

Basic I/E Criteria



XX
XX
XX
XX

Inclusion Criteria:

- ✓ XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- ✓ XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- ✓ XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- ✓ XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Exclusion Criteria:

- ✗ XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- ✗ XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- ✗ XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- ✗ XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

✗✗ Please review patient's concomitant medications for use of any of the following prohibited medication at screening:

- XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
- XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX