

**Age related macular degeneration**  
**Data definition**  
**Version nov 5 2008**

Introduction:					
Section	Domain	No.	Data elements or variables	Data definition	Core data?
1	Demography	1	Name		Yes
		2	Identification card number *	Fill in mykad/mykid . If mykad/mykid not available, Please complete the old ic or Other id document no..for example passport number	Yes (must fill)
		3	Address	Only postcode, town/city and state are required	No
		4	Date of birth		Yes (must fill)
		5	Age at notification (in years)	Auto- calculated from the date of birth to the day of data entry	Yes (must fill)
		6	Gender	Male or female	Yes (must fill)
		7	Ethnicity		Yes
2	Risk factors	1.	Diabetes mellitus		Yes
		2	Hypertension		Yes
		3	Past and current stroke	History of stroke	
		4	Ischemic heart disease		Yes
		5	Hypercholesterolemia		Yes
		6	Smoking	Current or past smokers	Yes
		7	Cataract surgery within last 3 months prior to onset of symptoms in the affected eye (s)	Cataract surgery within 3 months may induced progression of ARMD	Yes
		8	Myope	If yes, choose the group of cylinder Diopter for each eye either: - <2D 2-8D >8D	
3	Medical History and quality of life survey	1	Metamorphopsia		Yes
		2	Scotoma		
		3	Blurring of vision		
		4	Duration of symptoms	State duration for each affected eye , if less than one month, put weeks (take out year)	Yes
		5.	Previous treatment for AMD	If yes, state what type of treatment <ul style="list-style-type: none"> <li>• PDT</li> <li>• anti VEGF</li> <li>• PDT + antiVEGF</li> <li>• intravitral triamcinolone</li> <li>• argon laser</li> </ul>	Yes
		6	Are you currently driving, at least once a while ?	yes or no If yes- do you have difficulty driving during daytime in familiar places? -yes/ no  if no, reason: never drive, gave up because of poor eye sight, others.	
		7	Because of your eyesight, do you	yes or no	

			have difficulty reading ordinary print in newspaper?		
4	Clinical Features				
		1.	Affected eye*	Right eye only Left eye only Both eyes	Yes (must fill)
		2.	Vision in affected eye *	Unaided Pin Hole /With glasses Near vision	Yes (must fill)
		3.	Fundus findings:	In affected eye only	
		4.	Type of AMD*	Exudative Non exudative (check only one box)	Yes (must fill)
		5.	Presence of Drusen *	soft drusen  hard drusen (can check soft and hard)	Yes (must fill)
		6.	Presence Of Central Geographic Atrophy	Yes/ no.	Yes
		7.	Presence Of Pigment epithelial detachment	Yes/ no.	Yes
		8.	Presence Of Subretinal Haemorrhage	Yes/ no.	
		9.	Presence Of Disciform Scar	Yes/ no.	Yes
5	Investigation				
		1	OCT	Done or not done If done Findings: Subretinal Fluid Pigment epithelial detachment	Yes
		2	FFA	Done or not done If done, findings: 1. Type of choroidal neovascularization (CNV) <ul style="list-style-type: none"> <li>• classic</li> <li>• minimally classic</li> <li>• predominatly classic</li> <li>• occult</li> </ul> 2. Location of CNV <ul style="list-style-type: none"> <li>• Subfoveal</li> <li>• Juxtafoveal</li> <li>• Extrafoveal</li> </ul>	Yes
		3	ICG	Done or not done If done, findings: <ul style="list-style-type: none"> <li>• Polyps</li> <li>• Plaque</li> <li>• No abnormality</li> </ul>	Yes
6	Diagnosis		Clinical diagnosis in affected eye *	Early AMD Intermediate AMD Advanced AMD –Geographical Atrophy	Yes (must fill in at least one box)

				Advanced AMD – Disciform Scar	
				Other: Polypoidal choroidal vasculopathy(PCV)	
				Choroidal neovascularization (CNV)-active	
				Choroidal neovascularization (CNV)- treated	
7	Treatment			Eys or no If yes:state <ul style="list-style-type: none"> <li>• PDT</li> <li>• anti VEGF</li> <li>• PDT + antiVEGF</li> <li>• intravitral triamcinolone</li> <li>• argon laser</li> <li>• Others, specify</li> </ul>	Yes (must fill in at least one box)
			Treatment * Form filled by	<ul style="list-style-type: none"> <li>• Medical Retinal (MR) specialist</li> <li>• Vitreo-retinal (VR) specialist</li> <li>• MR/VR fellow</li> <li>• Other specialist</li> <li>• Medical officer</li> </ul>	No