**CONFIDENTIAL Patient log sheet**

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| **Study** | **POSE – Clinicaltrials.gov ID: #** NCT03152734  |
| **Local Principal Investigator’s name:** |  | **Centre/ Institution name:** |  | **Centre Number:** |  |

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| **Patient study subject ID****(e.g. 049-001-009)** | **Patient Name** | **Phone number to contact for Follow-up** | **Patient Date of Intervention** | **30 days Follow-up Phone Call** |
| **Planned date** | **Actual date** | **Person in charge** |
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