

**Modification of Diet in Renal Disease Study
GFR DATA FORM**

This form is a prototype for the data which will be entered by the GFR Laboratory. Some values will be copied from the mailing form, others calculated.

2.214

For DCC Use Only
Rev. 3 10/22/90

E ___
V ___
T ___

MDRD

Modification of Diet in Renal Disease Study Determination of Glomerular Filtration Rate

FORM #4 2

1. Patient Identification Number.....
2. Patient Name Code.....
3. Clinical Center
4. a. Date samples drawn.....
b. Date samples received.....
5. a. Date of Assay
- b. Visit Type.....
- c. Visit Number.....
- d. Type of GFR done
- 1 = Regularly scheduled GFR 3 = Repeat after GFR action item
- 2 = 2 weeks after stop point 4 = Not required by Protocol
- e. Sequence Number.....
6. Sex (1 = M, 2 = F)
7. Body Surface Area.....
8. Elapsed Times for each Period
- a. Elapsed Time 0.....
- b. Elapsed Time 1.....
- c. Elapsed Time 2.....
- d. Elapsed Time 3.....
- e. Elapsed Time 4.....
- f. Elapsed Time 5.....
9. Urine Volumes for each Period
- a. Urine Volume 1.....
- b. Urine Volume 2.....
- c. Urine Volume 3.....
- d. Urine Volume 4.....
- e. Urine Volume 5.....

**Modification of Diet in Renal Disease Study
Determination of Glomerular Filtration Rate**

- 10. Serum Counts for each Period
 - a. Background Serum.....
 - b. Serum Count 0.....
 - c. Serum Count 1.....
 - d. Serum Count 2.....
 - e. Serum Count 3.....
 - f. Serum Count 4.....
 - g. Serum Count 5.....

- 11. Urine Counts for each Period
 - a. Background Urine.....
 - b. Urine Count 1.....
 - c. Urine Count 2.....
 - d. Urine Count 3.....
 - e. Urine Count 4.....
 - f. Urine Count 5.....

- 12. GFR's for each Period
 - a. GFR 1.....
 - b. GFR 2.....
 - c. GFR 3.....
 - d. GFR 4.....
 - e. GFR 5.....

- 13. GFR as one Period.....

- 14. Coefficient of Variation.....

- 15. General Comments (i.e., problems with sample)

- 16. Revision Comments

- 101. Date form created..... / .. / ..

- 102. Certification number of data entry person