

Instructions: Completing the Visit 3 QCT Tracking form.

1. Box labeled 'Office Use Only'. The information requested here is to be completed by the MrOS study staff.
 - a. Please enter the MrOS participant ID, acrostic, and staff ID in the appropriate spaces.
 - b. If the participant had a baseline scan, but refuses to complete the Visit 3 scan, mark 'Refused' in this box. Do not complete any other information. Fax to the Coordinating Center.
 - c. If the participant has not refused the scan, but unexpected circumstances prevent the participant from completing the 'Pre-Scan Screening' or undergoing the QCT scans, please mark 'Missing' in this box. Do not complete any other information. Fax to the Coordinating Center.

2. Pre-Scan Screening. The information requested in these boxes is to be completed on the day the participant goes for the scan. This information is to be completed by the MrOS study staff.
 - a. Please ask the participant: 'Have you had any testing involving contrast dye or radioactive materials in the LAST 10 DAYS?'
 - i. This question pertains to contrast dye or radioactive material that the participant has ingested as part of a medical test.
 - b. If the participant indicates that he has ingested such materials, does not know, or refused to answer the question, please do not proceed with the scans. Please do not mark any other information on form and fax to the Coordinating Center.
 - i. If the participant knows that he has ingested radioactive contrast or dye, the scan can be rescheduled for a later date.
 - c. If the participant has not had tests involving contrast dye or radioactive materials, please proceed with questions 1a-c.
 - i. If the participant responds 'Yes' to any of the questions, he is ineligible only for scan only in the region where he has metal, hardware, or the hip replacement. For example, a participant who has had a hip replacement is only ineligible for the hip scan, but the lumbar scans can still be obtained. Similarly, if a participant has metal in his spine, he is still eligible for a hip scan.
 - ii. If the participant does not know the answer to any of these questions, mark 'No' and proceed with the scanning. If the participant has metal in his spine or has had a hip replacement, it will show up on the scout view.

The remaining information is to be completed by the Scanning Personnel.

3. Participant / Study Information.
 - a. Please enter the Study ID. This information is generated by the scanner and is found in DICOM header field called Study ID (field 0020:0010). Please enter the number starting in the leftmost space. The Study ID may not fill all the spaces given.
 - b. Enter the study time and mark 'am' or 'pm'
 - i. If 24 hour clock time is used, there is no need to mark 'am' or 'pm'
 - c. Enter the study date as month / day / year.

- d. Please enter the table height. Because the table height can affect the image processing, it is important to record this information for every scan.
 - i. This information will be determined at the site visit with Dr. Prevrhal and is recorded in the protocol.
4. Lumbar Scout (Lateral View)
 - a. If the Lumbar Scout view is not obtained because the participant refuses to continue with the scanning procedure, please mark this question accordingly.
 - i. If the participant refuses to continue with the scanning procedure, leave the series # and the # of images blank.
 - b. Series #, # of Images: If the lumbar scout is obtained, please enter this information in the spaces provided. Enter numbers for each item starting in the leftmost column.
5. L1L2 Scan (1 mm reconstruction)
 - a. Series #, # of Images:
 - i. If the L1L2 scan is performed, please enter this information in the spaces provided. Enter numbers for each item starting in the leftmost column.
 - ii. Leave these items blank if the L1L2 scan is not obtained because of metal or participant refuses.
 - iii.
 - b. Reasons that the L1L2 Series is not obtained.
 - i. If the lumbar scout shows metal or hardware in the L1L2 region of interest as specified in the MrOS QCT Scanning Protocol, mark this question accordingly. Do not obtain the L1L2 scan.
 - ii. If the participant refuses to have the L1L2 scan performed, mark the box accordingly.
6. 2nd Lumbar Scout (Lateral View): Please note that the 2nd Lumbar Scout is only necessary if the participant is repositioned for any reason after the L1L2 series is complete but before the L4L5 series is obtained.
 - a. If the 2nd Lumbar Scout was unnecessary, please leave the items in this section blank. Otherwise, please complete the requested items.
 - b. Series #, # of Images:
 - i. If the 2nd Lumbar Scout was obtained, please enter this information in the spaces provided. Enter numbers for each item starting in the leftmost column.
 - c. Reason that the 2nd Lumbar Scout was obtained.
 - i. If the participant moves considerably or is repositioned for any reason after the L1L2 scan is obtained, please mark the item accordingly. and.
 - ii. If the participant refused to proceed with the scanning procedure, please mark the box accordingly.
7. L4L5 Scan (5 mm reconstruction)
 - a. Series #, # of Images:
 - i. If the L4L5 scan is performed, please enter this information in the spaces provided. Enter numbers for each item starting in the leftmost column.
 - ii. Leave these items blank if the L4L5 scan is not obtained because of metal or participant refuses.

- b. Reasons that the L4L5 Series is not obtained.
 - i. If the lumbar scout shows metal or hardware in the L4L5 region of interest as specified in the MrOS QCT Scanning Protocol, mark this question accordingly. Do not obtain the L4L5 scan.
 - ii. If the participant refuses to have the L4L5 scan performed, mark the box accordingly.
8. Hip Scout (AP view):
- a. Series #, # of Images: Please enter the information requested.
 - b. Reasons that the Hip Scout is not obtained.
 - i. If the participant reported a hip replacement (see Pre-Scan Screening Question 1a), please leave the Series # and # of images blank.
 - ii. If the participant did not have hip replacement, but refused to continue with the scanning procedure please mark this item accordingly.
9. Hip Scan (1 mm and 3 mm reconstructions):
- a. Series #, # of Images:
 - i. If the Hip Scan is performed, please enter this information in the spaces provided. Enter numbers for each item starting in the leftmost column.
 - ii. Leave these items blank if the Hip Scan is not obtained because of the participant reported a hip replacement, if metal or hardware was visible in the hip region of interest on the hip scout view, or if the participant refuses to continue with the hip scan.
 - b. Reasons that the Hip Scan is not obtained.
 - i. If the hip scout shows an unreported hip replacement or other metal or hardware in the hip region of interest as specified in the MrOS QCT Scanning Protocol, mark this question accordingly. Do not obtain the hip scan.
 - ii. If the participant refuses to have the hip scan performed, mark the box accordingly.

Please return the QCT forms to the MrOS Study Personnel (please do not give it to the MrOS participant).

If there are questions regarding the completion of the QCT tracking form, please contact:
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THANK YOU VERY MUCH!