WOMEN'S INTERAGENCY HIV STUDY METABOLIC STUDY FORM MSNOTI: PARTICIPATION NOTIFICATION

INSTRUCTIONS:

The purpose of this form is to track in the Data Management System when a participant enrolls into the Metabolic Substudy. This form should be completed for each participant that has been targeted as eligible for the Metabolic Substudy.

A1.	PARTICIPANT ID: ENTER NUMBER HERE ONLY IF ID LABEL IS NOT AVAILABLE	
A2.	FORM VERSION:	$\frac{0}{M}$ $\frac{4}{M}$ / $\frac{0}{M}$ D $\frac{1}{M}$ / $\frac{0}{M}$ $\frac{3}{M}$
A3.	FORM COMPLETED BY:	_
A4.	DOES PARTICIPANT CONSENT TO ENROLL INTO THE METABOLIC SUBSTUDY?	
	YES	
A5.	WIHS CORE VISIT NUMBER AT WHICH PARTICIPANT WAS ENROLLED INTO THE METABOLIC SUBSTUDY:	
A6.	DATE OF METABOLIC SUBSTUDY ENROLLMENT VISIT:	$-$ _M $^{\prime}$ $-$ _D $^{\prime}$ $-$ _Y $-$
A7.	INDICATE THE EXPOSURE GROUP OF WHICH THE PARTICIPANT IS A MEMBER:	
	HIV+; PRE-MENOPAUSAL; HAART N THREE YEARS PRIOR TO ENROLI HIV+; PRE-MENOPAUSAL; HAART EX YEARS PRIOR TO ENROLLMENT HIV-; PRE-MENOPAUSALHIV+; POST-MENOPAUSAL	LMENT
A8.	PARTICPANT'S AGE AT DATE OF ENROLLMENT:	
A9.	PARTICIPANT'S RACE/ETHNICITY:	
	WHITE, NON-HISPANIC	