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Site Number

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Subject Number

### Prior Crohn's Disease Endoscopic Interventional Procedures

What was the category of the procedure?	<b>PRCAT</b> <b>PRCAT</b>
What was the indication for the procedure?	<b>PRINDC</b> <b>PRINDC</b>
What was the procedure name?	<b>CDINTPRO_PRTRT</b> <b>PRTRT</b>
Was the procedure prespecified?	<b>CDINTPRO_PRPRES</b> <b>PRPRES where PRTRT = "ENDOSCOPIC INTERVENTIONAL PROCEDURE"</b>
Has the subject had any Crohn's disease-related endoscopic interventional procedures?	<input type="radio"/> No <input type="radio"/> Yes <b>CDINTPRO_PROCCUF</b> <b>PROCCUR where PRTRT = "ENDOSCOPIC INTERVENTIONAL PROCEDURE"</b>