Multi-Ethnic Study of Atherosclerosis

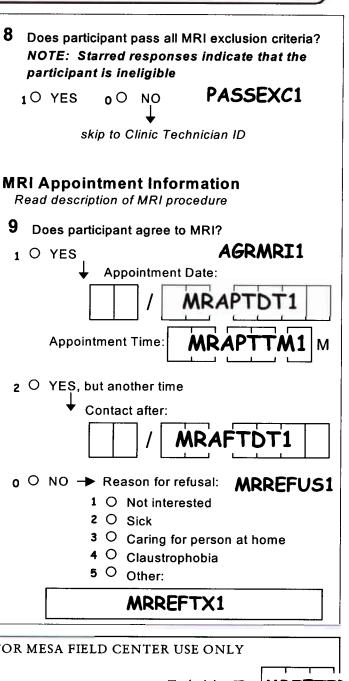


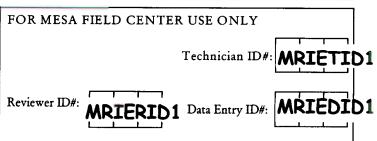
	Id#: IDNO	
Acrostic	ACROSTIC	_
Date:	/ MRIEDT1	
	Month Day Year	1

1 Is participant	eligible	on bas	sis of weight?	
10 YES	o O	NO *	WTELIG1	
	skip t	o ques	stion 8	
2 Do you have an aneurysm clip?				
1 ○ YES ↓ Hospital Nar	o ○ me		ANCLIP1	
City, State				
Check medical			e metal clips used?	
skip to que	_		METCLIP1	
Have you even brain, or spins 1 YES * skip to questi	al cord? o ○		agments in your eyes, METFRAG1	
4 Are you (or hawelder or grin	der in y	our job	?	
	implant o O N	or spi	ectrical devices, such nal cord stimulator?	
6 Do you have devices in any	y part of		ants, plates or other pody?	
skip to questi	-		METIMPL1	
7 (FEMALE OF	NLY) Ar	e you	or do you believe	

you may currently be pregnant?

OO NO





CURPREG1

10 YES*

skip to question 8