

EXABLATE IN THE TREATMENT OF PARKINSON'S DISEASE

Follow-up 6
VISIT 08
12 Month (\pm 1
month)

CRST

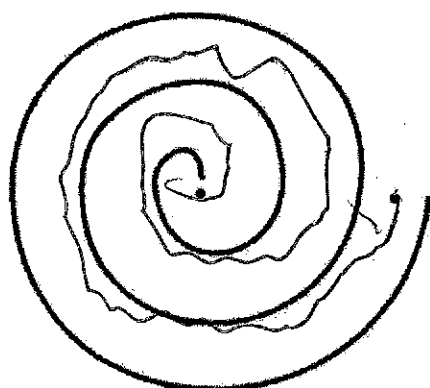
SUBJECT NUMBER: PD001J-

SUBJECT INITIALS:

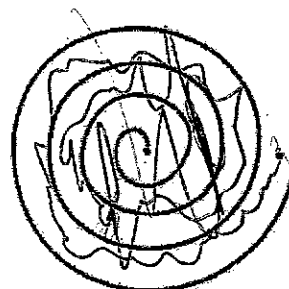
SITE NUMBER:

Page is blank ☐

DRAWING A

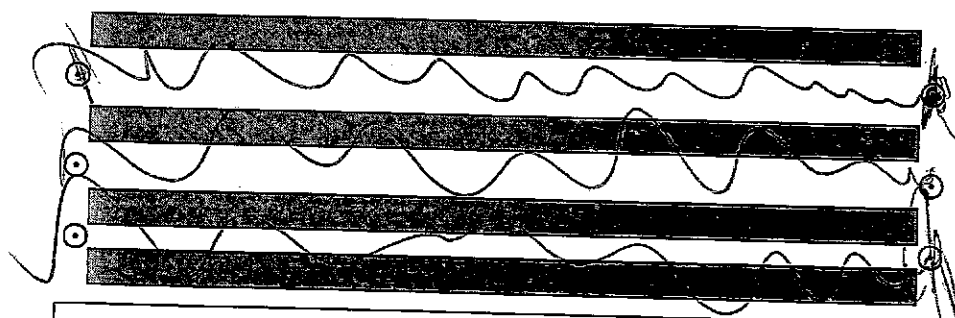


DRAWING B



Left

DRAWING C



Please write in the space provided: "This is a sample of my best handwriting."