



ChiLDReNLink: PROBE

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 Study: PROBE ▼

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Print Questionnaire

Thank you for completing the questionnaire. The questionnaire will drop off your task list, you can still access it via the iTask page. Click the printer icon to view the questionnaire in print format.



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Form 24 F/U Med History

Date of Exam

1 / /
 Month Day Year

This form is to be completed by interview with a subject's parent(s) or guardian(s). Please indicate below the primary source of information for this form (check all that apply):

3 Mother
 Father
 Guardian(s)
 Other (specify):
 Medical Record

Has your child had any (other) visits with a nurse, nurse practitioner, physician assistant, family practitioner, pediatrician, or hospital since their last follow-up visit?

1 --
 No
 Yes

Will the child have any imaging, surgery or interventional radiology as a result of this clinical visit?

2 --
 No
 Yes

See 24 F_U Medical Hx to HP

Please describe each of the visits your child has had with a health professional during this period in the table below.

| 1 | Date of Visit | Type of Visit | Visit Relevant to Study? | Medical Record | Medical Record Received or Available? |
|---|---------------|---------------|--------------------------|----------------|---------------------------------------|
|---|---------------|---------------|--------------------------|----------------|---------------------------------------|

Sentinal events to be abstracted

1 --
 No
 Yes (Complete Form 25 F/U Sentinal Events)

Surgeries/procedures to be abstracted

2 --
 No
 Yes (Complete Form 26 F/U Surgery)

3 Visits with interventional radiology to be abstracted

| | |
|---|---|
| | <input checked="" type="radio"/> -- <input type="radio"/> No <input type="radio"/> Yes (Complete Form 27 F/U Imaging) |
| 4 | Liver biopsy or transplant was performed at the study site <input checked="" type="radio"/> -- <input type="radio"/> No <input type="radio"/> Yes |
| 1 | <p>Checking "Yes" to this question indicates that the current questionnaire or task has been completed with all available information. It will be removed from the Task list, but will remain available from the iTask through the CENSUS.</p> <p>This questionnaire or task has been completed with all available data and should be submitted to the Data Coordinating Center:</p> <input checked="" type="radio"/> -- <input type="radio"/> Yes |