





CTLA-4 Ig Study  
PRE-RANDOMIZATION EXIT FORM

Form CTL01E

01 JAN 2008

Version 1.0

Page 2 of 1

Site Number: \_\_\_\_\_

Screening ID: \_\_\_\_\_ - \_\_\_\_

Participant Letters: \_\_\_\_\_

Date form completed: \_\_\_\_/\_\_\_\_/\_\_\_\_  
DAY MONTH YEAR

*On all questions write “?” if the desired information is currently unavailable, but is being checked and will be known in future updates. Write “\*” if the desired information is permanently unavailable (i.e. will not be known in any future updates).*