

F550

Hemodialysis Fistula Maturation Study (HFM Study) Outcome Committee Maturation Review Form (Form # 550)

This form is completed by the DCC staff as a result of direct input from the Outcome Committee.

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1. Identification Number

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2. Alphacode

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3. Visit Number

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4. Date primary outcome fistula status achieved:
(mm/dd/yyyy)

5. Date of Outcome Committee Review (mm/dd/yyyy)..... REVIEW_DT

6. Primary outcome fistula status..... PRIM_STATUS

- 1=successful maturation per protocol
- 2=successful maturation by Outcome Committee judgment
- 3=maturation failure per protocol
- 4=maturation failure by Outcome Committee judgment
- 5=abandonment, past 3 months post abandonment follow up
- 6=transplant, past 3 months post-transplant follow up
- 7=switched modality, past 3 months post-peritoneal dialysis follow up
- 8=lost to follow-up prior maturation assessment completion
- 9=died prior to maturation assessment completion
- 10=unable to determine maturation because patient doesn't allow use of study fistula
- 11=unable to determine maturation – the participant has not started maintenance hemodialysis by the end of the study
- 12=unable to determine maturation because participant was lost to follow-up for extensive period of time during protocol maturation assessment period

7. Summary of successful maturation or maturation failure by Outcome Committee judgment
SUMMARY_COMM

200. Date this form completed (mm/dd/yyyy)..... COMP_DT

201. Username of person completing/reviewing completeness of this form.....COMP_USER

Clinical Center Use Only	
Date Form Entered (mm/dd/yyyy) __ __/__ __/__ __ __	ENTER_DT
Username of person entering this form __ __ __ __ __	ENTER_USER