

HALT-C Trial

Serum Iron - Iron & HFE Gene Mutation AS

Form # 183 Version A: 06/15/2000

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: SERUM IRON

B1. Date of blood draw: (MM/DD/YYYY) __ __ / __ __ / _____

B2. Iron __ __ __ (µg/dL)

B3. Total iron binding capacity __ __ __ (µg/dL)

B4. Serum Ferritin __ __ __ __ (ng/mL)