Steroid Trial	BARC	Form S12J Cataracts

A1. Site/Study ID #:___ ___ / ___ ___ ___ ___   A2. Discharge Date:___ ___ / ___ ___ / ___ ___ ___ ___ (Month / Day / Year)   A3. Staff Initials:___ ___ ___

To DCC ☐

SECTION J: Cataracts

J1. Ophthalmologist performed examination ZBJJ01HO V2(2) 1.☐ No → **End** 2.☐ Yes→
Date (mm/dd): ZBJJ01MM V2(2)/ ZBJJ01DD V2(2)/ ZBJJ01DT

a. Results: ZBJ01ANO V2(2) 1.☐ Normal → **END** 2.☐ Abnormal

		Absent	**Present**		**Eye affected** **Right**	**Left**	**Both**
b.	Cataracts ZBJ01BCA V2(2)	1.☐	2.☐	ZBJ01BRL V2(2)	1.☐	2.☐	3.☐
d.	Posterior embryotoxon ZBJ01DPE V2(2)	1.☐	2.☐	ZBJ01DRL V2(2)→	1.☐	2.☐	3.☐
e.	Retinitis ZBJ01ERE V2(2)	1.☐	2.☐	ZBJ01ERL V2(2)→	1.☐	2.☐	3.☐
f.	Abnormal retinal pigmentation ZBJ01FAR V2(2)	1.☐	2.☐	ZBJ01FRL V2(2)→	1.☐	2.☐	3.☐
g.	Other _ ZBJ01DOT V2(2)/ ZBJ01DPE V2(200)	1.☐	2.☐	ZBJ01GRL V2(2)→	1.☐	2.☐	3.☐

Investigator Signature: ZBJINSIG V2(2)   Date: ZBJSIGMM V2(2)/ ZBJSIGDD V2(2)/ ZBJSIGYY V2(4)/ ZBJSIGDT (Month / Day / Year)

ZBJCMMNT V2(800) Comment