PPMI

1 3	2		MAGNETIC RESONANCE IMAGING	6 0
SUB	JECT II	D _	VISIT NO	
INITI	ALS		SITE NO VISIT DATE MM DD	YYYY
1.		•	0 = Not Completed, 1 = Completed) leted (0), provide reason in Comments.	1.
	1a.	-	MRI scan completed: 1a	YYYY
	1b.	Did M	IRI scan include DTI sequences? (0 = No, 1 = Yes)	1b.
	1c.	Did M	IRI scan include resting state sequences? (0 = No, 1 = Yes)	1c.
		1c1.	If 1c is 1 = Yes, were MRI resting state sequences completed on a different day than the Use of PD Medication form? $(0 = No, 1 = Yes)$	1c1.
		1c2.	If 1c1 is $1 = Yes$, is the subject on medication for treating the symptoms of Parkinson disease? (0 = No, 1 = Yes)	1c2.
		1c3.	If 1c2 is 1 = Yes, what is the subject taking: (check all that apply) Levodopa Dopamine Agonist Other	
		1c4.	Date of last dose prior to scan: 1c4. MM DD	YYYY
		1c5.	Time of last dose prior to scan: (24-hour clock) 1c5.	:
2.	MRI data transferred to the core imaging lab at Institute for Neurodegenerative Disorders: (0 = No, 1 = Yes)			
3.	MRI scan results (based on radiologist interpretation) are: (Baseline Only) 1 = Normal 2 = Abnormal, not clinically significant 3 = Abnormal, clinically significant (specify in Comments)			
Comm	nents:			
1	NOTE:	DTI se	equences at Baseline and annual visits performed at select sites only.	