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HOME LOGOUT

user: Kathy Lane staff id: 30013 login: 10/27/2010 12:34:37

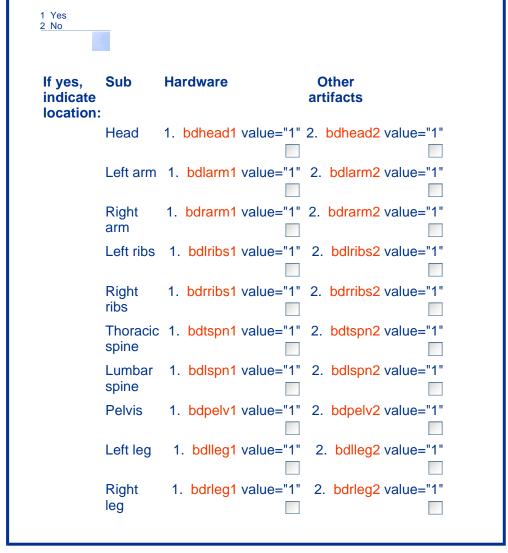
<<< Return>>>

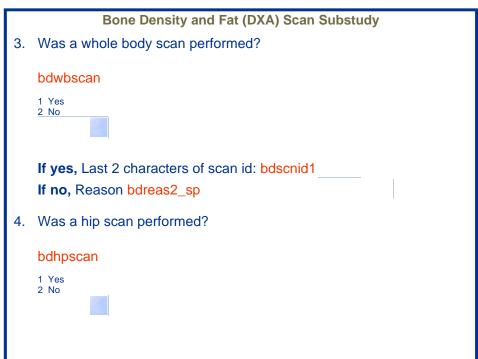
Bone Density and Fat (DXA) Scan Substudy Form **Version 2**

	PID: 0	Acrostic: 0	Visit:	
Date Form C	ompleted: d_forn	ı	Administration Type: admin	
Reviewed by	y: compby		Language: language English	
	В	one Density ar	nd Fat (DXA) Scan Substudy	
1	· bdperf value="1	" T 1 Scan v	was performed on bdd_scan	

Bone Density and Fat (DXA) Scan Substudy			
 bdperf value="1" 1. Scan was performed on bdd_scan (Month/Day/Year) 			
Is this a repeat scan?			
bdrepeat			
1 Yes 2 No			
Reason: bdqa value="1" Requested by QA Center			
bdebl1 value="1" Excessive bone loss			
bdother value="1" Other, specify: bdother_sp			
bdnotperf value="1"			
1 Equipment problem 2 Staff not available 3 Scheduling difficulty 4 Weight limit exceeded 5 Participant refused scan 6 Other, specify			
Specify: bdreas1_sp If scan was not performed, END OF FORM			
Do you have any metal objects in your body, such as a pacemaker, staples, screws, plates, etc.?			
bdmetal			

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	If yes, Last 2 characters of scan id: bdhpscnid
	If no, Reason
	bdhpreas 1 Metal in hip 2 Severe degenerative disease 3 Other, specify
	Specify: bdhprs_sp
5.	Was a spine scan performed?
	bdspnscan
	1 Yes 2 No
	If yes, last 2 characters of scan id: bdspscnid
	If no, reason
	bdspreas
	Metal in spine Severe degenerative disease Other, specify
	Specify: bdsprs_sp
6.	Were the scans reviewed for EBL in the Spine and Hip?
	bdebl2
	1 Yes 2 No
	Technician ID: bdtechid

<<< READ ONLY >>>

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