Pregnancy Test

Form Instructions

If participant is pregnant, consult protocol.

Assessment Date

10/27/2020

A. Is participant a female of childbearing potential?

○ No   ◉ Yes

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

○ No   ◉ Yes

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

○ No   ○ Yes

1b. Was the pregnancy test result confirmed prior to DaTscan injection for SPECT scan?

◉ No   ○ Yes

○ Not Applicable

If no, explain why:

Input text