F100

Hemodialysis Fistula Maturation Study (HFM/MANVAS Studies) Clinical Center / Principal Investigator Form (Form # 100)

1.	1=1 2=1	inical Center Number Boston University Medical Center University of Cincinnati University of Florida	4=University of Texas Southwestern 5=University of Utah 6=University of Washington	_		
Acce 2.	Access Coordination at this Clinical Center 2. At this clinical center, are nephrologists involved with decisions on when to refer patients to surgery for vascular access placement? (0=no, 1=yes)					
3.		At this clinical center, are nephrologists involved with decisions on where o refer patients to surgery for vascular access placement? (0=no, 1=yes)				
4.	(0=	Type of officially designated vascular access coordinator at this facility? (0=none, 1=nephrology, 2=surgical, 3=both)				
Prin 5.	Principal Investigator 5. Clinical Center Principal Investigator					
	a.	Last name		PI_LNAME		
	b.	First name		PI_FNAME		
	c.	HFM Study username (The study username will be popul	ated automatically.)	PI_USERID		
	d.	E-mail Address		PI_EMAIL		
	e.	Phone Number		PI_PHONE		
	f.	Extension		PI_EXT		
	g.	g. Fax NumberPI_F		PI_FAX		
	h.	h. Federal Express Shipping Address				
		Line 1:		PI_FDEX_ADDR1		
		Line 2:		PI_FDEX_ADDR2		
		Line 3:		PI_FDEX_ADDR3		
		Line 4:		PI_FDEX_ADDR4		
		City:		PI_FDEX_CITY		
		State:		PI_FDEX_ST		
		Zip code:		PI_FDEX_ZIP		
	i.	Active status of the Principal	Investigator (0=no longer active, 1=a	active)PI_STATUS		

j. If q.5i = 0 (no longer active), date the PI became inactive (mm/dd/yyyy)..... PI INACTIVE DT **Primary IRB** HFM Study ID of this IRB...... IRB_ID Use Code list (The list will show 101 for primary Boston IRB, 201 for primary Cincinnati IRB, 301 for primary Florida IRB, 401 for primary UTSW IRB, 501 for primary Utah IRB, 601 for primary UW IRB, 801 for primary Alabama IRB 7. 8. 9. Date Protocol V1.1 of 12/22/09 submitted to IRB (mm/dd/yyyy)IRB_SUB_V1_DT Date of IRB approval of Protocol V1.1 (mm/dd/yyyy)...... IRB APP V1 DT Note: Send one blank copy of the final IRB-approved consent form along with a copy of the IRB approval letter to 1) Rebekah Rasooly at the NIDDK Repository and 2) the Data Coordinating Center. Complete form 130 when NIDDK approves the consent form. a. Did the IRB approve plans for collection of repository serum/plasma specimens (0=no, 1=yes) IRB_BLD 11. b. If yes, date of approval of plans for collection of repository serum/plasma specimens (mm/dd/yyyy)...... IRB_BLD_DT c. If no, reason why there is no IRB approval for this.........................IRB BLD RSN 1 =Approval pending. 2 = IRB did not approve repository serum/plasma specimen collection protocol/consent form a. Did the IRB approve plans for collection of repository DNA (0=no, 1=yes)IRB DNA 12. b. If yes, date of IRB approval for collection of $DNA \ (mm/dd/yyyy) \IRB_DNA_DT$ c. If no, reason why there is no IRB approval for this......IRB DNA RSN 1 = Approval pending2 = IRB did not approve the repository DNA collection protocol/consent form 13. a. Did the IRB approve plans for collection of repository vein tissue (0=no, 1=yes)IRB VEIN b. If yes, date of IRB approval for collection c. If no, reason why there is no IRB approval for this......IRB_VEIN_RSN 1 = Approval pending2 = IRB did not approve the repository vein tissue collection protocol/consent form Clinical Center Practices for post-op follow up and ultrasounds Does this clinical center have a usual practice for the number and frequency of 0 = no usual practice for number and frequency of post-op visits to surgeon 1 = 1 visit. This post-op visit with the surgeon is done within the first 2 weeks after surgery 2 = 1 visit. This post-op visit with the surgeon is done 2 to 4 weeks after surgery 3 = 1 visit. This post-op visit with the surgeon is done more than 4 weeks after surgery. 4 = 2 or more visits. One visit at about 2 weeks, one visit at about 6 weeks, with continued

visits until access is usable. 5 = 2 or more visits. Pattern other than the pattern described above. Does this clinical center have any usual post-op protocol? (0=no, it varies; 1=yes) CC_PROTOCOL_YN 16. 17. If q.16 is answered 1=yes, what is included in this clinical center's post-op protocol? (Answer items a-d with 0=never or almost never, 1=sometimes, 2=always or almost always) b. Patient is prescribed post-op antiplatelet agents to assist in patency.......CC_APLT_ASSIST c. Patient is prescribed anticoagulants, such as Warfarin, to assist in patency CC_NONAPLT_ASSIST d. Patient is prescribed post-op drugs other than antiplatelets and antithrombotic agents Does this clinical center have a routine policy on 18. 0 = the policy is that no routine post-op ultrasound is done 1 = routine post-op ultrasound done about one week post surgery 2 = routine post-op ultrasound done about two weeks post surgery 3 = routine post-op ultrasound done about three weeks post surgery 4 = routine post-op ultrasound done about four weeks post surgery 5 = routine post-op ultrasound done about five week post surgery 6 = routine post-op ultrasound done about six weeks post surgery 7 = one routine post-op ultrasound done after some other time interval 8 = more than one routine post-op ultrasound is done **Section for PI Surgeon(s)** If no, skip to Item 200. If yes, complete the PI Surgeon data section below. PI Surgeon's year of birth (yyyy)......PI_YOB 21. 22. Month/year PI Surgeon completed residency (mm/yyyy)...... PI_RESIDENT_DT 23. Does this surgeon have sub-specialty board certification(s) (0=no, 1=yes) PI_SUBSPEC_CERT If Q. 23 = yes, what sub-specialty(ies) is the surgeon board certified for? 24. b. Month/year PI Surgeon completed general surgery training (mm/yyyy) PI_SUBSPEC_GEN_DT d. Month/year PI Surgeon completed vascular surgery training (mm/yyyy) PI_SUBSPEC_VAS_DT f. Month/year PI Surgeon completed cardiothoracic surgery training (mm/yyyy)PI SUBSPEC CT DT

Other (0=no, 1=yes)PI SUBSPEC OTH

h. Month/year PI Surgeon completed transplant surgery training (mm/yyyy)PI SUBSPEC TX DT

	If other, please specify	PI_SUBSPEC_OTH_SPEC
	j. Month/year PI Surgeon completed other surg	ery training (mm/yyyy) PI_SUBSPEC_OTH_DT
25.	Outside of HFM Study, does this PI Surgeon general ultrasound mapping?	·
26.	Outside of HFM Study, does this PI Surgeon general ultrasounds of any kind?(0=no, 1=selectively, 2=routinely)	·
27.	What is this PI Surgeon's usual routine for post- 0 = the policy is that no routine post-op ultrasound is done 1 = one post-op ultrasound done about one week post surg 2 = one post-op ultrasound done about two weeks post surg 3 = one post-op ultrasound done about four weeks post surg 4 = one post-op ultrasound done about four weeks post surg 5 = one post-op ultrasound done about five week post surg 6 = one post-op ultrasound done about six weeks post surg 7 = one post-op ultrasound done after some other time into 8 = more than one routine post-op ultrasound is done	ery gery rgery gery ery ery
28. \	What is the PI's usual practice for the number and 0 = no usual practice for number and frequency of post-op 1 = 1 visit. This post-op visit with the PI Surgeon is done 2 = 1 visit. This post-op visit with the PI Surgeon is done 3 = 1 visit. This post-op visit with the PU Surgeon is done 4 = 2 or more visits. One at about 2 weeks, one at about 6 5 = 2 or more visits. Pattern other than the pattern describe What is the post-op protocol that this PI Surgeon Respond with 0=never or almost never, 1=sometimes, 2=a	visits to PI Surgeon within the first 2 weeks after surgery 2 to 4 weeks after surgery more than 4 weeks after surgery. weeks, continued visits until access is usable ad above. follows?
	a. Patient is instructed to squeeze a ball	
	b. Patient is prescribed post-op antiplatelet age	nts to assist in patency PI_APLT_ASSIST
	c. Patient is prescribed post-op drugs other than	antiplatelets
	to assist in patency	PI_NONAPLT_ASSIST
	d. Patient is prescribed post-op drugs other than	
30.	Approximately how many new AVFs (not grafts	PI_NONAPLT_OTH
30.	AVFs from grafts) did this PI Surgeon create in	
31.	Approximately how many new AVFs (not grafts	, revisions or converted
22	AVFs from grafts) did this PI Surgeon create in	
32.	Approximately how many new AVFs (not grafts AVFs from grafts) did this PI Surgeon create in	
	Date this form completed (mm/dd/yyyy) Username of person completing / reviewing com	
	Clinical Center Use Only Date Form Entered (mm/dd/yyyy)// Username of person entering this form	