

FUNDUS PHOTOGRAPH Reading Center

University of Wisconsin – Madison
Department of Ophthalmology and Visual Sciences

406 Science Drive, Suite 400
Madison, WI 53711-1068

PHONE: (608) 263-4538
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21 June 2004

I. M. Sample, M.D.
Eye Doctors Are Us
123 See Well Street
North Pole, AK 99999

Dear Dr. Sample:

I write to ask for your help in collecting information from your records of one of your patients who is participating in a study of diabetic retinopathy. The National Eye Institute and the National Institute of Diabetes & Digestive & Kidney Diseases are conducting a study to examine genetic linkages to diabetic nephropathy and diabetic retinopathy, independently and in combination. The Family Investigation of Nephropathy in Diabetes (FIND) Eye Study is being conducted at 7 principal sites in the US. However, because it is a family study, siblings and parents who have diabetes are invited to participate. We anticipate that many of them will live at a distance from the principal sites and we are asking for your help to accommodate one of these individuals. **[PIC location]**, one of the principal sites for the study, has recruited one of your patients, **[who is unable or unwilling to be scheduled for a FIND eye exam and fundus photographs, but is willing to have information from your records transmitted to us. OR who is deceased, but consented to release of information from records.]** I hope you will be willing to complete the attached form. If so, please use the patient's most recent visit to complete as much of the form as possible, but also use additional information from previous visits as needed. Our records indicate the most recent eye exam was **[date]**

The examination form asks for some patient history, a visual acuity with current correction and/or pinhole using your usual chart, intraocular pressure, and a fundus exam. History of past retinal photocoagulation is of particular interest. The NEI has made funds available to reimburse you for the costs of completing this form from your records (\$50).

Enclosed is a packet with the following items needed:

- FIND study synopsis
- FIND Transmittal Log, Eye Exam Form, and Invoice for FIND ID #**[999999999]**.
- Preaddressed mailing envelope

The completed Transmittal Log, Eye Exam Form, and Invoice should be sent to the Fundus Photograph Reading Center in the enclosed envelope. Please allow 4 weeks for the University of Wisconsin to process payment of your invoice. If you have any questions about the exam or invoice payment, please call Kathy Glander, the FIND project manager, at 608-263-6983. Since the Reading Center is masked to the identity of the patient, please contact **[coordinator name]**, the **[PIC]** study coordinator at **[phone #]** with questions needing to reference the patient's identity.

Thank you very much for your help.

Sincerely,



Matthew D. Davis, M.D.