

Multi-Ethnic Study of Atherosclerosis

Exam 3



CT Examination Completion

Participant Id#:

Acrostic:

Date of Birth: ___ / ___ / ___

ctcdt3
Date: / /

Month Day Year

Transcribe from participant visit records:

Weight: **weight3**

1 For women 45-55: Results of pregnancy test:

- Positive
 - Negative
 - Not Done → Reason _____
- prgTst3**

2 Has this participant undergone angioplasty any time in the past?:

	Yes	No	Don't know	
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	angCT3

3 Has this participant undergone coronary bypass any time in the past?

	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	coronCT3
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4 Results of CT scan:

Complete → **Skip to question 5**

ctrslt3

- Incomplete → Reason incomplete or not done
 - Not Done
- Equipment malfunction
 - Participant physically unable to continue
 - Other:
- ctincmp3**

nocttxt3

PARTICIPANT NOT SELECTED TEXT

↓
5 Results of Aortic scan:

Complete → **Skip to question 6**

Incomplete → Reason incomplete or not done

arrrslt3

- Not Done
 - Equipment malfunction
 - Participant physically unable to continue
 - Participant refused
 - Other:
- arincmp3**

noartxt3

6 Comment on unusual findings:

For MESA Field Center Use Only:	ctndact3	Technician ID#:	Reviewer ID#:	Data Entry ID#:
Do any comments listed above indicate a need for Field Center action?	<input type="radio"/> Yes <input type="radio"/> No	<input type="text"/>	<input type="text"/>	<input type="text"/>
		ctctid3	ctcrid3	ctcdid3