

PPMI MODAG-009-P1-01 PET Imaging Substudy

Pregnancy Test

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

B. Is participant a female of childbearing potential?

☐ Yes ☐ No

1. If female of childbearing potential, was urine pregnancy test performed?

☐ Yes ☐ No

If no, explain why:

1a. If pregnancy test performed, is the participant pregnant?

☐ Yes ☐ No

1b. Was the pregnancy test result confirmed prior to ¹⁸F MODAG-009 injection for PET scan?

☐ Yes ☐ No ☐ Not Applicable

If no, explain why:
