HALT-C Trial Q x Q

Screening Biopsy Evaluation

Form # 50 Version C: 10/01/2001

Purpose of Form #50: The Screening Biopsy Evaluation Form is used by the local pathologist to record the results of the HALT-C Trial screening biopsy at each clinical center.

When to complete Form #50: This form should be completed and data entered as part of the HALT-C screening process.

Note on dates:
- All dates on this form should be entering using MM/DD/YYYY format.
- In this format, Enter the 2-digit number for the month in the first 2 spaces provided (i.e., January = "01", February ="02", etc.), the 2-digit number for the day of the month in the second 2 spaces provided, and the 4-digit number for the year in the final 4 spaces provided.

SECTION A: GENERAL INFORMATION

A1. Affix the patient ID label in the space provided.
- If the label is not available, record the ID number legibly.

A2. Enter the patient's initials exactly as recorded on the Trial ID Assignment Form #1.

A3. This form can only be used for the screening (S00) visit.

A4. Record the date Sections A and B were completed by the Study Coordinator using MM/DD/YYYY format.

A5. Enter the initials of the person completing Sections A and B of this form.

SECTION B: TO BE COMPLETED BY STUDY COORDINATOR

B1. Record the date that the most recent course of treatment with interferon ended.

- If the patient is an Express patient and is still on treatment during Screening, please record 09/09/0909 and leave a pending edit. Enter the stop date once the patient comes off interferon treatment.
- The date that the most recent course of treatment with interferon ended should correspond with treatment information recorded on Trial ID Assignment Form #1: Question C1 (start date of most recent adequate course of treatment with any Interferon) and Question C5 (total number of weeks this course of Interferon given).

B2. Record the date that this biopsy was performed using MM/DD/YYYY format.

B3. Record whether the biopsy was performed specifically for entry into the HALT-C Trial. If the answer is YES, circle 1. If the answer is NO, circle 2.

B4. See the box below regarding Hospital Accession #.

Per HALT-C Communication #43 dated 09/30/2003:
Changes have been made in the way local biopsy forms (Forms 50 and 52) are data entered. These changes were made in order to comply with the new HIPAA regulations.

From now on, you will not be able to data enter the hospital accession ID recorded on Form 50, Screening Biopsy, and Form 52, Clinical Center Biopsy. You will get an error message stating -9 is the only acceptable value for any question that asks for the accession ID. Data enter -9 in place of the accession ID.

Do not write the Hospital Accession # of the biopsy (B4 on Form # 50, B2 on Form # 52). Mark it with a -9. The Hospital Accession # should be available on the source documentation of the pathology report.

In addition, all accession IDs previously entered in the DMS have been blanked out, and will appear as "-9" if you open a completed form to look at the data.

SECTION C: TO BE COMPLETED BY THE LOCAL PATHOLOGIST

C1. Enter the initials of the HALT-C pathologist who reviewed the biopsy and completed this section of the form.

C2. Record the date that this biopsy was read.

C3a. Record the Ishak fibrosis score of this biopsy.

The Masson stain will be used to determine the Ishak fibrosis score. The criteria for scoring can be found in: Ishak KG, et al.: Histological grading and staging of chronic hepatitis. J Hepatol 1995; 22:696-699.

- If the Ishak fibrosis score is 0 or 1, the patient is not eligible for the HALT-C Trial.
- If the Ishak fibrosis score is a 2, continue to Question C3b. Patients with an Ishak score of 2 are eligible if they have a previous biopsy of 3 or greater.
- If the Ishak fibrosis score is 3 or greater, skip to Question C4.

C3b. Record whether the patient has a previous biopsy with an Ishak fibrosis score of 3 or greater.

- If the answer is YES, circle 1 and complete Questions C3c1 and C3c2.
- If the answer is NO, circle 2. The patient is not eligible for the HALT-C Trial.

C3c1. Record the date of the previous biopsy. If there is more than one previous biopsy, complete additional rows of the table.

C3c2. Record the Ishak fibrosis score of the previous biopsy.

C3c3. See the box above regarding Hospital Accession #.

C4. Record if there is evidence of alcoholic or nonalcoholic steatohepatitis.

Steatohepatitis is recognized using the H&E stain plus the Masson for fibrosis.

- If the answer is YES, circle 1 and continue to Question C5.
- If the answer is NO, circle 2 and skip to Question C6.

C5. Record whether the steatohepatitis is severe.

- If the answer is YES, circle 1. The patient is not eligible for the HALT-C Trial.
- If the answer is NO, circle 2 and continue to Question C6.

C6. Record if there is evidence of 3+ or 4+ hepatocellular stainable iron.

Iron grading will be done using a Perl's or Mallory's Prussian blue stain. The grading criteria, which can be found in Table 1 of Jay Lefkowitch's chapter (p. 299) of the 1998 AASLD syllabus, are:

Grade	Histological identification and magnification
0	Granules absent or barely discernable at any power
1	Granules not visible at low power, but seen at higher objectives in the immediate periportal region
2	Granules visible at low power in periportal region, occupying part of acinar zone 1
3	Granules readily visible at low power, occupying a large majority of the acinus, with some sparing of zone 3
4	Blue staining visible with the naked eye and at all magnifications throughout all acinar zones

- If the answer is PRESENT, circle 1. The patient may not eligible for the HALT-C trial.
- If the answer is ABSENT, circle 2 and continue to Question C7.

For patients with 3+ or 4+ stainable iron:

- In order to determine if this patient has hemachromatosis or secondary iron overload, the value of serum ferritin or iron saturation (serum iron/IBC x 100%) needs to be evaluated.
- If the patient has elevated serum ferritin or iron saturation greater than 50%, the patient needs to undergo HFE genetic testing.
- Patients homozygous for C282Y, or positive for either C282Y or H63D, are not eligible for the HALT-C trial.
- Patients negative for HFE testing may enter the HALT-C Trial after undergoing phlebotomy therapy to remove hepatic iron, and then having a repeat liver biopsy that demonstrates less than 3+ hepatic iron.

C7. Record if liver histology is consistent with alpha-1-antitrypsin deficiency.

The PAS diastase stain is used to recognize alpha-1-antitrypsin globules.

- If alpha-1-antitrypsin globules are PRESENT, circle 1. The patient may not eligible for the HALT-C trial.
- If the answer is ABSENT, circle 2 and continue to Question C8.

If alpha-1-antitrypsin globules are present:

- Clinicians should check serum alpha-1-antitrypsin.
- Patients with confirmed alpha-1-antitrypsin deficiency are not eligible for the HALT-C Trial.

C8. Record the number of unstained slides available for shipment to AFIP.

- **Ten unstained slides should be sent to the DCC for blinding.**
- Slide boxes will be supplied to Study Coordinators for shipment of slides to the DCC.
- The DCC will blind the unstained slides and forward them to AFIP.
- AFIP will stain the slides in preparation for review by the Central Pathology Committee.

C9. Record the total number of slides that will remain at your center following shipment of the 10 unstained slides to the DCC.

- If there is a problem with the shipment of the unstained slides (i.e.: shipment lost or slides broken), we may request that these slides be sent to the AFIP to allow for central review.

C10. Record if the block is available at your center. If the answer is YES, circle 1. If the answer is NO, circle 2.

C11. Is there source documentation available? Please attach available source documentation.

A source document is a part of the patient's medical record which serves to validate data collected on the data entry forms. The appropriate source documents should be attached to this form with all identifying patient information, such as patient name and medical record number blacked out. The HALT-C trial requires the following source documents for each endoscopy:

- If the answer is YES, circle 1 and attach available source documentation.
- If the answer is NO, circle 2.