Transcribe from participant visit records:

**1.** Was MRI completed?
- **YES** → Date of MRI:
  - Month: __________
  - Day: __________
  - Year: __________
- **NO** → Indicate reason and then skip to #7
  - 1. Scanner malfunction
  - 2. Refused
  - 3. Claustrophobia
  - 4. Ill
  - 5. Ineligible
  - 6. Physically unable
  - 7. Other:

**2.** Type of scanner:
- 10 GE
- 20 Siemens

**3.** Series Description
- Sagittal Localizer (4 slices):
  - MR1SER1 MR1IMG1
- Axial Localizer (1 slice):
  - MR2SER1 MR2IMG1
- Pseudo Vertical Long Axis (1 slice):
  - MR3SER1 MR3IMG1
- Horizontal Long Axis Cine:
  - MR4SER1 MR4IMG1
- Short Axis Cine:
  - MR5SER1 MR5IMG1
- Vertical Long Axis Cine:
  - MR6SER1 MR6IMG1

**4.** Ending heart rate:
- MRHRRT1

**5.** Exam #:
- MREXAM1

**6.** Were any abnormalities noted?
- 10 Yes
- 00 No
- Specify: MRALTXT1

**Post-systolic/post-diastolic**

**Tagging Sequence**
- TAG1S1 TAG1II
- TAG2S1 TAG2II
- TAG3S1 TAG3II

**Enter mid-level location of cine series**
- MIDLOC1

**MR Aorta**
- MR8SER1 MR8IMG1
  - (1 slice)

**Black Blood Aorta**
- MR9SER1 MR9IMG1
- MR92SER1 MR92IMG1
- MR93SER1 MR93IMG1

**b.** Brachial artery blood pressure immediately after Series 7:
- POSTSYS1 / POSTDIA1

**COMMENTS**
- MRICMNT1

**Clinic:**
- 3 - Wake Forest
- 4 - Columbia
- 5 - Johns Hopkins
- 6 - Minnesota
- 7 - Northwestern and Loyola
- 8 - UCLA

**Mesa ID#**

**Acrostic**
- MR3CRST1

**IDNO**

**Height:**
- MRIHT1 cm.
- 10 male 00 female

**Weight:**
- MRIWT1 lb
- 10 Hispanic 30 Chinese
- 20 Black 40 White