Confidential

## **S46r0 End Point Form**

Ad Hoc Event ID	
Visit Date (yyyy/mm/dd):	
Correction:	☐ Yes ☐ No
All questions require the neurologist evaluation after	review of the films and assessment of the
Neuroradiology Committee. Reason for end point: You	u must answer Questions 1, 2, and 3. If you
indicate Yes, you must also answer the corresponding (A) question.	
Progression of lesion: (Determined by Neuroradiology Committee)	☐ Yes ☐ No ☐ Indeterminate
1A. If Yes, is the progressive lesion(s) an overt or silent stroke?	☐ Yes ☐ No ☐ Indeterminate
New Lesion: (Determined by Neuroradiology Committee)	☐ Yes ☐ No ☐ Indeterminate
2A. If Yes, has the new lesion(s) progressed to an overt or silent stroke?	☐ Yes ☐ No ☐ Indeterminate
Overt Stroke: (Determined by Neuroradiology Committee)	☐ Yes ☐ No ☐ Indeterminate
3A. If Yes, is the overt stroke with changes in the MRI?	☐ Yes ☐ No ☐ Indeterminate
Staff I.D. #:	

