Form 60: 24 Month Physical Systems Update, Version 08/04/03 (A)_revised 03/16/05

Section A: General Study Information for Office Use Only:

A1. Study ID#: Label

A2. Visit # F/U 24 MONTHS .... FU24 | F/U 36 MONTHS ... FU36
F/U 48 MONTHS.... FU48 | F/U 60 MONTHS ... FU60
F/U 72 MONTHS.... FU72 | F/U 84 MONTHS ... FU84
FAILURE..... FAIL

A3. Date Form Completed: ___ ___ / ___ ___ / ___ ___ ___ ___
MONTH DAY YEAR

A4. Initials of the Person Completing This Form: ____ ____ ____

A5. Which version of this Form was used? ENGLISH 1
SPANISH 2

SECTION B: ANTHROPOMETRIC MEASURES

B1. Height: ____ ____ **inches**

B2. Weight: ____ ____ ____ **lbs**

SECTION C: NEWLY DIAGNOSED HEALTH CONDITIONS

This section includes questions about conditions that you may now have.

†SOURCE CODES: 1 = PATIENT; 2 = MEDICAL RECORD; 3 = BOTH PT & RECORD, 4 = SITE PI, 5 = PT REPORT AND SENT FOR MR. ↓

DOES THE PATIENT REPORT OR IS THERE EVIDENCE OF ANY OF THE FOLLOWING CONDITIONS? ASK, **"Since your UITN surgery…"**		*YES*	*NO*	*a. SOURCE CODE†*
C1.	…do you consistently use a wheel chair to get around?	1	2	
C2.	…have you been diagnosed with cancer of the lower urinary tract (includes bladder cancer)?	1	2	
C3.	…have you had pelvic radiation therapy for any reason?	1	2	
C4.	…have you received chemotherapy or radiation for any reason?	1	2	
C5.	…have you been diagnosed with urethral diverticulum (pocket or outpouching in the urethra)?	1	2	
C6.	…have you had augmentation cystoplasty (surgical expansion of the bladder) or an artificial urethral sphincter?	1	2	
C7.	…have you had nerve stimulators implanted for urinary symptoms?	1	2	
C8.	…have you been diagnosed with Parkinson's Disease?	1	2	
C9.	…have you been diagnosed with Multiple Sclerosis?	1	2	
C10.	…have you been diagnosed with spina bifida?	1	2	
C11.	…have you had a spinal cord injury or trauma?	1	2	
C12.	…have you been diagnosed with diabetes?	1	2	