WOMEN'S INTERAGENCY HIV STUDY F29a: DRUG USAGE ASSESSMENT FOR BLOOD DRAW

PROMPT: THIS FORM IS TO BE COMLPETED BY THE PHLEBOTOMIST IMMEDIATELY PRECEDING THE PARTICIPANT'S BLOOD DRAW. IF PARTICIPANT IS HIV-NEGATIVE, FORM DOES NOT NEED TO BE COMPLETED.

PARTICIPANT ID:	- -	-	
WIHS STUDY VISIT:			
FORM VERSION:	10/01/05		
FORM COMPLETED BY:		DATE COMPLETED:	/ /

HAND PARTICIPANT ANTIRETROVIRAL PHOTO MEDICATION CARDS. GO THROUGH CARDS WITH PARTICIPANT, SAYING THE NAME OF EACH DRUG ALOUD AND ASKING HER TO TELL YOU "YES" OR "NO" WHETHER SHE HAS TAKEN THIS DRUG <u>IN THE PAST THREE DAYS.</u>

CHECK BELOW NEXT TO EACH DRUG THE PARTICIPANT REPORTS HAVING TAKEN. FOR DRUGS NOT LISTED, CHECK "OTHER ANTI-VIRAL," RECORD NAME AS STATED BY PARTICIPANT AND FILL IN CORRESPONDING 3-DIGIT DRUG CODE FROM DRUG LIST 1.

1a. I'm going to ask about any antiretroviral medications you may have taken in the past three days. In addition to all your prescribed medications, please include any antiretroviral medications you have taken as part of a research study, including those in which you may have been blinded to the study medication. In the past three days, have you taken...

Combination Medications

- 262 ____ Atripla (Sustiva + Viread + Emtriva)
- 227 ____ Combivir (AZT + 3TC)
- 254 ____ Epzicom (Ziagen + Epivir)
- 240 _____ Trizivir (abacavir + AZT + 3TC)
- 253 ____ Truvada (Viread + Emtriva)

Entry Inhibitors

- 233 _ Fuzeon (T-20, enfuvirtide)
- 265 _____ Selzentry (maraviroc)

Nucleoside/Nucleotide RTIs

- 239 ____ Emtriva (emtricitabine, FTC)
- 204 ____ Epivir (lamivudine, 3-TC)
- 092 ____ Retrovir (AZT, zidovudine, ZDV)
- 147 ____ Videx / Videx EC (didanosine, ddI)
- 234 _____ Viread (tenofovir)
- 159 ___ Zerit (stavudine, d4T)
- 218 ____ Ziagen (abacavir)

Integrase Inhibitors

264 ____ Isentress (raltegravir, MK 0518)

Specify name of "other" antiviral:

Specify name of "other" antiviral:

Non-Nucleoside RTIs

- 255 ____ Intelence (etravirine, TMC 125)
- 194 ____ Rescriptor (delavirdine)
- 220 ____ Sustiva (efavirenz)
- 191 ____ Viramune (nevirapine)

Protease Inhibitors

- 238 ____ Aptivus (tipranavir)
- 212 ____ Crixivan (indinavir)
- 210 ____ Invirase (saquinavir)
- 217 ___ Kaletra (lopinavir + ritonavir)
- 249 ____ Lexiva (fosamprenavir)
- 211 ____ Norvir (ritonavir)
- 256 ____ Prezista (TMC-114, darunavir)
- 243 ____ Reyataz (atazanavir)
- 216 _____ Viracept (nelfinavir)

<u>Other</u>

 \rightarrow Drug Code: |___|

 \rightarrow Drug Code: | |

207 ____ Droxia or Hydrea (hydroxyurea)

___ Other anti-viral(s) (from Drug List 1)

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b. If the participant is not taking ANY antiretroviral medications, check here:

c. ENTER THE TOTAL NUMBER OF ANTIRETROVIRAL MEDICATIONS THE PARTICIPANT REPORTED TAKING IN QUESTION 1a.

2. FOR EACH MEDICATION LISTED IN QUESTION 1a, ASK PARTICIPANT THE DATE AND TIME SHE LAST TOOK THAT MEDICATION AND COMPLETE COLUMNS A, B, C and D BELOW.

	A. Drug Code	B. Date Last Taken	C. Time Last Taken	D. AM/PM Indicator
				AM 1
i.		/ /		PM2
				AM 1
ii.		/ /	:	PM2
				AM 1
iii.		/ /	:	PM2
				AM 1
iv.		/ /	:	PM2
				AM 1
v.		/ /	:	PM2
				AM 1
vi.		/ /	:	PM2
				AM 1
vii.		/ /	:	PM2
				AM 1
viii.		/ /	:	PM2
				AM 1
ix.		/ /	:	PM2
				AM 1
х.		/ /		PM2

PROMPT: PROCEED WITH PARTICIPANT'S BLOOD DRAW.