

## CALENDAR OF STUDY B7981086

**Study drug: PF-06651600**

### Cohort 1

Day	Date	Hour	Location	Parking	Aim of the visit (see informed consent for details)		
Screening Fasted 4h before	<i>To be confirmed</i>		<i>Brussels : day hospital</i>	<i>Bordet</i>	Screening		
P1 D-1 Fasted 4h before	<i>Mon</i>	<i>19-02-24</i>	<i>To be confirmed</i>	<i>Brussels: day hospital</i>	<i>Bordet</i>	Admission	
D1	<i>Tue</i>	<i>20-02-24</i>	In-house stay			Pharmacokinetic day	
D2	<i>Wed</i>	<i>21-02-24</i>	In-house stay			See informed consent	
D3	<i>Thu</i>	<i>22-02-24</i>	In-house stay			See informed consent	
P2 D1	<i>Fri</i>	<i>23-02-24</i>	In-house stay			Pharmacokinetic day	
D2	<i>Sat</i>	<i>24-02-24</i>	In-house stay			See informed consent	
D3	<i>Sun</i>	<i>25-02-24</i>	In-house stay			See informed consent	
P3 D1	<i>Mon</i>	<i>26-02-24</i>	In-house stay			Pharmacokinetic day	
D2	<i>Tue</i>	<i>27-02-24</i>	In-house stay			See informed consent	
D3	<i>Wed</i>	<i>28-02-24</i>	In-house stay			See informed consent	
P4 D1	<i>Thu</i>	<i>29-02-24</i>	In-house stay			Pharmacokinetic day	
D2	<i>Fri</i>	<i>01-03-24</i>	In-house stay			See informed consent	
D3	<i>Sat</i>	<i>02-03-24</i>	Out			Leave unit around noon	
Follow-up	<i>Thu</i>	<i>28-03-24</i>					Control by phone Please make sure we can reach you
<b>Partial payment : Receipt of payment maximum 3 weeks after 04/03/2023</b>							
<b>Receipt of payment maximum 3 weeks after the last contact</b>							