WOMEN'S INTERAGENCY HIV STUDY
QUESTION BY QUESTION SPECIFICATIONS
FORM PMU02: Follow-up Pain Medication Use Questionnaire

NOTE: This form asks about pain medications the participant has taken <u>in the past year</u> since this form is administered annually. Please emphasize that the timeframe for these questions is "in the past year," NOT since the participant's last study visit. If the participant has trouble answering, ask her to give her best guess.

NOTE: This form asks about medications the participant has taken for "pain." Please emphasize that medications taken for reasons other than for pain (e.g., for sleeping, anxiety, asthma, etc.), SHOULD NOT be reported on this form.

SECTION B

B1. *HAND PARTICIPANT RESPONSE CARD PMU1 – Non-steroidal Anti-inflammatories (NSAIDS).* Have the participant indicate whether she has taken any of the listed medications in the past year **<u>for her pain</u>**. If "no," skip to **Question B2**. If "yes," have her answer **Questions a-j** regarding where she obtained the medications and how much she took.

a-h. Have the participant answer "yes" or "no" for **<u>each question</u>** regarding how she obtained the medications in Question B1. "Yes" may be circled for more than one option.

i. Indicate the average number of times per day that the participant took the medications Question B1. E.g., if she reports taking two pills twice a day, then enter "2 times per day." If she is using a pain patch, then enter the number of times per day one is applied. If the participant took more than one medication and they have different dosage schedules (e.g., two times per day for Aleve and six times per day for ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above, report six times per day).

j. Indicate the total number of days, weeks, months, or years the participant took the medications in Question B1. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B2. *HAND PARTICIPANT RESPONSE CARD PMU2 – Steroidal Anti-inflammatories.* Have the participant indicate whether she has taken any of the listed medications in the past year **<u>for her pain</u>**. If "no," skip to **Question B3**. If "yes," have her answer **Questions a-j** regarding where she obtained the medications and how much she took.

a-h. Have the participant answer "yes" or "no" for **<u>each question</u>** regarding how she obtained the medications in Question B2. "Yes" may be circled for more than one option.

i. Indicate the average number of times per day that the participant took the medications Question B2. E.g., if she reports taking two pills twice a day, then enter "2 times per day." If she is using a pain patch, then enter the number of times per day one is applied. If the participant took more than one medication and they have different dosage schedules (e.g., two times per day for Aleve and six times per day for ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above, report six times per day).

j. Indicate the total number of days, weeks, months, or years the participant took the medications in Question B2. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B3. *HAND PARTICIPANT RESPONSE CARD PMU3 – Antidepressant Drugs.* Have the participant indicate whether she has taken any of the listed medications in the past year **<u>for her pain</u>**. **Do not include any medications the participant took solely for depression.** If "no," skip to **Question B4**. If "yes," have her answer **Questions a-j** regarding where she obtained the medications and how much she took.

a-h. Have the participant answer "yes" or "no" for **<u>each question</u>** regarding how she obtained the medications in Question B3. "Yes" may be circled for more than one option.

i. Indicate the average number of times per day that the participant took the medications Question B3. E.g., if she reports taking two pills twice a day, then enter "2 times per day." If she is using a pain patch, then enter the number of times per day one is applied. If the participant took more than one medication and they have different dosage schedules (e.g., two times per day for Aleve and six times per day for ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above, report six times per day).

j. Indicate the total number of days, weeks, months, or years the participant took the medications in Question B3. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B4. *HAND PARTICIPANT RESPONSE CARD PMU4 – Anticonvulsant/Antiepileptic Drugs.* Have the participant indicate whether she has taken any of the listed medications in the past year **for her pain**. **Do not include any medications the participant took solely for convulsions or epilepsy.** If "no," skip to **Question B5**. If "yes," have her answer **Questions a-j** regarding where she obtained the medications and how much she took.

a-h. Have the participant answer "yes" or "no" for **each question** regarding how she obtained the medications in Question B4. "Yes" may be circled for more than one option.

i. Indicate the average number of times per day that the participant took the medications Question B4. E.g., if she reports taking two pills twice a day, then enter "2 times per day." If she is using a pain patch, then enter the number of times per day one is applied. If the participant took more than one medication and they have different dosage schedules (e.g., two times per day for Aleve and six times per day for ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above, report six times per day).

j. Indicate the total number of days, weeks, months, or years the participant took the medications in Question B4. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B5. *HAND PARTICIPANT RESPONSE CARD PMU5 – Topical Anesthetics.* Have the participant indicate whether she has taken any of the listed medications in the past year **for her pain**. If "no," skip to **Question B6**. If "yes," have her answer **Questions a-j** regarding where she obtained the medications and how much she took.

a-h. Have the participant answer "yes" or "no" for **each question** regarding how she obtained the medications in Question B5. "Yes" may be circled for more than one option.

i. Indicate the average number of times per day that the participant took the medications Question B5. E.g., if she reports taking two pills twice a day, then enter "2 times per day." If she is using a pain patch, then enter the number of times per day one is applied. If the participant took more than one medication and they have different dosage schedules (e.g., two times per day for Aleve and six times per day for ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above, report six times per day).

j. Indicate the total number of days, weeks, months, or years the participant took the medications in Question B5. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B6. *HAND PARTICIPANT RESPONSE CARD PMU6 – Mild Opioid Drugs.* Have the participant indicate whether she has taken any of the listed medications in the past year **for her pain**. If "no," skip to **Question B7**. If "yes," have her answer **Questions a-j** regarding where she obtained the medications and how much she took.

a-h. Have the participant answer "yes" or "no" for **each question** regarding how she obtained the medications in Question B6. "Yes" may be circled for more than one option.

i. Indicate the average number of times per day that the participant took the medications Question B6. E.g., if she reports taking two pills twice a day, then enter "2 times per day." If she is using a pain patch, then enter the number of times per day one is applied. If the participant took more than one medication and they have different dosage schedules (e.g., two times per day for Aleve and six times per day for

ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above, report six times per day).

j. Indicate the total number of days, weeks, months, or years the participant took the medications in Question B6. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B7. *HAND PARTICIPANT RESPONSE CARD PMU7 – Strong Opioid Drugs.* Have the participant indicate whether she has taken any of the listed medications in the past year **for her pain**. If "no," skip to **Question B8**. If "yes," have her answer **Questions a-j** regarding where she obtained the medications and how much she took.

a-h. Have the participant answer "yes" or "no" for **each question** regarding how she obtained the medications in Question B7. "Yes" may be circled for more than one option.

i. Indicate the average number of times per day that the participant took the medications Question B7. E.g., if she reports taking two pills twice a day, then enter "2 times per day." If she is using a pain patch, then enter the number of times per day one is applied. If the participant took more than one medication and they have different dosage schedules (e.g., two times per day for Aleve and six times per day for ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above, report six times per day).

j. Indicate the total number of days, weeks, months, or years the participant took the medications in Question B7. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B8. *HAND PARTICIPANT RESPONSE CARD PMU8 - Marijuana.* Have the participant indicate whether she has taken any of the listed drugs or medications in the past year **for her pain**. **If she has used marijuana for other reasons, e.g., recreational use, to increase appetite, for insomnia, etc., do not answer "yes."** If "no," skip to **Question B9**. If "yes," have her answer **Questions a-j** regarding where she obtained the marijuana/hash or Marinol and how much she took.

a-h. Have the participant answer "yes" or "no" for **each question** regarding how she obtained the drugs or medications in Question B8. "Yes" may be circled for more than one option.

i. Indicate the average number of times per day that the participant took the medications/marijuana Question B8. E.g., if she reports taking two pills twice a day or smoking two joints per day, then enter "2 times per day." If she is using a pain patch, then enter the number of times per day one is applied. If the participant took more than one medication, or both Marinol and marijuana, and they have different dosage schedules (e.g., two times per day for Aleve and six times per day for ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above, report six times per day).

j. Indicate the total number of days, weeks, months, or years the participant took the drugs or medications in Question B8. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B9. *HAND PARTICIPANT RESPONSE CARD PMU9 – Sleeping Medications.* Have the participant indicate whether she has taken any of the listed medications in the past year **for her pain**. **Do not include medications she has taken solely for insomnia.** If "no," skip to **Question B10**. If "yes," have her answer **Questions a-j** regarding where she obtained the medications and how much she took.

a-h. Have the participant answer "yes" or "no" for **each question** regarding how she obtained the medications in Question B9. "Yes" may be circled for more than one option.

i. Indicate the average number of times per day that the participant took the medications Question B9. E.g., if she reports taking two pills twice a day, then enter "2 times per day." If she is using a pain patch, then enter the number of times per day one is applied. If the participant took more than one medication and they have different dosage schedules (e.g., two times per day for Aleve and six times per day for ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above, report six times per day).

j. Indicate the total number of days, weeks, months, or years the participant took the medications in Question B9. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B10.   *HAND PARTICIPANT RESPONSE CARD PMU10 – Sedative or Anxiety Medication.* Have the
participant indicate whether she has taken any of the listed medications in the past year **for her pain**. **Do
not include medications she has taken solely for insomnia or anxiety.** If "no," skip to **Question B11**.
If "yes," have her answer **Questions a-j** regarding where she obtained the medications and how much she
took.

a-h.   Have the participant answer "yes" or "no" for **each question** regarding how she obtained the medications
in Question B10. "Yes" may be circled for more than one option.

i.   Indicate the average number of times per day that the participant took the medications Question B10. E.g.,
if she reports taking two pills twice a day, then enter "2 times per day." If she is using a pain patch, then
enter the number of times per day one is applied. If the participant took more than one medication and
they have different dosage schedules (e.g., two times per day for Aleve and six times per day for
ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above,
report six times per day).

j.   Indicate the total number of days, weeks, months, or years the participant took the medications in
Question B10. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B11.   *HAND PARTICIPANT RESPONSE CARD PMU11 – Muscle Relaxant Medication.* Have the participant
indicate whether she has taken any of the listed medications in the past year **for her pain**. If "no," skip to
Question B12. If "yes," have her answer **Questions a-j** regarding where she obtained the medications
and how much she took.

a-h.   Have the participant answer "yes" or "no" for **each question** regarding how she obtained the medications
in Question B11. "Yes" may be circled for more than one option.

i.   Indicate the average number of times per day that the participant took the medications Question B11. E.g.,
if she reports taking two pills twice a day, then enter "2 times per day." If she is using a pain patch, then
enter the number of times per day one is applied. If the participant took more than one medication and
they have different dosage schedules (e.g., two times per day for Aleve and six times per day for
ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above,
report six times per day).

j.   Indicate the total number of days, weeks, months, or years the participant took the medications in
Question B11. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B12.   *HAND PARTICIPANT RESPONSE CARD PMU12 – Migraine Medication.* Have the participant indicate
whether she has taken any of the listed medications in the past year **for her pain**. If "no," skip to
Question B13. If "yes," have her answer **Questions a-j** regarding where she obtained the medications
and how much she took.

a-h.   Have the participant answer "yes" or "no" for **each question** regarding how she obtained the medications
in Question B12. "Yes" may be circled for more than one option.

i.   Indicate the average number of times per day that the participant took the medications Question B12. E.g.,
if she reports taking two pills twice a day, then enter "2 times per day." If she is using a pain patch, then
enter the number of times per day one is applied. If the participant took more than one medication and
they have different dosage schedules (e.g., two times per day for Aleve and six times per day for
ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above,
report six times per day).

j.   Indicate the total number of days, weeks, months, or years the participant took the medications in
Question B12. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B13.   *HAND PARTICIPANT RESPONSE CARD PMU13 – Stimulant Medication.* Have the participant indicate
whether she has taken any of the listed medications in the past year **for her pain**. **Do not include
medications the participant has taken solely for their stimulant properties, e.g., medications taken
only for ADD or ADHD.** If "no," skip to **Question B14**. If "yes," have her answer **Questions a-j**
regarding where she obtained the medications and how much she took.

a-h. Have the participant answer "yes" or "no" for **each question** regarding how she obtained the medications in Question B13. "Yes" may be circled for more than one option.

i. Indicate the average number of times per day that the participant took the medications Question B13. E.g., if she reports taking two pills twice a day, then enter "2 times per day." If she is using a pain patch, then enter the number of times per day one is applied. If the participant took more than one medication and they have different dosage schedules (e.g., two times per day for Aleve and six times per day for ibuprofen), report the number of times for the drug taken most frequently (i.e., in the example above, report six times per day).

j. Indicate the total number of days, weeks, months, or years the participant took the medications in Question B13. Enter the number, and then circle "1," "2," "3," or "4" to indicate the time period.

B14. Record the time module was completed.