)

	1126	[badat]	Section Header: <i>BRIEF-A</i> Date of assessment <i>DD-MM-YYYY</i>	text (date_mdy, Max: today)
	1127	[bawho]	Who is completing this form?	radio 1 Self 2 Informant
	1128	[baintbl]	Section Header: <i>Index/Scale</i> Raw Score Raw Score Unknown T-Score T-Score Unknown Inhibit {bainr} {bainru} {baint} {baintu} Shift {basftr} {basftru} {basftt} {basfttu} Emotional Control {baecr} {baecru} {baect} {baectu} Self-Monitor {baslfmr} {baslfmru} {baslfmt} {baslfmtu} Behavioral Regulation Index (BRI) {babrir} {babriru} {babrit} {babritu} Initiate {baintr} {baintru} {baintt} {bainttu} Working Memory {bawmr} {bawmru} {bawmt} {bawmtu} Plan/Organize {bapor} {baporu} {bapot} {bapotu} Task-Monitor {batmr} {batmru} {batmt} {batmtu} Organization of Materials {baorgr} {baorgru} {baorgt} {baorgtu} Metacognition Index (MI) {bamir} {bamiru} {bamit} {bamitu} Global Executive Composite (GEC) {bagecr} {bagecru} {bagect} {bagectu}	descriptive
	1129	[bavltbl]	Section Header: <i>Validity Scale</i> Raw Score Raw Score Unknown Negativity {banegr} {banegru} Infrequency {bainfr} {bainfru} Inconsistency {baincr} {baincru}	descriptive
	1130	[bainrr] Show the field ONLY if: [bainru(1)]<>'1'	Inhibit raw score	text (number, Min: 6, Max: 30)
	1131	[bainru] Show the field ONLY if: [bainrr]=''	Inhibit raw score unknown	checkbox 33 bainru__33 Unknown
	1132	[baint] Show the field ONLY if: [baintu(1)]<>'1'	Inhibit T-score	text (integer, Min: 36, Max: 106)
	1133	[baintu] Show the field ONLY if: [baint]=''	Inhibit T-Score unknown	checkbox 33 baintu__33 Unknown
	1134	[basftr] Show the field ONLY if: [basftru(1)]<>'1'	Shift raw score	text (number, Min: 6, Max: 30)
	1135	[basftru] Show the field ONLY if: [basftr]=''	Shift raw score unknown	checkbox 33 basftru__33 Unknown
	1136	[basftt] Show the field ONLY if: [basfttu(1)]<>'1'	Shift t-score	text (integer, Min: 36, Max: 106)

	1137	[basfttu] Show the field ONLY if: [basftt]=""	Shift t-score unknown	checkbox 33 basfttu__33 Unknown
	1138	[baecr] Show the field ONLY if: [baecru(1)]<>'1'	Emotional Control raw score	text (number, Min: 6, Max: 30)
	1139	[baecru] Show the field ONLY if: [baecr]=""	Emotional Control raw score unknown	checkbox 33 baecru__33 Unknown
	1140	[baect] Show the field ONLY if: [baectu(1)]<>'1'	Emotional Control t-score	text (integer, Min: 36, Max: 106)
	1141	[baectu] Show the field ONLY if: [baect]=""	Emotional Control t-score unknown	checkbox 33 baectu__33 Unknown
	1142	[baslfr] Show the field ONLY if: [baslmru(1)]<>'1'	Self-Monitor raw score	text (number, Min: 6, Max: 30)
	1143	[baslmru] Show the field ONLY if: [baslfr]=""	Self-Monitor raw score unknown	checkbox 33 baslmru__33 Unknown
	1144	[baslfrt] Show the field ONLY if: [baslmtu(1)]<>'1'	Self-Monitor t-score	text (integer, Min: 36, Max: 106)
	1145	[baslmtu] Show the field ONLY if: [baslfrt]=""	Self-Monitor t-score unknown	checkbox 33 baslmtu__33 Unknown
	1146	[babrir] Show the field ONLY if: [babriru(1)]<>'1'	Behavioral Regulation Index (BRI) raw score	text (number, Min: 30, Max: 120)
	1147	[babriru] Show the field ONLY if: [babrir]=""	Behavioral Regulation Index (BRI) raw score unknown	checkbox 33 babriru__33 Unknown
	1148	[babrit] Show the field ONLY if: [babritu(1)]<>'1'	Behavioral Regulation Index (BRI) t-score	text (integer, Min: 35, Max: 116)
	1149	[babritu] Show the field ONLY if: [babrit]=""	Behavioral Regulation Index (BRI) t-score unknown	checkbox 33 babritu__33 Unknown
	1150	[baintr] Show the field ONLY if: [baintru(1)]<>'1'	Initiate raw score	text (number, Min: 6, Max: 30)
	1151	[baintru] Show the field ONLY if: [baintr]=""	Initiate raw score unknown	checkbox 33 baintru__33 Unknown
	1152	[baintt] Show the field ONLY if: [bainttu(1)]<>'1'	Initiate t-score	text (integer, Min: 36, Max: 106)
	1153	[bainttu] Show the field ONLY if: [baintt]=""	Initiate t-score unknown	checkbox 33 bainttu__33 Unknown
	1154	[bawmr] Show the field ONLY if: [bawmru(1)]<>'1'	Working Memory raw score	text (number, Min: 6, Max: 30)
	1155	[bawmru] Show the field ONLY if: [bawmr]=""	Working Memory raw score unknown	checkbox 33 bawmru__33 Unknown
	1156	[bawmt] Show the field ONLY if: [bawmtu(1)]<>'1'	Working Memory t-score	text (integer, Min: 36, Max: 106)

1157	[bawmtu] Show the field ONLY if: [bawmt]=""	Working Memory t-score unknown	checkbox 33 bawmtu__33 Unknown
1158	[bapor] Show the field ONLY if: [baporu(1)]<>'1'	Plan/Organize raw score	text (number, Min: 6, Max: 30)
1159	[baporu] Show the field ONLY if: [bapor]=""	Plan/Organize raw score unknown	checkbox 33 baporu__33 Unknown
1160	[bapot] Show the field ONLY if: [bapotu(1)]<>'1'	Plan/Organize t-score	text (integer, Min: 36, Max: 106)
1161	[bapotu] Show the field ONLY if: [bapot]=""	Plan/Organize t-score unknown	checkbox 33 bapotu__33 Unknown
1162	[batmr] Show the field ONLY if: [batmru(1)]<>'1'	Task-Monitor raw score	text (number, Min: 6, Max: 30)
1163	[batmru] Show the field ONLY if: [batmr]=""	Task-Monitor raw score unknown	checkbox 33 batmru__33 Unknown
1164	[batmt] Show the field ONLY if: [batmtu(1)]<>'1'	Task-Monitor t-score	text (integer, Min: 36, Max: 106)
1165	[batmtu] Show the field ONLY if: [batmt]=""	Task-Monitor t-score unknown	checkbox 33 batmtu__33 Unknown
1166	[baorgr] Show the field ONLY if: [baorgru(1)]<>'1'	Organization of Materials raw score	text (number, Min: 6, Max: 30)
1167	[baorgru] Show the field ONLY if: [baorgr]=""	Organization of Materials raw score unknown	checkbox 33 baorgru__33 Unknown
1168	[baorgt] Show the field ONLY if: [baorgtu(1)]<>'1'	Organization of Materials t-score	text (integer, Min: 36, Max: 106)
1169	[baorgtu] Show the field ONLY if: [baorgt]=""	Organization of Materials t-score unknown	checkbox 33 baorgtu__33 Unknown
1170	[bamir] Show the field ONLY if: [bamiru(1)]<>'1'	Metacognition Index (MI) raw score	text (number, Min: 30, Max: 120)
1171	[bamiru] Show the field ONLY if: [bamir]=""	Metacognition Index (MI) raw score unknown	checkbox 33 bamiru__33 Unknown
1172	[bamit] Show the field ONLY if: [bamitu(1)]<>'1'	Metacognition Index (MI) t-score	text (integer, Min: 35, Max: 116)
1173	[bamitu] Show the field ONLY if: [bamit]=""	Metacognition Index (MI) t-score unknown	checkbox 33 bamitu__33 Unknown
1174	[bagecr] Show the field ONLY if: [bagecru(1)]<>'1'	Global Executive Composite (GEC) raw score	text (number, Min: 70, Max: 210)
1175	[bagecru] Show the field ONLY if: [bagecr]=""	Global Executive Composite (GEC) raw score unknown	checkbox 33 bagecru__33 Unknown
1176	[bagect] Show the field ONLY if: [bagectu(1)]<>'1'	Global Executive Composite (GEC) t-score	text (integer, Min: 34, Max: 119)

	1177	[bagectu] Show the field ONLY if: [bagectu]=""	Global Executive Composite (GEC) t-score unknown	checkbox 33 bagectu__33 Unknown
	1178	[banegru] Show the field ONLY if: [banegru(1)]<>'1'	Negativity raw score	text (number)
	1179	[banegru] Show the field ONLY if: [banegr]=""	Negativity raw score unknown	checkbox 33 banegru__33 Unknown
	1180	[bainfru] Show the field ONLY if: [bainfru(1)]<>'1'	Infrequency raw score	text (number)
	1181	[baincru] Show the field ONLY if: [baincru(1)]<>'1'	Inconsistency raw score	text (number)
	1182	[baincru] Show the field ONLY if: [baincr]=""	Inconsistency raw score unknown	checkbox 33 baincru__33 Unknown
	1183	[bainfru] Show the field ONLY if: [bainfr]=""	Infrequency raw score unknown	checkbox 33 bainfru__33 Unknown
	1184	[briefa_complete]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete
Instrument: REFERENCE ONLY - CDASH Guide and Programming Standards (reference_only_cdash_guide_and_programming_standar)				
	1185	[inst01]	***DO NOT INCLUDE THIS FIELD WITH PRODUCTION DATABASES*** This form is only intended as instructional information for the individual building the database. This form should be deleted from any database prior to moving to production.	descriptive Field Annotation: @HIDDEN
	1186	[dmcdash]	CDASH Standards: https://cchmc.sharepoint.com/:f:/s/DMACHub/EtdeCdeIzjFwBG7zxmPkXhN3BI6BOAY_Qfw?e=MdRVh2	descriptive Field Annotation: @HIDDEN
	1187	[dmprog]	Programming Standards:(follow CDASH if conflicting guidance is provided) https://cchmc.sharepoint.com/:f:/s/DMACHub/EizjaFfGA9ZHnTyVCijFwBG7zxmPkXhN3BI6BOAY_Qfw?e=uD4N8h	descriptive Field Annotation: @HIDDEN
	1188	[dmnotes]		descriptive
	1189	[reference_only_cdash_guide_and_programming_standar_complete]	Section Header: <i>Form Status</i> Complete?	dropdown 0 Incomplete 1 Unverified 2 Complete