

Firdapse® Pregnancy Registry
Medical Release of Information
Protocol # LMS-004 Final v2.0
A Pregnancy Surveillance Program of Women and Infants
Exposed to Firdapse® During Pregnancy
Study Sponsor: Catalyst Pharmaceuticals, Inc

Firdapse® Pregnancy Registry
200 Pinecrest Plaza
Morgantown, WV 26505
Phone: 855-212-5856
Fax: 877-867-1874

Medical Release of Information/Request for Medical Records

I, _____, give my permission for the
Please print name

release of information regarding my pregnancy and its outcome, including monitoring my baby for up to 12 months of age, to the Firdapse® Pregnancy Registry. Catalyst Pharmaceuticals, Inc., the study sponsor, has contracted and is working with United BioSource (UBC) to conduct this research study.

You have the right to review your medical information prior to its release and you have the right to refuse to sign this authorization to prevent its release. Your health care provider(s) and UBC will ensure the information is maintained in a confidential manner. Your health care or payment for care will not be affected by whether or not you sign this authorization, however, you will not be included in the study if you do not sign.

Date	Patient Signature
------	-------------------

Address: _____

Telephone: _____

Secondary Phone: _____

DOB: _____