

PPMI MODAG-009-P1-01 PET Imaging Substudy

Adverse Event Telephone Assessment

Complete this form for the telephone follow up 2-3 business days following a MODAG-009 PET imaging procedure to assess for adverse events.

A. Assessment Date: ____ / ____ / ____ (mm/dd/yyyy)

1. Was a MODAG-009 PET imaging scan conducted at this visit?

☐ No

☐ Yes

2. Was contact made during this telephone call?

☐ No

☐ Yes

2a. If no, indicate the reason:

☐ Phone disconnected/number no longer in service

☐ Messages for participant were not returned

☐ Participant moved/unable to locate

☐ Other, specify: _____

3. Were any adverse events reported by the participant?

☐ No

☐ Yes

If question 3 is "Yes", new adverse event(s) should be documented on the Adverse Event Log.