

Participant ID:		Date of Registration:	
Local ID:		Letters:	
Status:			
Site:			

Treatment Start Date

* These fields are required in order to SAVE the form			
* These fields are required in order to COMPLETE the form			
Date of Visit:	*	<input type="text"/>	<input type="button" value="v"/> <input type="text"/> Date
Interviewer User ID:	*	<input type="text"/>	
Note: By updating the treatment start date, you will change all of the due date windows for the follow-up visits. Please verify the participant's treatment start date before proceeding.			
Date treatment started:	*	<input type="text"/>	<input type="button" value="v"/> <input type="text"/> Date