

**Modification of Diet in Renal Disease Study  
STOP POINT REVIEW FORM  
CLINICAL MANAGEMENT COMMITTEE**

This form should reflect the consensus of the Clinical Management Committee. The diet assignments should not be known. Careful consideration should be given to clearly indicating any and all stop points which have been reached. Each form must be signed.

2.209

For DCC Use Only  
Rev. 2 3/28/90

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# MDRD

## Modification of Diet in Renal Disease Study Stop Point Review Form Clinical Management Committee

This form is to be completed for each stop point reviewed by the committee. It should reflect the consensus of those members reviewing the stop point. The original form should be sent to the DCC for entry into the database.

FORM # ..... 40

1. Patient Identification Number.....
2. Patient Name Code.....
3. Clinical Center .....
4. Study (1 = A, 2 = B, 3 = C).....
5. a. Date stop point declared ..... / /  
b. Date of stop point review ..... / /
6. Which of the following stop points have been reached? (Refer to Section 13 of the Protocol for definitions.) Be sure to indicate each of the stop points reached when multiple ones have occurred concurrently.

For the following: 1 = Yes, 2 = No

- a. GFR (Study A only) .....
- b. Dialysis.....
- c. Transplantation.....
- d. Low Serum Albumin.....
- e. Weight Loss.....
- f. Very High Serum Phosphorus.....
- g. Serious Medical Conditions.....

Please Comment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Which study diet do you believe the patient is on? (1 = Diet K, 2 = Diet L, 3 = Diet M, 4 = Don't know) .....

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101. Date this form completed..... / /
102. Certification numbers of committee members reviewing this stop point. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
103. Signature of member completing this form: \_\_\_\_\_
104. Has form been signed? (1 = Yes, 2 = No).....
105. Date form entered..... / /
106. Certification number of data entry person .....

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Retain a copy of this form for your files. Send the original to the MDRD Study Data Coordinating Center. Please use MDRD Study mailing labels:

MDRD Study Data Coordinating Center  
Department of Biostatistics & Epidemiology  
The Cleveland Clinic Foundation  
9500 Euclid Avenue  
Cleveland, Ohio 44195-5196

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