

**WOMENS INTERAGENCY HIV STUDY – INTENSIVE PK STUDY**  
**FORM PK06: DOSING OF ANTIRETROVIRAL MEDICATIONS**

**SECTION A: GENERAL INFORMATION**

A1. PARTICIPANT ID: ENTER NUMBER HERE    |\_| - |\_| - |\_|\_|\_|\_| - |\_|  
 ONLY IF ID LABEL IS NOT AVAILABLE

A2. LAST WIHS CORE VISIT #:                        \_\_\_ \_\_\_

A3. VERSION DATE:                                    **10 / 01 / 06**

A4. DATE OF INTERVIEW:                            \_\_\_ / \_\_\_ / \_\_\_  
     M                D                Y

A5. INTERVIEWER’S INITIALS:                    \_\_\_ \_\_\_ \_\_\_

**A6. For each observed antiretroviral medication the participant takes at this PK visit at the time that PK sampling is started (right after the trough is drawn), please:**

A) Put a check next to all antiretroviral medications taken (both *study drugs* and *other* antiretrovirals) at the time the study starts.

B) Record the number of capsules or tablets or mL taken at the onset of sampling for each antiretroviral.

C) Some pills have different formulations (capsules or tablets or liquid forms). Indicate the actual pill form/dose or the liquid form/dose taken for each drug.

***DO NOT record antiretroviral doses taken throughout the entire day of PK testing, only those taken at the time PK sampling is started.***

		a. Name of drug	b. # pills (or mL) taken	c. Formulation of drug
<b>STUDY ANTIRETROVIRALS</b>				
217	___	Kaletra (lopinavir + ritonavir)	_ _  tablets or mL	Liquid form .....2 (80mg lopinavir/20mg ritonavir) Tablet form .....3 (200mg lopinavir/50mg ritonavir)
216	___	Viracept (nelfinavir)	_ _  tablets	625 mg tablet .....1 (usually 2 tabs 2x/day) 250 mg tablet .....2 (usually 5 tabs 2x/day)
220	___	Sustiva (efavirenz)	_ _  tablets or capsules	600 mg tablet .....1 200 mg capsule .....2 100 mg capsule .....3 50 mg capsule .....4
191	___	Viramune (nevirapine)	_ _  tablets or mL	Tablet form (200 mg) .....1 Liquid form (50 mg/5 mL) .....2
243	___	Reyataz (atazanavir)	_ _  capsules	200 mg capsule .....1 150 mg capsule .....2 100 mg capsule .....3 300 mg capsule .....4
<b>OTHER ANTIRETROVIRALS</b>				
<b><i>Nucleoside/Nucleotide RTIs (NRTIs)</i></b>				
204	___	Epivir (3TC, lamivudine)	_ _  tablets or mL	300 mg tablet .....1 150 mg tablet .....2 Liquid form (10 mg/mL) .....3
218	___	Ziagen (abacavir)	_ _  tablets or mL	300 mg tablet .....1 Liquid form (20 mg/mL) .....2
092	___	Retrovir (AZT, zidovudine, ZDV)	_ _  tablets or capsules or mL	300 mg tablet .....1 100 mg capsule .....2 Liquid form (50 mg/5 mL) .....3

		a. Name of drug	b. # pills (or mL) taken	c. Formulation of drug
159	__	Zerit (stavudine, d4T)	_ _  capsules or mL	40 mg capsule.....1 30 mg capsule.....2 20 mg capsule.....3 15 mg capsule.....4 Liquid form (1 mg/mL) .....5
094	__	Hivid (zalcitabine, ddC)	_ _  tablets	0.750 mg tablet.....1 0.375 mg tablet.....2
147	__	Videx (didanosine, ddI)	_ _  capsules or tablets or mL	400 mg capsule.....1 250 mg capsule.....2 200 mg capsule.....3 125 mg capsule.....4 200 mg tablet.....5 150 mg tablet.....6 100 mg tablet.....7 50 mg tablet.....8 25 mg tablet.....9 Liquid form (20 mg/mL).....10 Liquid form (10 mg/mL).....11
234	__	Viread (tenofovir)	_ _  tablets	300mg tablet
239	__	Emtriva (emtricitabine, FTC)	_ _  capsules	200mg capsule
<b>Non-nucleoside RTIs (NNRTIs)</b>				
194	__	Rescriptor (delavirdine)	_ _  tablets	200 mg tablet.....1 100 mg tablet.....2
<b>Protease Inhibitors (PIs)</b>				
219	__	Agenerase (amprenavir)	_ _  capsules	150 mg capsule.....1 50 mg capsule.....2
212	__	Crixivan (indinavir)	_ _  capsules	400 mg capsule.....1 333 mg capsule.....2 200 mg capsule.....3 100 mg capsule.....4
211	__	Norvir (ritonavir)	_ _  capsules or mL	100 mg capsule.....1 Liquid form (80 mg/mL) .....2
210	__	Invirase or Fortovase (saquinavir)	_ _  capsules or tablets	200 mg Fortovase capsule .....1 200 mg Invirase capsule .....2 500 mg Invirase tablet .....3
238	__	Aptivus (tipranvir)	_ _  capsules	250mg capsule
249	__	Lexiva (fosamprenavir)	_ _  capsules	700mg capsule
256	__	Prezista (TMC-114, darunavir)	_ _  capsules	300mg capsule
<b>Entry Inhibitors</b>				
233	__	Fuzeon (T-20, enfuvirtide)	_ _  vials	90mg vial

		<b>a. Name of drug</b>	<b>b. # pills (or mL) taken</b>	<b>c. Formulation of drug</b>
<b><i>Combination Medications</i></b>				
262	__	Atripla (Sustiva + Viread + Emtriva)	_ _  tablets	600 mg efavirenz/ 200 mg emtricitabine/ 300 mg tenofovir
227	__	Combivir (AZT + 3TC)	_ _  tablets	300mg AZT / 150mg 3TC tablet
254	__	Epzicom (Ziagen + Epivir)	_ _  tablets	300mg lamivudine/600mg abacavir tablet
240	__	Trizivir (abacavir + AZT + 3TC)	_ _  tablets	300mg abacavir/300mg AZT/ 150mg 3TC tablet
253	__	Truvada (Viread + Emtriva)	_ _  tablets	300mg tenofovir/200mg FTC tablet

A7. ENTER THE TOTAL NUMBER OF ANTIRETROVIRAL MEDICATIONS  
 TAKEN BY THE PARTICIPANT AS INDICATED IN QUESTION A6:

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