

SCHEDULE OF ACTIVITIES FOR CRF COMPLETION

	Level #	Screening - 28 to -10	Baseline	Visit 01 ± 5 days	Visit 02 ± 5 days	Visit 03 ± 5 days	Visit 04 ± 5 days	Visit 05 ± 7 days	Visit 06 ± 7 days	Unscheduled Visits
WEEKS			0	week 3	week 6	week 10	week 14	week 20	week 26	
Cover Page									X	
Inclusion/Exclusion (INEX)	02	X	X (review)							
Medical History/Demographics (DEMO)	04	X	X (review)							
General Physical Examination (PHYS)	06	X							X	
Vital Signs (VITL)	08	X	X	X	X	X	X	X	X	X
Mini-Mental State Exam (MMSE)	10	X								
UPDRS (UPDR)	12		X			X			X	
Schwab & England - ADL (SCEN)	14		I						I	
Hoehn & Yahr (HOYA)	16	X								
Clinical Global Evaluation (CGE)	18		I						I	
24 Hour Diary (DIA1)	20	X	X		X		X		X	
Beck Depression Inventory (BECK)	22	X								
Electrocardiogram (ECG)	24	X							X	
Chest X-ray (CXR)	26	X								
Laboratory Tests (LAB)	28	X	X			X			X	
Pharmacodynamics - MAO-B Log (DYNM) <small>(select sites)</small>	30		X			X			X	
Pharmacokinetics (PHRM)	32					X			X	
Quality of Life - PD qualif (QOL)	34		X						X	
Blood Pressure Meal Times (BPM)	36		X	X					X	
Subject Withdrawal/Completion (WITH)	38								X	
Signature Form (SIG)	40	X	X	X	X	X	X	X	X	X
Study Medication Labels (LABL)	42		X	X	X	X	X	X		
Levodopa Dosing Log (LVD)	44	X	X	X	X					
Concomitant Medication/PD Log (MEDP)	46	X	X	X	X	X	X	X	X	X
Concomitant Medication Log (CMED)	48	X	X	X	X	X	X	X	X	X
Drug Dispensing/Compliance Log (CMPL)	50		X	X	X	X	X	X	X	
Adverse Event Log (AE)	52			X	X	X	X	X	X	X
Adverse Event Comment Log (AECM)	54			X	X	X	X	X	X	X
Adverse Event Follow-up Log (AEFU)	56								X	X
TEVA SAE Form				X	X	X	X	X	X	X
Food Diary			X	X					X	

I = To be performed by the Investigator.

NOTE: BP Monitoring equipment should be given to the subject at Screening to be used before visit Baseline, Visit 01 and 06.