NIDA IMMUNOLOGY/VIROLOGY SUBSTUDY FORM NV01: NIDA IMMUNOLOGY/VIROLOGY ENROLLMENT INTERVIEW

SECTION A: GENERAL INFORMATION

A1.	PARTICIPANT ID: ENTER NUMBER H AVAILABLE	ERE ONLY IF ID LABEL IS NOT
A2.	WIHS VISIT #:	
A3.	FORM VERSION:	1 1 / 1 5 / 9 7 M D Y
A4.	DATE OF NIDA INTERVIEW	
A5.	INTERVIEWER'S INITIALS:	
A6.	TIME MODULE BEGAN:	_ : AM1 PM2

INTRODUCTION:

I would like to ask you a few additional questions about your use of street drugs and prescribed antiretroviral drugs. These questions should last no more than 3 - 5 minutes. Some of the questions may overlap or repeat those you've answered before but the time frame is different. I apologize in advance for any repetition and ask that you bear with me so I may obtain important information.

WIHS II	D#:	
	SECTION B: HISTORY OF DRUG USE	
B1.	Have you <u>ever</u> in your lifetime injected street drugs such as heroin, cocaine, speedball, or street methadone?	
	YES	
	a. How old were you when you first injected street drugs such as heroin, cocaine, speedball, or street methadone? (PROBE : Please give me your best estimate.)	
	YEARS OLD	
B2.	2. Have you ever in your lifetime snorted or smoked crack, cocaine, heroin, or speedball?	
	YES	
	a. How old were you when you first snorted or smoked crack, cocaine, heroin, or speedball? (PROBE : Please give me your best estimate.)	
	YEARS OLD	
В3.	I would like to ask additional questions specifically about snorting drugs. Did you ever <u>snort</u> cocaine, heroin, or speedball?	
	YES1	
	NO	
B4.	Which drugs did you snort?	
	Was it: YES NO	
	a. Cocaine? 1 2	
	b. Heroin? 1 2	
	c. Speedball? 1 2 d. Another drug? 1 2 (SPECIFY) 2	
B5.	Did you ever share straws while snorting?	
	YES	

WIHS ID#:		
B6.	Did you ever snort drugs three or more times per day?	
	YES	
B7.	Was your nose ever bleeding when you were snorting drugs?	
	YES	
B8.	Did you ever notice a bloody nose in someone else who was snorting drugs with you?	
	YES	