

| Subject | Sign | |
|---------|-------|-----|
| Capicol | Oldil | · · |

Lista de verificare a simptomelor sevrajului de alcool, modificată

| Investigator: | Dr Mischianu Ana | |
|---------------------------------------|---------------------------------|--|
| eCRF ID: | A202-001 | |
| Filled By: | Subject | |
| Scale: | Double-blind Treatment (Day 28) | |
| Date: | 7/24/2025 | |
| nervozitate Answer: 0= deloc, | | |
| transpirație Answer: 0= deloc, | | |
| tremor | | |

greață

Answer: 1= ușor,

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,

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