

## Out of Clinical (OOC) Annual Visit

| Assessment  | OOO Annual visit |
|---|------------------|
| <b>Consent Activities</b>                           |                  |
| Continuing Consent                                  | X                |
| Research Proxy Designation                          | As Needed        |
| Consent to share contact information                | As Needed        |
| Informed Consent Tracking Log                       | As Needed        |
| <b>General Activities</b>                           |                  |
| Visit Status  | X                |
| myPPMI Registration <sup>s</sup>                    | X                |
| Conclusion of Study Participation                   | As Needed        |
| <b>Neurological/Motor Assessments</b>               |                  |
| Participant Motor Function Questionnaire            | P                |
| Freezing and Falls                                  | X                |
| Initiation of Dopaminergic Therapy                  | X                |
| MDS-UPDRS Part Ia                                   | I                |
| MDS-UPDRS Part Ib and Part II                       | P                |
| MDS-UPDRS Part IV <sup>d</sup>                      | I                |
| Modified Schwab & England ADL                       | I                |
| Features of Parkinsonism                            | I                |
| Other Clinical Features                             | I                |
| Primary Research Diagnosis                          | I                |
| Clinical Global Impression (CGI)                    | I                |
| Clinical Diagnosis                                  | X                |
| <b>Non-Motor Assessments</b>                        |                  |
| Olfactory Testing (UPSIT) <sup>k</sup>              | P                |
| REM Sleep Behavior Disorder Screening Questionnaire | P                |
| Epworth Sleepiness Scale                            | P                |
| SCOPA-AUT   | P                |
| Participant Global Impression (PGI)                 | P                |
| PDAQ-27   | P                |
| Neuro QoL   | P                |
| <b>Cognitive Assessments</b>                        |                  |
| Montreal Cognitive Assessment*                      | X <sup>o</sup>   |

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| Assessment                                   | OOO Annual visit |
|--|------------------|
| Clock Drawing*                               | X <sup>O</sup>   |
| Cognitive Change                             | P                |
| Cognitive Categorization                     | I                |
| <b><i>Neuropsychological Assessments</i></b> |                  |
| State-Trait Anxiety Inventory for Adults     | P                |
| Geriatric Depression Scale                   | P                |
| QUIP   | P                |
| <b><i>Safety and General Health</i></b>      |                  |
| Current Medical Conditions Review            | X                |
| Concomitant Medication Review                | X                |
| LEDD Concomitant Medication Log              | As Needed        |
| Participation in Other Studies               | As Needed        |
| Procedure for PD Log                         | As Needed        |
| Report of Pregnancy                          | As Needed        |

I = Investigator (or trained designee) completed assessment

P = Participant completed assessment

X = Investigator or Coordinator completed assessment (or as otherwise delegated)

d = Investigator or Coordinator may complete treatment and timing information.

k=only for Prodromal cohort at Yr 1, 2 or 4; Completed by mail.

O = zoom based only

S= Site to inform about myPPMI and assist with registration, if not yet done.

\*Completed on paper source first, and then scores entered into EDC

As needed assessments can be located under the Event Driven category in EDC