

## Subject Identification Log Full study

<b>Site number</b>		<b>Study name</b>	REMAP-CAP
<b>Site name</b>		<b>Protocol number (Eudract)</b>	2015-002340-14
<b>PI name</b>		<b>Sponsor</b>	UMC Utrecht

**THIS DOCUMENT CONTAINS CONFIDENTIAL, PRIVATE INFORMATION AND MUST NOT BE COPIED OR REMOVED FROM THE SITE!**

Please record the required information to allow easy identification when necessary.

#	Subject ID#	Participant Name	Date of birth (ddMMMyyyy)	Hospital Patient ID#	Date ICF signed (ddMMMyy)
1					
2					
3					
4					
5					
6					
7					

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8					
9					
10					
11					
12					
13					
14					
15					

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16					
17					
18					
19					
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21					
22					
23					

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24					
25					
26					
27					
28					
29					
30					