RECOVER-SLEEP: Hypersomnia Participant Schedule

This schedule summarizes the study activities for participants assigned to the Hypersomnia group. You will take the study drug and complete the activities listed here.

Keep this schedule in a safe place so you can refer to it throughout the study.

| STUDY ACTIVITIES: 16 Weeks (4 Months Total) | | | | | |
|--|--|---|--|--|--|
| Screening and Baseline Period: 1 Week Screening visits will take about 5 hours | | | | | |
| Randomization Visit (about 2 to 4 hours) | Information | Assessments | Receive | | |
| Date: | Review current medicines Review study requirements After this visit, complete a survey about how you are feeling | Surveys Sleep symptoms and habits Attention and thinking speed test Blood sample Nasal swab sample Check-in Pregnancy test, if applicable | Study drug Portable blood pressure monitor Activity tracker Information on healthy sleep habits At-home stool (poop) sample kit Sleep diary (if using paper format) | | |
| Pre-Study Intervention Period: 1 Week | | | | | |
| From to | For 7 days before you start taking the study drug at home Wear the activity tracker to record your rest and activity Fill out Sleep Diary 1 (online or on paper) to record the time you spent sleeping and napping and the quality of your sleep | | | | |
| Study Intervention Period: 10 Weeks (2.5 Months) | | | | | |
| Take the Study Drug From to | Take the study drug by mouth daily (the dose will be gradually increased over the first 3 weeks to find the best dose for you) Receive check-in phone calls that will last about 30 minutes from the study team every 5 days during the first 3 weeks Use the portable blood pressure monitor for the first 3 weeks while taking the study drug Wear the activity tracker on your wrist daily (recommended, but not required) | | | | |

| Middle of Study Intervention Phone Call (about 30 to 60 minutes) Date: | Between week 5 and week 7, the study team will call you for another check-in. | | | |
|---|--|--|---|--|
| Pre-End of Study Intervention Period From to | For the last 7 days you are taking the study drug Wear the activity tracker to record your rest and activity Fill out Sleep Diary 2 (online or on paper) to record the time you spent sleeping and napping and the quality of your sleep | | | |
| End of Study Intervention Clinic Visit (about 2 to 4 hours) Date: | Information | Assessments | Receive / Return | |
| | Review current medicines After this visit, complete a survey about how you are feeling | Study drug pill count Surveys Sleep symptoms and habits Attention and thinking speed test Blood sample Check-in | Receive • At-home stool (poop) sample kit Return • Remaining study drug, if applicable • Completed Sleep Diary (if using paper format) | |
| End of Study: 4 Weeks (1 Month) Later | | | | |
| End of Study Follow-up Phone Call (about 30 to 60 minutes) Date: | A study team member will call you for a check-in about 4 weeks after you finish taking the study drug. During this call, we will ask if you have any new or worsening symptoms. | | | |
| Notes | | | | |
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