

Subj	ect	Sign	h :	
0.01	~~.	O .9.		

Lista de verificare a simptomelor sevrajului de alcool, modificată

Investigator:	Dr Mischianu Ana	
eCRF ID:	A202-014	
Filled By:	Subject	
Scale:	Screening (Day X)	
Date:	8/25/2025	
nervozitate Answer: 0= deloc,		

transpirație

Answer: 0= deloc,

tremor

Answer: 0= deloc,

greață

Answer: 0= deloc,

vărsături

Answer: 0= deloc,

convulsii

Answer: 0= deloc,

halucinații

Answer: 0= deloc,

confuzie

Answer: 0= deloc,

frisoane sau senzație de căldură

Answer: 0= deloc,

dureri de cap

Answer: 0= deloc,

tulburări de somn

Answer: 0= deloc,

Disclaimer: By signing this document electronically, I acknowledge that I have reviewed its contents, understand its implications, and confirm its accuracy. I understand that my electronic signature is legally binding, the content of this document is confidential, and will not be shared with third parties without authorization.