

Line #	Initial Dx Code	Age at Screening		Sex (M/F)	Race		Hispanic (Y/N)	Screening		PALF Registry Enrolled (Y/N)	NAC Trial Enrolled (Y/N)	Patient ID
		Months	Years		(see codes)	specify		Month	Year			
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		Months	Years		(see codes)	specify		Month	Year			
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		Months	Years		(see codes)	specify		Month	Year			
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Line #	Initial Dx Code	Age at Screening Months Years	Sex (M/F)	Race (see codes) specify	Hispanic (Y/N)	Screening Month Year	PALF Registry Enrolled (Y/N)	NAC Trial Enrolled (Y/N)	Patient ID
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