

PPMI NX PI-2620 Tau Imaging Substudy

Conclusion of Study Participation

The *Conclusion of Study Participation* form should be completed when a participant either completes study participation, decides to no longer participate in the study/withdraws consent, or has withdrawn/concluded the PPMI Clinical study.

1. Date of conclusion of participation: ____ / ____ / ____ (mm/dd/yyyy)
2. Select a reason for conclusion of study participation:
 - ☐ Completed study per protocol
 - ☐ Transportation/Travel issues (ex: logistics or travel, moved away from study site)
 - ☐ Burden of study procedures (other than travel)
 - ☐ Family, care-partner, or social issues (such as work/job obligations)
 - ☐ Non-compliance with study procedures
 - ☐ Adverse event
 - ☐ Decline in health
 - ☐ Lost to follow up
 - ☐ Other, please specify:

3. Did increasing PD disability contribute to the decision to withdraw from the PPMI NX PI-2620 Tau Imaging Study?
 - ☐ No
 - ☐ Yes
 - ☐ Not Applicable