

HALT-C Trial

**Serum TGF-B1 – Serum Fibrosis Markers AS**

Form #100 Version B: 12/03/2003

**SECTION A: GENERAL INFORMATION**

- A1. Affix ID Label Here →
- A2. Patient initials: \_\_\_\_ \_
- A3. Visit Number: \_\_\_\_\_
- A4. Date Form Completed: MM / DD / YYYY \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_
- A5. Initials of person completing form: \_\_\_\_ \_

**SECTION B: RESULTS OF SERUM FIBROSIS MARKER TGF-B1 TEST**

- B1. Date testing performed: (MM / DD / YYYY) \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_
- B2. Serum TGF-B1 level: \_\_\_\_\_. \_\_\_\_ ng/ml