WOMEN'S INTERAGENCY HIV STUDY TRANSFER FORM

SECTION A: TO BE COMPLETED BY SITE AT WHICH THE PARTICIPANT WAS ORIGINALLY ENROLLED

A1.	ORIGINAL PARTICIPANT II	D#: _ _ _ _	
A2.	FORM VERSION DATE:	$\frac{1}{M} \frac{0}{M} / \frac{0}{D} \frac{1}{D} / \frac{0}{Y} \frac{1}{Y}$	
A3.	LAST WIHS STUDY VISIT N ORIGINAL SITE:	IUMBER AT	
A4.	DATE OF LAST WIHS STUD AT ORIGINAL SITE:	OY VISIT /	
A5.	FORM COMPLETED BY (IN	ITIALS):	
A6.	DATE FORM COMPLETED:	- M D Y	
SECTION B: TRANSFER INFORMATION			
B1.	TYPE OF TRANSFER		
	TO ANOTHEI TO ANOTHEI	R CLINIC WITHIN THE CONSORTIUM1 (B2) R WIHS CONSORTIUM2 (B3)	
B2.	SUB-SITE/CLINIC TO WHICH THE PARTICIPANT TRANSFERS (PROMPT)		
		<u> </u>	
		TO THE DATA MANAGER FOR DATA ENTRY; END.	
	WIHS CONSORTIUM TO WE Bronx/Manhat Brooklyn Washington, D Los Angeles San Francisco		
PROM	WIHS CONSORTIUM TO WE Bronx/Manhat Brooklyn	TO THE DATA MANAGER FOR DATA ENTRY; END. HICH THE PARTICIPANT TRANSFERS tan	
PROM B3.	WIHS CONSORTIUM TO WI Bronx/Manhat Brooklyn Washington, D Los Angeles San Francisco Chicago THE FOLLOWING INFORMA AT THE NEW SITE:	TO THE DATA MANAGER FOR DATA ENTRY; END. HICH THE PARTICIPANT TRANSFERS tan	
PROM B3.	WIHS CONSORTIUM TO WI Bronx/Manhat Brooklyn Washington, D Los Angeles San Francisco Chicago THE FOLLOWING INFORMA AT THE NEW SITE:	TO THE DATA MANAGER FOR DATA ENTRY; END. HICH THE PARTICIPANT TRANSFERS tan	

d. Substudy Enrollment: (CIRCLE ALL THAT APPLY)	ANAL
e. Dates of all prior visits also	need to be entered at the new site (MM/DD/YY).
Visit 1:/	Visit 12:/
Visit 2:/	Visit 13:/
Visit 3:/	Visit 14:/
Visit 4:/	Visit 15:/
Visit 5:/	Visit 16:/
Visit 6:/	Visit 17:/
Visit 7:/	Visit 18:/
Visit 8:/	Visit 19:/
Visit 9:/	Visit 20:/
Visit 10:/	/ Visit 21:/
Visit 11:/	/ Visit 22://
PROMPT: FORWARD THIS FO	DRM TO THE PROJECT DIRECTOR AT THE RECIPIENT SITE.
SECTION C: TO BE COMPLETE C1. NEW ID # ASSIGNMENT:	D BY THE RECIPIENT SITE
PROM	IPT: FORWARD NEW ID TO WDMAC.