WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		BASELINE		PRE-VISIT 9		VISIT 9		VISIT 10		VISIT 11	
FOLLOW-UP INTERVIEW/EXAM FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
DRUG1	Antiretroviral Medications	na	na	na	na	10/1/1998	10/1/1998	4/1/1999	4/1/1999	10/1/1999a	10/1/1999
DRUG2	Non-antiviral Medications	na	na	na	na	10/1/1998	10/1/1998	4/1/1999	4/1/1999	4/1/1999a	4/1/1999a
DRUG3	Hepatitis Medications	na	na	na	na	na	na	na	na	na	na
DSG	Antiretroviral Dosage	na	na	na	na	na	na	na	na	na	na
F07	Physical Exam	8/15/1994	8/15/1994	8/15/1994c	4/1/1995	10/1/1998	10/1/1998a	4/1/1999a	4/1/1999a	10/1/1999	10/1/1999
F08	Gynecological Exam	8/15/1994	8/15/1994	4/1/1995d	4/1/1995	10/1/1998	10/1/1998	4/1/1999a	4/1/1999a	10/1/1999	10/1/1999
F08a	Potential CVL Contaminants	10/15/1995	na	10/15/1995	na	10/1/1998	na	10/1/1998	na	10/1/1998	na
F01*/F21	Sociodemographics	8/15/1994c	8/15/1994	4/1/1995	4/1/1995	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998a	10/1/1998a
F02*/F22*	Medical & Health History (visits 1 - 16)	8/15/1994c	8/15/1994	8/15/1996	9/15/1997	10/1/1998b	10/1/1998	4/1/1999b	4/1/1999b	10/1/1999a	10/1/1999a
F22HX	Follow-up Health History (visit 17+)	na	na	na	na	na	na	na	na	na	na
F22MED	Medication History (visit 17+)	na	na	na	na	na	na	na	na	na	na
F03*/F23	OB/GYN History	10/15/1994	8/15/1994	3/1/1996	8/1/1995	10/1/1998a	10/1/1998	10/1/1998c	10/1/1998c	10/1/1999	10/1/1999
F04*/F24*	Alcohol, Drugs & Sexual Behavior (visits 1 - 24)	8/15/1994c	8/15/1994	6/1/1997	6/15/1997	10/1/1998a	10/1/1998	4/1/1999	4/1/1999	10/1/1999a	10/1/1999a
F24BEH	Alcohol, Drugs & Sexual Behavior (visit 25+)	na	na	na	na	na	na	na	na	na	na
F05*/F25	Health Care Utilization	8/15/1994c	8/15/1994	4/1/1995	9/15/1997	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
F25a*	Health Care Utilization Supplement	na	na	8/1/1995	9/15/1997	10/1/1998a	10/1/1998	na	na	10/1/1998a	10/1/1998
F06*/F26	Psychosocial	10/15/1994d	8/15/1994	4/1/1995	4/1/1995	10/1/1998	10/1/1998	10/1/1998b	10/1/1998b	na	na
F26r*	History of Abuse	na	na	na	na	na	na	na	na	na	na
FHX*	Family and Personal History	na	na	na	na	na	na	na	na	na	na
NP01*	Neuropathy Signs and Symptoms - baseline	na	na	na	na	na	na	na	na	na	na
NP02	Neuropathy Signs and Symptoms - follow up	na	na	na	na	na	na	na	na	na	na

MISCELLANEOUS SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
DERM*	Dermatology Addendum	na	na	na	na	na	na	na	na	na	na
F23a*	Fertility and Infertility History	na	na	na	na	na	na	na	na	na	na
F25b*	Mental Health Care Utilization	na	na	na	na	na	na	na	na	na	na
FSFI*	Female Sexual Functioning Inventory	na	na	na	na	na	na	na	na	na	na
HPVKAB*	HPV Knowledge and Beliefs	na	na	na	na	na	na	na	na	na	na
MINOTI	Mucosal Immunity Notificaiton Form	na	na	na	na	na	na	na	na	na	na
TRUST*	Opinions about Health System and HIV/AIDS	na	na	na	na	na	na	na	na	na	na

SPECIMEN COLLECTION FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
F10*	Plasma & Cell Separation and Freezing	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994
F09*/F29	Blood Specimen Collection Form	8/15/1994c	na	3/1/1996	3/1/1996	3/1/1996	3/1/1996	3/1/1996	3/1/1996	3/1/1996a	3/1/1996
F29a	Antiviral Usage Assessment for Blood Draw	na	na	na	na	na	na	na	na	10/1/1999a	10/1/1999
F11*/F31	Specimens Collected During PE	8/15/1994c	na	8/1/1995	8/1/1995	8/1/1995	8/1/1995	4/1/1999	4/1/1999	10/1/1999	10/1/1999
F31a	Hair Color, Texture and Treatment History	na	na	na	na	na	na	na	na	na	na
L20	Repository Specimen Processing	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		BASELINE		PRE-VISIT 9		VISIT 9		VISIT 10		VISIT 11	
LOCAL LAB FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
L01	HIV ELISA and Western Blot	8/15/1994	na	8/15/1994	na	10/1/1998	na	10/1/1998	na	10/1/1998	na
L02*	Serum Antibody Tests - Hepatitis	8/15/1994	na	na	na	na	na	na	na	na	na
L03	Automated CBC/Differential	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994a	na
L03a	Hand-Manual Differential	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
L04	Flow Cytometry	8/15/1994	na	8/15/1994	na	10/1/1998	na	10/1/1998a	na	10/1/1998b	na
L05	Liver/Renal Function Tests	8/15/1994c	na	8/15/1994c	na	8/15/1994c	na	na	na	8/15/1994c	na
L06*	Serum Antibody Tests - Syphilis Screening	8/15/1994c	na	na	na	na	na	na	na	na	na
L07*	Mantoux Skin Test Result Anergy Panel	8/15/1994	na	8/15/1994	na	8/15/1994	na	na	na	10/1/1999	na
L08*	PPD Skin Test	1/15/1995	na	1/15/1995	na	1/15/1995	na	na	na	10/1/1999	na
L09*	Chlamydia	8/15/1994	na	na	na	na	na	na	na	na	na
L10*	Urinalysis	8/15/1994c	na	8/15/1994c	na	na	na	na	na	na	na
L11*	Urine Culture Results	8/15/1994	na	8/15/1994	na	na	na	na	na	na	na
L12	(Urine) Pregnancy Test	8/15/1994d	na	8/15/1994d	na	8/15/1994d	na	8/15/1994d	na	8/15/1994d	na
L13*	Gonorrhea	8/15/1994	na	na	na	na	na	na	na	na	na
L14	Colposcopy Results	9/15/1995	9/15/1997	9/15/1995	9/15/1997	9/15/1995	9/15/1997	9/15/1995	9/15/1997	9/15/1995	9/15/1997
L15	Biopsy Histopathology Pelvic Exam	9/15/1995	9/15/1997	9/15/1995	9/15/1997	9/15/1995	9/15/1997	4/1/1999a	4/1/1999	4/1/1999a	4/1/1999
L16	Dysplasia Treatment	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997
L17*	Herpes Culture of Ulcers and Fissures	10/15/1994d	na	na	na	na	na	na	na	na	na
L18	Trichomonas Vaginalis Culture (optional)	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
L19*	CVL Processing	8/25/1997	na	8/25/1997	na	10/1/1998	na	10/1/1998	na	10/1/1999	na
CENTRAL LAB FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
C30*	Toxoplasma Serology	8/15/1994	na	na	na	na	na	na	na	na	na
C31*	Human Retrovirus Testing	4/1/1995c	na	na	na	na	na	na	na	na	na
C45	Bacterial Vaginosis Smear Gram Stain	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
C50*	Urine for Chlamydia	8/15/1994	na	8/15/1994	na	8/15/1994	na	na	na	8/15/1994	na
C52	HPV by PCR	8/1/1995	na	8/1/1995	na	8/1/1995	na	8/1/1995	na	8/1/1995	na
C54	Viral Load	12/16/1996	na	12/16/1996	na	10/1/1998	na	10/1/1998	na	10/1/1998	na
C60	Pap Smear	8/15/1994	na	8/15/1994	na	10/1/1998	na	4/1/1999	na	4/1/1999	na
C60a*	Pap Smear Retrospective Re-Read v1-15	na	na	na	na	na	na	na	na	na	na
C60b*	Pap Smear Retrospective Re-Read v16	na	na	na	na	na	na	na	na	na	na
C65*	Syphilis DFA - Genital Ulcers & Fissure	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
C66*	Serum Antibody Type-Specific Herpes Serology	1/6/1997	na	na	na	na	na	na	na	na	na
C70*	Laboratory - Stimulated Saliva Evaluation	10/15/1996	na	10/15/1996	na	10/15/1996	na	10/15/1996	na	10/15/1996	na
C71*	Laboratory - Subgingival Plaque	10/15/1996	na	10/15/1996	na	10/15/1996	na	4/1/1999	na	4/1/1999	na
C72*	Laboratory - Erythematous Candidiasis Smear Results	na	na	na	na	na	na	4/1/1999a	na	4/1/1999a	na
ADMINISTRATIVE FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ABRV	Abbreviated Visit	na	na	8/1/1997	na	8/1/1997	na	8/1/1997	na	8/1/1997	na
ANTHRO	Anthropometry Training Form	na	na	na	na	na	na	na	na	na	na
CONS	Consent Status Tracking Form	na	na	na	na	na	na	na	na	na	na
CRST*	Central Repository Shipment Tracking	na	na	na	na	na	na	na	na	na	na
DENR	Disenrollment Form	na	na	6/15/1997	11/1/1997	10/1/1998	10/1/1998	4/1/1999b	4/1/1999b	4/1/1999b	4/1/1999b
INT*	Interim Events Form	na	na	na	na	na	na	4/1/1999	na	10/1/1999	na
MVIS	Missed Visit Form	na	na	8/1/1996	8/1/1996c	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
REF	Referral Checklist	na	na	na	na	na	na	na	na	na	na
TRANS	Transfer Form	na	na	9/1/1995	na	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		BASELINE		PRE-VISIT 9		VISIT 9		VISIT 10		VISIT 11	
OUTCOMES ASCERTAINMENT FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ACS*	Ascertainment Control Sheet	na	na	na	na	na	10/1/1998	na	4/1/1999a	na	4/1/1999a
ACSR ATC*	ACSR Ascertainment Tracking Checklist	na	na	na	na	na	na	4/1/1999	na	4/1/1999	na
ATC	Ascertainment Tracking Checklist	8/15/1994c	9/15/1997	2/1/1997	9/15/1997	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998a	10/1/1998a
CNCR	Cancer Registry Case Report	na	na	na	na	na	na	5/20/1999	5/20/1999	5/20/1999	5/20/1999
CORE	Clinical Outcomes Reporting Form	na	na	na	na	na	na	4/1/1999b	4/1/1999a	4/1/1999b	4/1/1999d
QCCD	QC Review of Cancer Diagnoses	na	na	na	na	na	na	na	na	na	na
QCGY	QC Review of Gynecologic Material	na	na	na	na	na	na	na	na	na	na
QCHS*	Hysterectomy Abstraction Form	na	na	na	na	na	na	na	na	na	na
QCLB	Liver Biopsy Abstraction Form	na	na	na	na	na	na	na	na	na	na
QCSS	QC Central Review of Surgical Specimens	na	na	na	na	na	na	na	na	na	na
TB	TB - Verified Case Report	na	na	na	na	na	na	1/12/1999	1/12/1999	1/12/1999	1/12/1999
VAC*	Vaccination History Form	na	na	na	na	na	na	na	na	na	na
CARDIOVASCULAR SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
CVNOTI*	Participant Notification	na	na	na	na	na	na	na	na	na	na
CV01	Carotid Ultrasound Tracking Form	na	na	na	na	na	na	na	na	na	na
CV29*	Fasting Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na
HHV-8 SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
HVDENR*	Disenrollment	na	na	na	na	na	na	4/1/1999	na	4/1/1999	na
HVMVIS*	Missed Visit	na	na	na	na	na	na	4/1/1999	na	4/1/1999	na
HVNOTI*	Recruitment Outcome Form	na	na	na	na	na	na	4/1/1999	na	4/1/1999	na
HVSPEC*	Specimen Collection	na	na	na	na	na	na	4/1/1999	na	4/1/1999	na
INTENSIVE PK SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PK01	Eligibility for Intensive PK Stubstudy	na	na	na	na	na	na	na	na	na	na
PKNOTI	PK: Participant notification	na	na	na	na	na	na	na	na	na	na
PK02	PK: Current Antiretroviral medication use	na	na	na	na	na	na	na	na	na	na
PK02a	PK: Antiretroviral adherence	na	na	na	na	na	na	na	na	na	na
PK03	PK: Recent illnesses, concurrent meds & OB/GYN hist	na	na	na	na	na	na	na	na	na	na
PK04	PK: Recent substance use	na	na	na	na	na	na	na	na	na	na
PK05a	PK: Weight and Specimen collection: group A	na	na	na	na	na	na	na	na	na	na
PK05b	PK: Weight and Specimen collection: group B	na	na	na	na	na	na	na	na	na	na
PK05c	PK: Weight and Specimen collection: group C	na	na	na	na	na	na	na	na	na	na
PK06	PK: Dosing of antiretroviral medications	na	na	na	na	na	na	na	na	na	na
PK07	PK: Plasma Separation and Freezing Form	na	na	na	na	na	na	na	na	na	na
PK08	PK: Dietary Fat Percentage Questionnaire	na	na	na	na	na	na	na	na	na	na
PK-DIET	PK: Dietary Assessment	na	na	na	na	na	na	na	na	na	na
MALT / GALT SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
MG01	Pre-Eligibility (complete after core)	na	na	na	na	na	na	na	na	na	na
MG02	Pre-Eligibility (complete by study coordinator)	na	na	na	na	na	na	na	na	na	na
MG03	Screening Visit	na	na	na	na	na	na	na	na	na	na
MG04	Notification of Enrollment (NOTI)	na	na	na	na	na	na	na	na	na	na
MG05	Colonoscopy/EMB Preparation Checklist/Worksheet	na	na	na	na	na	na	na	na	na	na
MG06	Colonoscopy Procedure Form	na	na	na	na	na	na	na	na	na	na
MG07	Endometrial & Endocervical Biopsy Procedure Form	na	na	na	na	na	na	na	na	na	na
MG08	Biopsy Specimen Tracking Form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		BASELINE		PRE-VISIT 9		VISIT 9		VISIT 10		VISIT 11	
NEUROCOGNITION AND AGING FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
F26a*	Assessment of Physical Functioning	na	na	na	na	na	na	na	na	na	na
MEN01	Menopause Symptom Questionnaire	na	na	na	na	na	na	na	na	na	na
NC01a	Cognitive Measures (Standard TMT and SDMT)	na	na	na	na	na	na	na	na	na	na
NC01a*	Interviewer Script	na	na	na	na	na	na	na	na	na	na
NC01b*	Cognitive Measures (Color TMT)	na	na	na	na	na	na	na	na	na	na
NC01b*	Interviewer Script	na	na	na	na	na	na	na	na	na	na
NC02a	English Word List (WRAT)	na	na	na	na	na	na	na	na	na	na
NC03	Educational Experience	na	na	na	na	na	na	na	na	na	na
NC04	Wechsler Test of Adult Reading (WTAR)	na	na	na	na	na	na	na	na	na	na
NC05*	Interviewer Feedback	na	na	na	na	na	na	na	na	na	na
NC06	Hopkins Verbal Learning Test-Revised	na	na	na	na	na	na	na	na	na	na
NC07	Stroop Test	na	na	na	na	na	na	na	na	na	na
NC08	Verbal Fluency	na	na	na	na	na	na	na	na	na	na
NC09	Letter Number Span	na	na	na	na	na	na	na	na	na	na
NC10	Grooved Pegboard	na	na	na	na	na	na	na	na	na	na
PAQ*	Physical Activity Questionnaire	na	na	na	na	na	na	na	na	na	na
PBM*	Performance-based Measurements	na	na	na	na	na	na	na	na	na	na
PTSD	Civilian Post-Traumatic Stress Disorder Questionnaire	na	na	na	na	na	na	na	na	na	na

NIDA I/V AND HCU											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
NI01*	Health Care Utilization Collaborative WIHS/HERS Interview	na	na	11/1/1996c	11/1/1996c	10/1/1998	10/1/1998	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a
NI02*	General Abstraction	na	na	9/15/1997	9/15/1997	na	na	na	na	na	na
NI03*	Pneumonia Abstraction	na	na	11/1/1996	11/1/1996	na	na	na	na	na	na
NI04*	Pneumonia Episode Abstraction	na	na	8/1/1997	8/1/1997	na	na	na	na	na	na
NI05*	Diarrhea Abstraction	na	na	11/1/1996c	11/1/1996c	na	na	na	na	na	na
NVNOTI*	Participant Notification	na	na	11/15/1997	na	11/15/1997	na	11/15/1997	na	11/15/1997	na
NV01*	Enrollment Interview	na	na	11/15/1997	11/15/1997	11/15/1997	11/15/1997	11/15/1997	11/15/1997	11/15/1997	11/15/1997
NV02*	Antiretroviral Drug Use	na	na	11/15/1997	11/15/1997	na	na	na	na	na	na
NV03*	Specimen Collection	na	na	11/15/1997	na	10/1/1998	na	10/1/1998	na	10/1/1998	na
NV04*	Specimen Processing	na	na	11/15/1997	na	11/15/1997	na	11/15/1997	na	11/15/1997	na
NV05*	Flow Cytometry	na	na	11/15/1997	na	11/15/1997	na	11/15/1997	na	11/15/1997	na
NV06*	RNA Quantification on CVL	na	na	11/15/1997	na	na	na	na	na	na	na
NV07*	Urine Toxicology	na	na	11/15/1997	na	10/1/1998	na	10/1/1998	na	10/1/1998	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		BASELINE		PRE-VISIT 9		VISIT 9		VISIT 10		VISIT 11	
ORAL PROTOCOL FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
OPNOTI*	Oral Protocol Participant Notification (expansion)	3/1/1995	na	3/1/1995	na	na	na	na	na	na	na
OP01*	Medical Evaluation	10/1/1995c	9/1/1997	10/1/1995c	9/1/1997	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998a	10/1/1998a
OP02*	Research Interview	3/1/1995	9/1/1997	3/1/1995	9/1/1997	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP03*	Saliva Sample Collection	9/1/1996	9/1/1997	9/1/1996	9/1/1997	10/1/1998	10/1/1998	4/1/1999	4/1/1999	4/1/1999a	4/1/1999a
OP04*	Oral Mucosal Tissue Exam	3/1/1995	9/1/1997	3/1/1995	9/1/1997	10/1/1998	10/1/1998	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a
OP04a*	Addendum	3/1/1995	na	3/1/1995	na	10/1/1998	na	10/1/1998	na	10/1/1998a	na
OP05*	Smear Results	3/1/1995	9/1/1997	3/1/1995	9/1/1997	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP06*	Tooth Count & Random Half Mouth	3/1/1995c	9/1/1997	3/1/1995c	9/1/1997	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP07*	Plaque Index	3/1/1995	9/1/1997	3/1/1995	9/1/1997	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP08*	Gingival Banding Score	3/1/1995	9/1/1997	3/1/1995	9/1/1997	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP09*	Papillary Assessment	3/1/1995	9/1/1997	3/1/1995	9/1/1997	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP10*	Subgingival Plaque	7/1/1997	11/1/1997	7/1/1997	11/1/1997	10/1/1998	10/1/1998	10/1/1998	10/1/1998a	10/1/1998	10/1/1998a
OP11*	Coronal Caries	3/1/1995	9/1/1997	3/1/1995	9/1/1997	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998
OP12*	Root Caries	3/1/1995	9/1/1997	3/1/1995	9/1/1997	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998
OP13*	Gingival Bleeding	3/1/1995	9/1/1997	3/1/1995	9/1/1997	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998
OP14*	Loss of Attachment	3/1/1995	9/1/1997	3/1/1995	9/1/1997	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998
OP15*	Dental Prostheses	3/1/1995c	9/1/1997	3/1/1995c	9/1/1997	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP16*	Oral Referral and F/U	3/1/1995c	9/1/1997	3/1/1995c	9/1/1997	10/1/1998	10/1/1998	4/1/1999	4/1/1999	4/1/1999a	4/1/1999a
PREGNANCY PROTOCOL FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PRNOTI*	Enrollment	na	na	na	na	na	na	4/1/1999a	na	10/1/1999	na
PR01*	Pregnancy Form	na	na	na	na	na	na	4/1/1999a	4/1/1999a	4/1/1999b	4/1/1999b
PR02*	Post-partum Form	na	na	na	na	na	na	4/1/1999a	4/1/1999a	4/1/1999c	4/1/1999b
PROSPECTIVE METABOLIC SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
MSSCR	MS: Screening form	na	na	na	na	na	na	na	na	na	na
MSNOTI	MS: Participant notification	na	na	na	na	na	na	na	na	na	na
MS01	MS: Specimen Collection for Metabolic Study	na	na	na	na	na	na	na	na	na	na
MS02	MS: Lab test report form	na	na	na	na	na	na	na	na	na	na
MS03	MS: DXA scan form	na	na	na	na	na	na	na	na	na	na
PULMONARY SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PQBL*	Baseline Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
PQ02	Follow-up Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
SEX STEROID SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
SSSCR*	SS: Sex steroid screening form	na	na	na	na	na	na	na	na	na	na
SSNOTI*	SS: Participant notification	na	na	na	na	na	na	na	na	na	na
SS01*	SS: Sex steroid lab test report form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		BASELINE		PRE-VISIT 9		VISIT 9		VISIT 10		VISIT 11	
VRS SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
VRSNOTI*	VRS Enrollment Form	na	na	na	na	na	na	na	na	na	na
VRS01 *	Stage II Eligibility	na	na	na	na	na	na	na	na	na	na
VRS01r*	VRS Eligibility for VRS Supplement	na	na	na	na	na	na	na	na	na	na
VRS03*	VRS Illnesses and Medications	na	na	na	na	na	na	na	na	na	na
VRS04*	VRS Antiviral Medications	na	na	na	na	na	na	na	na	na	na
VRS05*	VRS Screening to Determine Changes in HAART Regimen	na	na	na	na	na	na	na	na	na	na
VRS06*	VRS Telephone Interview for Medical Providers	na	na	na	na	na	na	na	na	na	na
VRS06r*	VRS Telephone Interview for Medical Providers	na	na	na	na	na	na	na	na	na	na
VRS10*	VRS Plasma Separation and Freezing	na	na	na	na	na	na	na	na	na	na
VRS29*	VRS Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na

EXPANSION FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
EL*	New Recruit Eligibility Form	na	na	na	na	na	na	na	na	na	na
F07r*	Physical Exam Addendum	na	na	na	na	na	na	na	na	na	na
F20*	New Recruit Baseline History	na	na	na	na	na	na	na	na	na	na
F20a*	New Recruit Baseline History: Addendum	na	na	na	na	na	na	na	na	na	na
F22r*	New Recruit ART History	na	na	na	na	na	na	na	na	na	na
F29r*	Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na
F31r*	Specimens Collected During PE	na	na	na	na	na	na	na	na	na	na
RAB*	Retrospective Medical Record Abstraction	na	na	na	na	na	na	na	na	na	na
RAB App*	Retrospective Medical Record Abstraction Appendix	na	na	na	na	na	na	na	na	na	na
S2*	New Recruit Sreening Form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		BASELINE		PRE-VISIT 9		VISIT 9		VISIT 10		VISIT 11	
SPANISH VERSIONS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ABRV	Abbreviated Visit	na	na	na	na	na	na	na	na	na	na
CV01	Carotid Ultrasound Tracking Form	na	na	na	na	na	na	na	na	na	na
CV29*	Fasting Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na
DERM*	Dermatology Addendum	na	na	na	na	na	na	na	na	na	na
DRUG1	Antiretroviral Medications	na	na	na	na	10/1/1998a	na	4/1/1999	na	10/1/1999	na
DRUG2	Non-antiviral Medications	na	na	na	na	10/1/1998	na	4/1/1999	na	4/1/1999a	na
DRUG3	Hepatitis Medications	na	na	na	na	na	na	na	na	na	na
F07	Physical Exam	na	na	na	na	na	na	4/1/1999a	na	10/1/1999	na
F20*	New Recruit Baseline History (Spanish)	na	na	na	na	na	na	na	na	na	na
F20a*	New Recruit Baseline History: Addendum (Spanish)	na	na	na	na	na	na	na	na	na	na
F01*/F21	Sociodemographics	8/15/1994c	na	4/1/1995	na	10/1/1998	na	10/1/1998a	na	10/1/1998b	na
F02*/F22*	Medical & Health History	8/15/1994c	na	8/15/1996	na	10/1/1998b	na	4/1/1999b	na	10/1/1999	na
F22HX	Follow-up Health History	na	na	na	na	na	na	na	na	na	na
F22MED	Medication History	na	na	na	na	na	na	na	na	na	na
F22r *	New Recruit ART History	na	na	na	na	na	na	na	na	na	na
F03*/F23	OB/GYN History	10/15/1994	na	3/1/1996	na	10/1/1998	na	10/1/1998c	na	10/1/1999	na
F23a*	Fertility and Infertility History	na	na	na	na	na	na	na	na	na	na
F04*/F24*	Alcohol, Drugs & Sexual Behavior (visits 1 - 24)	8/15/1994c	na	6/15/1997	na	10/1/1998	na	4/1/1999	na	10/1/1999	na
F24BEH	Alcohol, Drugs & Sexual Behavior (visits 25+)	na	na	na	na	na	na	na	na	na	na
F05*/F25	Health Care Utilization	8/15/1994c	na	4/1/1995	na	10/1/1998a	na	10/1/1998a	na	10/1/1998a	na
F25a*	Health Care Utilization Supplement	na	na	8/1/1995	na	10/1/1998a	na	na	na	10/1/1998a	na
F25b*	Mental Health Care Utilization Supplement	na	na	na	na	na	na	na	na	na	na
F06*/F26	Psychosocial	10/15/1994d	na	4/1/1995	na	10/1/1998	na	10/1/1998b	na	na	na
F26a*	Assessment of Physical Functioning	na	na	na	na	na	na	na	na	na	na
F26r*	History of Abuse	na	na	na	na	na	na	na	na	na	na
F29	Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na
F29a	Antiviral Usage Assessment for Blood Draw	na	na	na	na	na	na	na	na	10/1/1999	na
F29r*	Blood Specimen Collection Form - New Recruits	na	na	na	na	na	na	na	na	na	na
F31a	Hair Color, Texture and Treatment History	na	na	na	na	na	na	na	na	na	na
FHX*	Family and Personal History	na	na	na	na	na	na	na	na	na	na
FSFI*	Female Sexual Functioning Inventory	na	na	na	na	na	na	na	na	na	na
HPVKAB*	HPV Knowledge and Beliefs	na	na	na	na	na	na	na	na	na	na
INT*	Interim Events Form	na	na	na	na	na	na	4/1/1999	na	10/1/1999	na
MEN01	Menopause Symptom Questionnaire	na	na	na	na	na	na	na	na	na	na
MS01	MS: Specimen Collection for Metabolic Study	na	na	na	na	na	na	na	na	na	na
NC01a*	Interviewer Script	na	na	na	na	na	na	na	na	na	na
NC01b*	Interviewer Script	na	na	na	na	na	na	na	na	na	na
NC02a	English Word List (WRAT)	na	na	na	na	na	na	na	na	na	na
NC02b*	Spanish Word List (WAT)	na	na	na	na	na	na	na	na	na	na
NC03	Educational Experience	na	na	na	na	na	na	na	na	na	na
NI01*	NIDA Health Care Utilization Interview	na	na	11/1/1996c	na	10/1/1998a	na	10/1/98a	na	10/1/1998b	na
NP01*	Neuropathy Signs and Symptoms - baseline	na	na	na	na	na	na	na	na	na	na
NP02	Neuropathy Signs and Symptoms - follow up	na	na	na	na	na	na	na	na	na	na
OP02*	Oral Interview	3/1/1995	na	3/1/1995	na	10/1/1998	na	10/1/1998	na	10/1/1998	na
PAQ*	Physical Activity Questionnaire	na	na	na	na	na	na	na	na	na	na
PBM*	Performance-based Measurements	na	na	na	na	na	na	na	na	na	na
PK02	PK: Current Antiretroviral Medication Use	na	na	na	na	na	na	na	na	na	na
PK02a	PK: Antiretroviral Adherence	na	na	na	na	na	na	na	na	na	na
PK03	PK: Recent Illnesses, Concurrent Meds & OB/GYN History	na	na	na	na	na	na	na	na	na	na
PK04	PK: Recent Substance Use	na	na	na	na	na	na	na	na	na	na
PQBL*	Baseline Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
PQ02	Follow-up Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
PTSD*	Civilian Post-Traumatic Stress Disorder Questionnaire	na	na	na	na	na	na	na	na	na	na
S2*	New Recruit Sreening Form	na	na	na	na	na	na	na	na	na	na
SSSCR*	SS: Sex steroid Screening Form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 12		VISIT 13		VISIT 14		VISIT 15		VISIT 16	
FOLLOW-UP INTERVIEW/EXAM FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
DRUG1	Antiretroviral Medications	4/1/2000a	4/1/2000	10/1/2000	10/1/2000	10/1/2000a	10/1/2000a	10/1/2001	10/1/2001	10/1/2001a	10/1/2001a
DRUG2	Non-antiviral Medications	4/1/1999b	4/1/1999b	10/1/2000a	10/1/2000	10/1/2000b	10/1/2000b	10/1/2000b	10/1/2000b	10/1/2000b	10/1/2000b
DRUG3	Hepatitis Medications	na	na	na	na	na	na	na	na	na	na
DSG	Antiretroviral Dosage	na	na	na	na	na	na	na	na	na	na
F07	Physical Exam	10/1/1999b	10/1/1999	10/1/1999b	10/1/1999b	4/1/2001a	4/1/2000	10/1/2001	10/1/2001	10/1/2001	10/1/2001
F08	Gynecological Exam	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2001	4/1/2001	4/1/2001	4/1/2001	4/1/2001	4/1/2001
F08a	Potential CVL Contaminants	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na
F01*/F21	Sociodemographics	10/1/1998b	10/1/1998b	10/1/1998b	10/1/1998b	10/1/1998b	10/1/1998b	10/1/1998b	10/1/1998b	4/1/2002	4/1/2002
F02*/F22*	Medical & Health History (visits 1 - 16)	4/1/2000a	4/1/2000	10/1/2000	10/1/2000	4/1/2001a	4/1/2001	10/1/2001	10/1/2001	10/1/2001b	10/1/2001b
F22HX	Follow-up Health History (visit 17+)	na	na	na	na	na	na	na	na	na	na
F22MED	Medication History (visit 17+)	na	na	na	na	na	na	na	na	na	na
F03*/F23	OB/GYN History	4/1/2000	4/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000a	10/1/2000a	10/1/2000a	10/1/2000a
F04*/F24*	Alcohol, Drugs & Sexual Behavior (visits 1 - 24)	4/1/2000a	4/1/2000a	4/1/2000a	4/1/2000a	4/1/2000a	4/1/2000a	10/1/2001a	10/1/2001a	10/1/2001a	10/1/2001a
F24BEH	Alcohol, Drugs & Sexual Behavior (visit 25+)	na	na	na	na	na	na	na	na	na	na
F05*/F25	Health Care Utilization	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a
F25a*	Health Care Utilization Supplement	na	na	10/1/1998a	10/1/1998a	na	na	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a
F06*/F26	Psychosocial	10/1/1998c	10/1/1998b	na	na	10/1/1998d	10/1/1998d	10/1/1998d	10/1/1998d	10/1/1998d	10/1/1998d
F26r*	History of Abuse	na	na	na	na	na	na	na	na	na	na
FHX*	Family and Personal History	na	na	na	na	na	na	10/1/2001	10/1/2001	10/1/2001b	10/1/2001b
NP01*	Neuropathy Signs and Symptoms - baseline	na	na	na	na	na	na	na	na	na	na
NP02	Neuropathy Signs and Symptoms - follow up	na	na	na	na	na	na	na	na	na	na

MISCELLANEOUS SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
DERM*	Dermatology Addendum	na	na	na	na	na	na	na	na	na	na
F23a*	Fertility and Infertility History	na	na	na	na	4/1/2001a	4/1/2001a	na	na	na	na
F25b*	Mental Health Care Utilization	na	na	na	na	na	na	na	na	na	na
FSFI*	Female Sexual Functioning Inventory	na	na	na	na	na	na	na	na	na	na
HPVKAB*	HPV Knowledge and Beliefs	na	na	na	na	na	na	na	na	na	na
MINOTI	Mucosal Immunity Notificaiton Form	na	na	na	na	na	na	na	na	na	na
TRUST*	Opinions about Health System and HIV/AIDS	na	na	na	na	na	na	na	na	na	na

SPECIMEN COLLECTION FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
F10*	Plasma & Cell Separation and Freezing	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994
F09*/F29	Blood Specimen Collection Form	4/1/2000	4/1/2000	10/1/2000	10/1/2000	4/1/2001	4/1/2001	4/1/2001	4/1/2001	4/1/2001	4/1/2001
F29a	Antiviral Usage Assessment for Blood Draw	10/1/1999b	10/1/1999b	10/1/2000	10/1/2000	10/1/2000a	10/1/2000a	10/1/2001	10/1/2001	10/1/2001a	10/1/2001
F11*/F31	Specimens Collected During PE	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2000
F31a	Hair Color, Texture and Treatment History	na	na	na	na	na	na	na	na	na	na
L20	Repository Specimen Processing	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 12		VISIT 13		VISIT 14		VISIT 15		VISIT 16	
LOCAL LAB FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
L01	HIV ELISA and Western Blot	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na
L02*	Serum Antibody Tests - Hepatitis	na	na	na	na	na	na	8/15/1994	na	8/15/1994	na
L03	Automated CBC/Differential	8/15/1994a	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na
L03a	Hand-Manual Differential	8/15/1994	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na
L04	Flow Cytometry	10/1/1998b	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na
L05	Liver/Renal Function Tests	na	na	8/15/1994c	na	8/15/1994c	na	8/15/1994c	na	4/1/2002	na
L06*	Serum Antibody Tests - Syphilis Screening	na	na	na	na	na	na	10/1/2001	na	10/1/2001	na
L07*	Mantoux Skin Test Result Anergy Panel	na	na	na	na	na	na	na	na	na	na
L08*	PPD Skin Test	na	na	10/1/1999	na	na	na	10/1/1999	na	10/1/1999	na
L09*	Chlamydia	na	na	na	na	na	na	10/1/2002	na	10/1/2002	na
L10*	Urinalysis	na	na	na	na	na	na	na	na	na	na
L11*	Urine Culture Results	na	na	na	na	na	na	na	na	na	na
L12	(Urine) Pregnancy Test	8/15/1994d	na	8/15/1994d	na	8/15/1994d	na	8/15/1994d	na	8/15/1994d	na
L13*	Gonorrhea	na	na	na	na	na	na	10/1/2002	na	10/1/2002	na
L14	Colposcopy Results	4/1/2000	4/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000
L15	Biopsy Histopathology Pelvic Exam	4/1/1999a	4/1/1999	4/1/1999a	4/1/1999	4/1/1999a	4/1/1999	4/1/1999a	4/1/1999	4/1/199a	4/1/1999
L16	Dysplasia Treatment	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997
L17*	Herpes Culture of Ulcers and Fissures	na	na	na	na	na	na	10/15/1994d	na	10/15/1994d	na
L18	Trichomonas Vaginalis Culture (optional)	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
L19*	CVL Processing	10/1/1999	na	10/1/1999	na	10/1/1999	na	10/1/2001	na	10/1/2001	na
CENTRAL LAB FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
C30*	Toxoplasma Serology	na	na	na	na	na	na	na	na	na	na
C31*	Human Retrovirus Testing	na	na	na	na	na	na	4/1/1995c	na	4/1/1995c	na
C45	Bacterial Vaginosis Smear Gram Stain	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
C50*	Urine for Chlamydia	na	na	8/15/1994	na	na	na	8/15/1994	na	8/15/1994	na
C52	HPV by PCR	8/1/1995	na	8/1/1995	na	8/1/1995	na	8/1/1995	na	8/1/1995	na
C54	Viral Load	4/1/2000	na	4/1/2000	na	4/1/2000	na	4/1/2000	na	4/1/2000	na
C60	Pap Smear	4/1/1999	na	4/1/1999	na	4/1/1999	na	4/1/1999	na	4/1/2002	na
C60a*	Pap Smear Retrospective Re-Read v1-15	na	na	na	na	na	na	na	na	na	na
C60b*	Pap Smear Retrospective Re-Read v16	na	na	na	na	na	na	na	na	na	na
C65*	Syphilis DFA - Genital Ulcers & Fissure	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
C66*	Serum Antibody Type-Specific Herpes Serology	na	na	na	na	na	na	1/6/1997	na	1/6/1997	na
C70*	Laboratory - Stimulated Saliva Evaluation	10/15/1996a	na	10/15/1996a	na	10/15/1996a	na	10/15/1996a	na	10/15/1996a	na
C71*	Laboratory - Subgingival Plaque	4/1/1999a	na	4/1/1999a	na	4/1/1999a	na	4/1/1999a	na	4/1/1999a	na
C72*	Laboratory - Erythematous Candidiasis Smear Results	4/1/1999a	na	4/1/1999a	na	4/1/1999a	na	4/1/1999a	na	4/1/1999a	na
ADMINISTRATIVE FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ABRV	Abbreviated Visit	4/1/2000	na	4/1/2000	na	4/1/2000	na	10/1/2001	na	10/1/2001	na
ANTHRO	Anthropometry Training Form	na	na	na	na	na	na	na	na	na	na
CONS	Consent Status Tracking Form	na	na	na	na	na	na	na	na	na	na
CRST*	Central Repository Shipment Tracking	na	na	na	na	na	na	na	na	na	na
DENR	Disenrollment Form	4/1/1999c	4/1/1999c	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000
INT*	Interim Events Form	10/1/1999	na	10/1/2000	na	10/1/2000a	na	10/1/2000a	na	10/1/2000a	na
MVIS	Missed Visit Form	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a
REF	Referral Checklist	4/1/2000	na	4/1/2000	na	4/1/2000	na	10/1/2001	na	4/1/2002	na
TRANS	Transfer Form	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/2001	10/1/2001	10/1/2001	10/1/2001

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 12		VISIT 13		VISIT 14		VISIT 15		VISIT 16	
OUTCOMES ASCERTAINMENT FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ACS*	Ascertainment Control Sheet	na	4/1/1999b	na	4/1/1999c	na	4/1/1999c	na	4/1/1999c	na	4/1/1999c
ACSR ATC*	ACSR Ascertainment Tracking Checklist	4/1/1999	na	4/1/1999a	na	4/1/1999a	na	4/1/1999a	na	4/1/1999a	na
ATC	Ascertainment Tracking Checklist	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a
CNCR	Cancer Registry Case Report	5/20/1999	5/20/1999	5/20/1999	5/20/1999	5/20/1999a	5/20/1999a	5/20/1999a	5/20/1999a	5/20/1999a	5/20/1999a
CORE	Clinical Outcomes Reporting Form	4/1/1999c	4/1/1999e	10/1/2000	10/1/2000	4/1/2001	4/1/2001a	4/1/2001	4/1/2001a	4/1/2001a	4/1/2001a
QCCD	QC Review of Cancer Diagnoses	na	na	na	na	na	na	na	na	na	na
QCGY	QC Review of Gynecologic Material	na	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na
QCHS*	Hysterectomy Abstraction Form	na	na	na	na	na	na	na	na	na	na
QCLB	Liver Biopsy Abstraction Form	na	na	na	na	na	na	na	na	na	na
QCSS	QC Central Review of Surgical Specimens	na	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na
TB	TB - Verified Case Report	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999
VAC*	Vaccination History Form	na	na	na	na	na	na	na	na	na	na
CARDIOVASCULAR SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
CVNOTI*	Participant Notification	na	na	na	na	na	na	na	na	na	na
CV01	Carotid Ultrasound Tracking Form	na	na	na	na	na	na	na	na	na	na
CV29*	Fasting Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na
HHV-8 SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
HVDENR*	Disenrollment	4/1/1999	na	na	na	na	na	4/1/1999	na	4/1/1999	na
HVMVIS*	Missed Visit	4/1/1999	na	na	na	na	na	4/1/1999	na	4/1/1999	na
HVNOTI*	Recruitment Outcome Form	4/1/1999	na	na	na	na	na	4/1/1999	na	4/1/1999	na
HVSPEC*	Specimen Collection	4/1/1999	na	na	na	na	na	4/1/1999	na	4/1/1999	na
INTENSIVE PK SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PK01	Eligibility for Intensive PK Stubstudy	na	na	na	na	na	na	na	na	na	na
PKNOTI	PK: Participant notification	na	na	na	na	na	na	na	na	na	na
PK02	PK: Current Antiretroviral medication use	na	na	na	na	na	na	na	na	na	na
PK02a	PK: Antiretroviral adherence	na	na	na	na	na	na	na	na	na	na
PK03	PK: Recent illnesses, concurrent meds & OB/GYN hist	na	na	na	na	na	na	na	na	na	na
PK04	PK: Recent substance use	na	na	na	na	na	na	na	na	na	na
PK05a	PK: Weight and Specimen collection: group A	na	na	na	na	na	na	na	na	na	na
PK05b	PK: Weight and Specimen collection: group B	na	na	na	na	na	na	na	na	na	na
PK05c	PK: Weight and Specimen collection: group C	na	na	na	na	na	na	na	na	na	na
PK06	PK: Dosing of antiretroviral medications	na	na	na	na	na	na	na	na	na	na
PK07	PK: Plasma Separation and Freezing Form	na	na	na	na	na	na	na	na	na	na
PK08	PK: Dietary Fat Percentage Questionnaire	na	na	na	na	na	na	na	na	na	na
PK-DIET	PK: Dietary Assessment	na	na	na	na	na	na	na	na	na	na
MALT / GALT SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
MG01	Pre-Eligibility (complete after core)	na	na	na	na	na	na	na	na	na	na
MG02	Pre-Eligibility (complete by study coordinator)	na	na	na	na	na	na	na	na	na	na
MG03	Screening Visit	na	na	na	na	na	na	na	na	na	na
MG04	Notification of Enrollment (NOTI)	na	na	na	na	na	na	na	na	na	na
MG05	Colonoscopy/EMB Preparation Checklist/Worksheet	na	na	na	na	na	na	na	na	na	na
MG06	Colonoscopy Procedure Form	na	na	na	na	na	na	na	na	na	na
MG07	Endometrial & Endocervical Biopsy Procedure Form	na	na	na	na	na	na	na	na	na	na
MG08	Biopsy Specimen Tracking Form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 12		VISIT 13		VISIT 14		VISIT 15		VISIT 16	
NEUROCOGNITION AND AGING FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
F26a*	Assessment of Physical Functioning	na	na	na	na	na	na	na	na	na	na
MEN01	Menopause Symptom Questionnaire	na	na	na	na	na	na	na	na	na	na
NC01a	Cognitive Measures (Standard TMT and SDMT)	na	na	na	na	na	na	na	na	na	na
NC01a*	Interviewer Script	na	na	na	na	na	na	na	na	na	na
NC01b*	Cognitive Measures (Color TMT)	na	na	na	na	na	na	na	na	na	na
NC01b*	Interviewer Script	na	na	na	na	na	na	na	na	na	na
NC02a	English Word List (WRAT)	na	na	na	na	na	na	na	na	na	na
NC03	Educational Experience	na	na	na	na	na	na	na	na	na	na
NC04	Wechsler Test of Adult Reading (WTAR)	na	na	na	na	na	na	na	na	na	na
NC05*	Interviewer Feedback	na	na	na	na	na	na	na	na	na	na
NC06	Hopkins Verbal Learning Test-Revised	na	na	na	na	na	na	na	na	na	na
NC07	Stroop Test	na	na	na	na	na	na	na	na	na	na
NC08	Verbal Fluency	na	na	na	na	na	na	na	na	na	na
NC09	Letter Number Span	na	na	na	na	na	na	na	na	na	na
NC10	Grooved Pegboard	na	na	na	na	na	na	na	na	na	na
PAQ*	Physical Activity Questionnaire	na	na	na	na	na	na	na	na	na	na
PBM*	Performance-based Measurements	na	na	na	na	na	na	na	na	na	na
PTSD	Civilian Post-Traumatic Stress Disorder Questionnaire	na	na	na	na	na	na	na	na	na	na
NIDA I/V AND HCU											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
NI01*	Health Care Utilization Collaborative WIHS/HERS Interview	10/1/1998a	10/1/1998a	na	na	na	na	na	na	na	na
NI02*	General Abstraction	na	na	na	na	na	na	na	na	na	na
NI03*	Pneumonia Abstraction	na	na	na	na	na	na	na	na	na	na
NI04*	Pneumonia Episode Abstraction	na	na	na	na	na	na	na	na	na	na
NI05*	Diarrhea Abstraction	na	na	na	na	na	na	na	na	na	na
NVNOTI*	Participant Notification	11/15/1997	na	11/15/1997	na	11/15/1997	na	11/15/1997	na	11/15/1997	na
NV01*	Enrollment Interview	11/15/1997	11/15/1997	11/15/1997	11/15/1997	11/15/1997	11/15/1997	11/15/1997	11/15/1997	11/15/1997	11/15/1997
NV02*	Antiretroviral Drug Use	na	na	na	na	na	na	na	na	na	na
NV03*	Specimen Collection	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na
NV04*	Specimen Processing	11/15/1997	na	11/15/1997	na	11/15/1997	na	11/15/1997	na	11/15/1997	na
NV05*	Flow Cytometry	11/15/1997	na	11/15/1997	na	11/15/1997	na	11/15/1997	na	11/15/1997	na
NV06*	RNA Quantification on CVL	na	na	na	na	na	na	na	na	na	na
NV07*	Urine Toxicology	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 12		VISIT 13		VISIT 14		VISIT 15		VISIT 16	
ORAL PROTOCOL FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
OPNOTI*	Oral Protocol Participant Notification (expansion)	na	na	na	na	na	na	10/1/2001	na	10/1/2001	na
OP01*	Medical Evaluation	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a
OP02*	Research Interview	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP03*	Saliva Sample Collection	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a
OP04*	Oral Mucosal Tissue Exam	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2000	4/1/2000
OP04a*	Addendum	10/1/1998a	na	10/1/1998a	na	10/1/1998a	na	10/1/1998a	na	10/1/1998a	na
OP05*	Smear Results	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP06*	Tooth Count & Random Half Mouth	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP07*	Plaque Index	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP08*	Gingival Banding Score	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP09*	Papillary Assessment	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP10*	Subgingival Plaque	10/1/1998	10/1/1998a	10/1/1998	10/1/1998a	10/1/1998	10/1/1998a	10/1/1998	10/1/1998a	10/1/1998	10/1/1998a
OP11*	Coronal Caries	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998
OP12*	Root Caries	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998
OP13*	Gingival Bleeding	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998
OP14*	Loss of Attachment	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998
OP15*	Dental Prostheses	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998
OP16*	Oral Referral and F/U	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a
PREGNANCY PROTOCOL FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PRNOTI*	Enrollment	10/1/1999	na	10/1/1999	na	10/1/1999	na	10/1/1999	na	10/1/1999	na
PR01*	Pregnancy Form	4/1/1999b	4/1/1999b	4/1/1999b	4/1/1999b	4/1/1999b	4/1/1999b	4/1/1999b	4/1/1999b	4/1/1999b	4/1/1999b
PR02*	Post-partum Form	4/1/1999d	4/1/1999c	4/1/1999d	4/1/1999c	4/1/1999d	4/1/1999c	4/1/1999d	4/1/1999c	4/1/1999d	4/1/1999c
PROSPECTIVE METABOLIC SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
MSSCR	MS: Screening form	na	na	na	na	na	na	na	na	na	na
MSNOTI	MS: Participant notification	na	na	na	na	na	na	na	na	na	na
MS01	MS: Specimen Collection for Metabolic Study	na	na	na	na	na	na	na	na	na	na
MS02	MS: Lab test report form	na	na	na	na	na	na	na	na	na	na
MS03	MS: DXA scan form	na	na	na	na	na	na	na	na	na	na
PULMONARY SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PQBL*	Baseline Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
PQ02	Follow-up Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
SEX STEROID SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
SSSCR*	SS: Sex steroid screening form	na	na	na	na	na	na	na	na	na	na
SSNOTI*	SS: Participant notification	na	na	na	na	na	na	na	na	na	na
SS01*	SS: Sex steroid lab test report form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 12		VISIT 13		VISIT 14		VISIT 15		VISIT 16	
VRS SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
VRSNOTI*	VRS Enrollment Form	na	na	10/1/2000	na	10/1/2000	na	na	na	na	na
VRS01 *	Stage II Eligibility	na	na	10/1/2000	10/1/2000	na	na	na	na	na	na
VRS01r*	VRS Eligibility for VRS Supplement	na	na	na	na	na	na	na	na	na	na
VRS03*	VRS Illnesses and Medications	na	na	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000
VRS04*	VRS Antiviral Medications	na	na	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2001a	10/1/2001a	10/1/2001a	10/1/2001a
VRS05*	VRS Screening to Determine Changes in HAART Regimen	na	na	10/1/2000	10/1/2000	4/1/2001	4/1/2001	4/1/2001a	4/1/2001a	4/1/2001a	4/1/2001a
VRS06*	VRS Telephone Interview for Medical Providers	na	na	10/1/2000	10/1/2000	10/1/2000b	10/1/2000b	10/1/2000b	10/1/2000b	10/1/2000b	10/1/2000b
VRS06r*	VRS Telephone Interview for Medical Providers	na	na	na	na	na	na	na	na	6/1/2002	6/1/2002
VRS10*	VRS Plasma Separation and Freezing	na	na	1/12/2000	1/12/2000	1/12/2000	1/12/2000	1/12/2000	1/12/2000	1/12/2000	1/12/2000
VRS29*	VRS Blood Specimen Collection Form	na	na	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000	10/1/2000

EXPANSION FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
EL*	New Recruit Eligibility Form	na	na	na	na	na	na	10/1/2001a	10/1/2001	10/12001a	10/1/2001
F07r*	Physical Exam Addendum	na	na	na	na	na	na	10/1/2001	10/1/2001	10/1/2001	10/1/2001
F20*	New Recruit Baseline History	na	na	na	na	na	na	10/1/2001	10/1/2001	4/1/2002	4/1/2002
F20a*	New Recruit Baseline History: Addendum	na	na	na	na	na	na	1/1/2002	1/1/2002	1/1/2002	1/1/2002
F22r*	New Recruit ART History	na	na	na	na	na	na	na	na	4/1/2002a	4/1/2002a
F29r*	Blood Specimen Collection Form	na	na	na	na	na	na	10/1/2001	na	10/1/2001	na
F31r*	Specimens Collected During PE	na	na	na	na	na	na	10/1/2001a	na	10/1/2001a	na
RAB*	Retrospective Medical Record Abstraction	na	na	na	na	na	na	10/1/2001a	10/1/2001a	10/1/2001a	10/1/2001a
RAB App*	Retrospective Medical Record Abstraction Appendix	na	na	na	na	na	na	10/1/2001a	na	10/1/2001a	na
S2*	New Recruit Sreening Form	na	na	na	na	na	na	10/1/2001b	10/1/2001b	10/1/2001b	10/1/2001b

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 12		VISIT 13		VISIT 14		VISIT 15		VISIT 16	
SPANISH VERSIONS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ABRV	Abbreviated Visit	4/1/2000	na	4/1/2000	na	4/1/2000	na	10/1/2001	na	10/1/2001	na
CV01	Carotid Ultrasound Tracking Form	na	na	na	na	na	na	na	na	na	na
CV29*	Fasting Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na
DERM*	Dermatology Addendum	na	na	na	na	na	na	na	na	na	na
DRUG1	Antiretroviral Medications	4/1/2000a	na	10/1/2000	na	10/1/2000a	na	10/1/2001	na	10/1/2001a	na
DRUG2	Non-antiviral Medications	4/1/1999b	na	10/1/2000a	na	10/1/2000b	na	10/1/2000b	na	10/1/2000b	na
DRUG3	Hepatitis Medications	na	na	na	na	na	na	na	na	na	na
F07	Physical Exam	10/1/1999b	na	10/1/1999b	na	4/1/2001a	na	10/1/2001	na	10/1/2001	na
F20*	New Recruit Baseline History (Spanish)	na	na	na	na	na	na	10/1/2001	na	4/1/2002	na
F20a*	New Recruit Baseline History: Addendum (Spanish)	na	na	na	na	na	na	1/1/2002	na	1/1/2002	na
F01*/F21	Sociodemographics	10/1/1998c	na	10/1/1998c	na	10/1/1998c	na	10/1/1998c	na	4/1/2002	na
F02*/F22*	Medical & Health History	4/1/2000a	na	10/1/2000	na	4/1/2001a	na	10/1/2001	na	10/1/2001b	na
F22HX	Follow-up Health History	na	na	na	na	na	na	na	na	na	na
F22MED	Medication History	na	na	na	na	na	na	na	na	na	na
F22r *	New Recruit ART History	na	na	na	na	na	na	na	na	4/1/2002a	4/1/2002a
F03*/F23	OB/GYN History	4/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000a	na	10/1/2000a	na
F23a*	Fertility and Infertility History	na	na	na	na	4/1/2001a	na	na	na	na	na
F04*/F24*	Alcohol, Drugs & Sexual Behavior (visits 1 - 24)	4/1/2000a	na	4/1/2000a	na	4/1/2000a	na	10/1/2001a	na	10/1/2001a	na
F24BEH	Alcohol, Drugs & Sexual Behavior (visits 25+)	na	na	na	na	na	na	na	na	na	na
F05*/F25	Health Care Utilization	10/1/1998b	na	10/1/1998b	na	10/1/1998b	na	10/1/1998b	na	10/1/1998b	na
F25a*	Health Care Utilization Supplement	na	na	10/1/1998a	na	na	na	10/1/1998a	na	10/1/1998a	na
F25b*	Mental Health Care Utilization Supplement	na	na	na	na	na	na	na	na	na	na
F06*/F26	Psychosocial	10/1/1998c	na	na	na	10/1/1998d	na	10/1/1998d	na	10/1/1998d	na
F26a*	Assessment of Physical Functioning	na	na	na	na	na	na	na	na	na	na
F26r*	History of Abuse	na	na	na	na	na	na	na	na	na	na
F29	Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na
F29a	Antiviral Usage Assessment for Blood Draw	10/1/1999b	na	10/1/2000	na	10/1/2000	na	10/1/2001	na	10/1/2001a	na
F29r*	Blood Specimen Collection Form - New Recruits	na	na	na	na	na	na	na	na	na	na
F31a	Hair Color, Texture and Treatment History	na	na	na	na	na	na	na	na	na	na
FHX*	Family and Personal History	na	na	na	na	na	na	10/1/2001	na	10/1/2001b	na
FSFI*	Female Sexual Functioning Inventory	na	na	na	na	na	na	na	na	na	na
HPVKAB*	HPV Knowledge and Beliefs	na	na	na	na	na	na	na	na	na	na
INT*	Interim Events Form	10/1/1999	na	10/1/2000	na	10/1/2000a	na	10/1/2000b	na	10/1/2000b	na
MEN01	Menopause Symptom Questionnaire	na	na	na	na	na	na	na	na	na	na
MS01	MS: Specimen Collection for Metabolic Study	na	na	na	na	na	na	na	na	na	na
NC01a*	Interviewer Script	na	na	na	na	na	na	na	na	na	na
NC01b*	Interviewer Script	na	na	na	na	na	na	na	na	na	na
NC02a	English Word List (WRAT)	na	na	na	na	na	na	na	na	na	na
NC02b*	Spanish Word List (WAT)	na	na	na	na	na	na	na	na	na	na
NC03	Educational Experience	na	na	na	na	na	na	na	na	na	na
NI01*	NIDA Health Care Utilization Interview	10/1/1998b	na	na	na	na	na	na	na	na	na
NP01*	Neuropathy Signs and Symptoms - baseline	na	na	na	na	na	na	na	na	na	na
NP02	Neuropathy Signs and Symptoms - follow up	na	na	na	na	na	na	na	na	na	na
OP02*	Oral Interview	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na
PAQ*	Physical Activity Questionnaire	na	na	na	na	na	na	na	na	na	na
PBM*	Performance-based Measurements	na	na	na	na	na	na	na	na	na	na
PK02	PK: Current Antiretroviral Medication Use	na	na	na	na	na	na	na	na	na	na
PK02a	PK: Antiretroviral Adherence	na	na	na	na	na	na	na	na	na	na
PK03	PK: Recent Illnesses, Concurrent Meds & OB/GYN History	na	na	na	na	na	na	na	na	na	na
PK04	PK: Recent Substance Use	na	na	na	na	na	na	na	na	na	na
PQBL*	Baseline Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
PQ02	Follow-up Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
PTSD*	Civilian Post-Traumatic Stress Disorder Questionnaire	na	na	na	na	na	na	na	na	na	na
S2*	New Recruit Sreening Form	na	na	na	na	na	na	10/1/2001	na	10/1/2001	na
SSSCR*	SS: Sex steroid Screening Form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 17		VISIT 18		VISIT 19		VISIT 20		VISIT 21	
FOLLOW-UP INTERVIEW/EXAM FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
DRUG1	Antiretroviral Medications	10/1/2002a	10/1/2002	4/1/2003	4/1/2003	4/1/2003a	4/1/2003a	4/1/2004	4/1/2004	10/1/2004	10/1/2004
DRUG2	Non-antiviral Medications	10/1/2000b	10/1/2000b	10/1/2000c	10/1/2000c	10/1/2003	10/1/2003	4/1/2004	4/1/2004	10/1/2004	10/1/2004
DRUG3	Hepatitis Medications	10/1/2002a	10/1/2002	4/1/2003a	4/1/2003	4/1/2003b	4/1/2003b	4/1/2004a	4/1/2004	10/1/2004	10/1/2004
DSG	Antiretroviral Dosage	na	na	na	na	na	na	na	na	na	na
F07	Physical Exam	10/1/2002	10/1/2002a	4/1/2003	4/1/2003	10/1/2003	10/1/2003	10/1/2003b	10/1/2003b	10/1/2004	10/1/2004
F08	Gynecological Exam	4/1/2001	4/1/2001	4/1/2001	4/1/2001	4/1/2001	4/1/2001	4/1/2001	4/1/2001	10/1/2004	10/1/2004
F08a	Potential CVL Contaminants	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na
F01*/F21	Sociodemographics	10/1/2002	10/1/2002	10/1/2002	10/1/2002	10/1/2002	10/1/2002	10/1/2002	10/1/2002	10/1/2002	10/1/2002
F02*/F22*	Medical & Health History (visits 1 - 16)	na	na	na	na	na	na	na	na	na	na
F22HX	Follow-up Health History (visit 17+)	10/1/2002a	10/1/2002	4/1/2003a	4/1/2003	10/1/2003a	10/1/2003	4/1/2004	4/1/2004	10/1/2004	10/1/2004
F22MED	Medication History (visit 17+)	10/1/2002	10/1/2002a	4/1/2003a	4/1/2003	10/1/2003	10/1/2003	4/1/2004	4/1/2004	10/1/2004a	10/1/2004
F03*/F23	OB/GYN History	10/1/2002	10/1/2002	4/1/2003b	4/1/2003	10/1/2003	10/1/2003	4/1/2004a	4/1/2004	10/1/2004	10/1/2004
F04*/F24*	Alcohol, Drugs & Sexual Behavior (visits 1 - 24)	10/1/2002	10/1/2002	4/1/2003	4/1/2003	10/1/2003a	10/1/2003	4/1/2004	4/1/2004	10/1/2004	10/1/2004
F24BEH	Alcohol, Drugs & Sexual Behavior (visit 25+)	na	na	na	na	na	na	na	na	na	na
F05*/F25	Health Care Utilization	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	4/1/2004	4/1/2004	10/1/2004	10/1/2004
F25a*	Health Care Utilization Supplement	na	na	na	na	na	na	na	na	na	na
F06*/F26	Psychosocial	10/1/1998d	10/1/1998d	10/1/1998d	10/1/1998d	10/1/2003	10/1/2003	10/1/2003	10/1/2003	10/1/2003	10/1/2003
F26r*	History of Abuse	na	na	na	na	na	na	na	na	na	na
FHX*	Family and Personal History	na	na	na	na	na	na	na	na	na	na
NP01*	Neuropathy Signs and Symptoms - baseline	na	na	na	na	na	na	na	na	na	na
NP02	Neuropathy Signs and Symptoms - follow up	na	na	na	na	na	na	na	na	na	na
MISCELLANEOUS SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
DERM*	Dermatology Addendum	na	na	na	na	na	na	na	na	na	na
F23a*	Fertility and Infertility History	na	na	na	na	na	na	na	na	na	na
F25b*	Mental Health Care Utilization	na	na	na	na	na	na	na	na	na	na
FSFI*	Female Sexual Functioning Inventory	na	na	na	na	na	na	na	na	na	na
HPVKAB*	HPV Knowledge and Beliefs	na	na	na	na	na	na	na	na	na	na
MINOTI	Mucosal Immunity Notificaiton Form	na	na	na	na	na	na	na	na	na	na
TRUST*	Opinions about Health System and HIV/AIDS	na	na	na	na	na	na	na	na	na	na
SPECIMEN COLLECTION FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
F10*	Plasma & Cell Separation and Freezing	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994
F09*/F29	Blood Specimen Collection Form	4/1/2001	4/1/2001	4/1/2001	4/1/2001	4/1/2001	4/1/2001	4/2/2004	4/2/2004	4/2/2004a	4/2/2004a
F29a	Antiviral Usage Assessment for Blood Draw	10/1/2002	10/1/2002	4/1/2003	4/1/2003	4/1/2003a	4/1/2003a	4/1/2004	4/1/2004	10/1/2004	10/1/2004
F11*/F31	Specimens Collected During PE	10/1/2002	10/1/2002	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2004	4/1/2004	10/1/2004	10/1/2004
F31a	Hair Color, Texture and Treatment History	na	na	na	na	na	na	na	na	na	na
L20	Repository Specimen Processing	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 17		VISIT 18		VISIT 19		VISIT 20		VISIT 21	
LOCAL LAB FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
L01	HIV ELISA and Western Blot	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na
L02*	Serum Antibody Tests - Hepatitis	na	na	na	na	na	na	na	na	na	na
L03	Automated CBC/Differential	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2004	na
L03a	Hand-Manual Differential	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2004	na
L04	Flow Cytometry	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2004	na
L05	Liver/Renal Function Tests	10/1/2002	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
L06*	Serum Antibody Tests - Syphilis Screening	na	na	na	na	na	na	na	na	na	na
L07*	Mantoux Skin Test Result Anergy Panel	na	na	na	na	na	na	na	na	na	na
L08*	PPD Skin Test	10/1/1999	na	na	na	na	na	na	na	na	na
L09*	Chlamydia	na	na	na	na	na	na	na	na	na	na
L10*	Urinalysis	na	na	na	na	na	na	na	na	na	na
L11*	Urine Culture Results	8/15/1994	na	8/15/1994	na	na	na	na	na	na	na
L12	(Urine) Pregnancy Test	8/15/1994d	na	8/15/1994d	na	8/15/1994d	na	8/15/1994d	na	8/15/1994d	na
L13*	Gonorrhea	na	na	na	na	na	na	na	na	na	na
L14	Colposcopy Results	10/1/2002	10/1/2002	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a
L15	Biopsy Histopathology Pelvic Exam	10/1/2002	10/1/2002	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003
L16	Dysplasia Treatment	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997
L17*	Herpes Culture of Ulcers and Fissures	na	na	na	na	na	na	na	na	na	na
L18	Trichomonas Vaginalis Culture (optional)	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
L19*	CVL Processing	10/1/2001	na	10/1/2001	na	10/1/2001	na	10/1/2001	na	10/1/2001	na
CENTRAL LAB FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
C30*	Toxoplasma Serology	na	na	na	na	na	na	na	na	na	na
C31*	Human Retrovirus Testing	na	na	na	na	na	na	na	na	na	na
C45	Bacterial Vaginosis Smear Gram Stain	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
C50*	Urine for Chlamydia	na	na	na	na	na	na	na	na	na	na
C52	HPV by PCR	8/1/1995	na	8/1/1995	na	8/1/1995	na	8/1/1995	na	8/1/1995	na
C54	Viral Load	4/1/2000	na	4/1/2000	na	4/1/2000	na	4/1/2000	na	4/1/2000	na
C60	Pap Smear	4/1/2002	na	4/1/2002	na	4/1/2002	na	4/1/2002	na	4/1/2002	na
C60a*	Pap Smear Retrospective Re-Read v1-15	na	na	na	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
C60b*	Pap Smear Retrospective Re-Read v16	na	na	na	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
C65*	Syphilis DFA - Genital Ulcers & Fissure	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
C66*	Serum Antibody Type-Specific Herpes Serology	na	na	na	na	na	na	na	na	na	na
C70*	Laboratory - Stimulated Saliva Evaluation	10/15/1996a	na	10/15/1996a	na	10/15/1996a	na	10/15/1996a	na	na	na
C71*	Laboratory - Subgingival Plaque	4/1/1999a	na	4/1/1999a	na	4/1/1999a	na	4/1/1999a	na	na	na
C72*	Laboratory - Erythematous Candidiasis Smear Results	4/1/1999a	na	4/1/1999a	na	4/1/1999a	na	4/1/1999a	na	na	na
ADMINISTRATIVE FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ABRV	Abbreviated Visit	10/1/2001	na	10/1/2001a	na	10/1/2001a	na	10/1/2001a	na	10/1/2001a	na
ANTHRO	Anthropometry Training Form	10/1/2002	na	10/1/2002a	na	10/1/2002a	na	10/1/2002a	na	10/1/2002a	na
CONS	Consent Status Tracking Form	na	na	na	na	na	na	na	na	na	na
CRST*	Central Repository Shipment Tracking	na	na	na	na	na	na	na	na	na	na
DENR	Disenrollment Form	10/1/2000	10/1/2000	4/1/2003	10/1/2002	4/1/2003	10/1/2002	4/1/2004	4/1/2004	4/1/2004	4/1/2004
INT*	Interim Events Form	10/1/2000b	na	10/1/2000b	na	10/1/2000b	na	10/1/2000b	na	na	na
MVIS	Missed Visit Form	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a
REF	Referral Checklist	4/1/2002	na	4/1/2003	na	10/1/2003	na	10/1/2003	na	10/1/2004	na
TRANS	Transfer Form	10/1/2001	10/1/2001	10/1/2001a	10/1/2001a	10/1/2001a	10/1/2001a	10/1/2001a	10/1/2001a	10/1/2001a	10/1/2001a

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 17		VISIT 18		VISIT 19		VISIT 20		VISIT 21	
OUTCOMES ASCERTAINMENT FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ACS*	Ascertainment Control Sheet	na	4/1/1999c	na	4/1/1999c	na	4/1/1999c	na	na	na	na
ACSR ATC*	ACSR Ascertainment Tracking Checklist	4/1/1999a	na	4/1/1999b	na	4/1/1999b	na	4/1/1999b	na	4/1/1999b	na
ATC	Ascertainment Tracking Checklist	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/98a	4/1/2004	10/1/1998a	4/1/2004
CNCR	Cancer Registry Case Report	5/20/1999a	5/20/1999a	5/20/1999a	5/20/1999a	5/20/1999a	5/20/1999a	5/20/1999b	5/20/1999b	5/20/1999b	5/20/1999b
CORE	Clinical Outcomes Reporting Form	4/1/2001a	4/1/2001a	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003	10/1/2004	10/1/2004
QCCD	QC Review of Cancer Diagnoses	na	na	na	na	na	na	4/1/2004	4/1/2004	4/1/2004	4/1/2004
QCGY	QC Review of Gynecologic Material	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na
QCHS*	Hysterectomy Abstraction Form	na	na	na	na	na	na	na	na	na	na
QCLB	Liver Biopsy Abstraction Form	na	na	na	na	na	na	na	na	na	na
QCSS	QC Central Review of Surgical Specimens	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na
TB	TB - Verified Case Report	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999
VAC*	Vaccination History Form	na	na	na	na	na	na	na	na	na	na
CARDIOVASCULAR SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
CVNOTI*	Participant Notification	na	na	na	na	na	na	4/1/2004a	4/1/2004a	4/1/2004a	4/1/2004a
CV01	Carotid Ultrasound Tracking Form	na	na	na	na	na	na	4/1/2004b	4/1/2004	10/1/2004	10/1/2004
CV29*	Fasting Blood Specimen Collection Form	na	na	na	na	na	na	4/2/2004	4/2/2004	10/14/2004	10/14/2004
HHV-8 SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
HVDENR*	Disenrollment	na	na	na	na	na	na	na	na	na	na
HVMVIS*	Missed Visit	na	na	na	na	na	na	na	na	na	na
HVNOTI*	Recruitment Outcome Form	na	na	na	na	na	na	na	na	na	na
HVSPEC*	Specimen Collection	na	na	na	na	na	na	na	na	na	na
INTENSIVE PK SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PK01	Eligibility for Intensive PK Stubstudy	na	na	4/1/2003	na	4/1/2003	na	4/1/2004	na	4/1/2004	na
PKNOTI	PK: Participant notification	na	na	4/1/2003	na	4/1/2003	na	4/1/2004	na	4/1/2004	na
PK02	PK: Current Antiretroviral medication use	na	na	4/1/2003	na	4/1/2003a	na	4/1/2003b	na	10/1/2004	na
PK02a	PK: Antiretroviral adherence	na	na	4/1/2003	na	4/1/2003	na	4/1/2003a	na	4/1/2003a	na
PK03	PK: Recent illnesses, concurrent meds & OB/GYN hist	na	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na
PK04	PK: Recent substance use	na	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
PK05a	PK: Weight and Specimen collection: group A	na	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na
PK05b	PK: Weight and Specimen collection: group B	na	na	4/1/2003	na	4/1/2003	na	4/1/2004	na	4/1/2004	na
PK05c	PK: Weight and Specimen collection: group C	na	na	4/1/2003a	na	4/1/2003a	na	4/1/2004	na	4/1/2004	na
PK06	PK: Dosing of antiretroviral medications	na	na	4/1/2003	na	10/6/2003	na	10/6/2003b	na	10/1/2004	na
PK07	PK: Plasma Separation and Freezing Form	na	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
PK08	PK: Dietary Fat Percentage Questionnaire	na	na	5/14/2003	na	5/14/2003a	na	5/14/2003a	na	5/14/2003a	na
PK-DIET	PK: Dietary Assessment	na	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na
MALT / GALT SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
MG01	Pre-Eligibility (complete after core)	na	na	na	na	na	na	na	na	na	na
MG02	Pre-Eligibility (complete by study coordinator)	na	na	na	na	na	na	na	na	na	na
MG03	Screening Visit	na	na	na	na	na	na	na	na	na	na
MG04	Notification of Enrollment (NOTI)	na	na	na	na	na	na	na	na	na	na
MG05	Colonoscopy/EMB Preparation Checklist/Worksheet	na	na	na	na	na	na	na	na	na	na
MG06	Colonoscopy Procedure Form	na	na	na	na	na	na	na	na	na	na
MG07	Endometrial & Endocervical Biopsy Procedure Form	na	na	na	na	na	na	na	na	na	na
MG08	Biopsy Specimen Tracking Form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 17		VISIT 18		VISIT 19		VISIT 20		VISIT 21	
NEUROCOGNITION AND AGING FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
F26a*	Assessment of Physical Functioning	na	na	na	na	na	na	na	na	na	na
MEN01	Menopause Symptom Questionnaire	na	na	na	na	na	na	na	na	na	na
NC01a	Cognitive Measures (Standard TMT and SDMT)	na	na	na	na	na	na	na	na	10/1/2004b	10/1/2004b
NC01a*	Interviewer Script	na	na	na	na	na	na	na	na	10/1/2004	na
NC01b*	Cognitive Measures (Color TMT)	na	na	na	na	na	na	na	na	10/1/2004b	10/1/2004b
NC01b*	Interviewer Script	na	na	na	na	na	na	na	na	10/1/2004	na
NC02a	English Word List (WRAT)	na	na	na	na	na	na	na	na	10/1/2004b	10/1/2004b
NC03	Educational Experience	na	na	na	na	na	na	na	na	10/1/2004	10/1/2004
NC04	Wechsler Test of Adult Reading (WTAR)	na	na	na	na	na	na	na	na	na	na
NC05*	Interviewer Feedback	na	na	na	na	na	na	na	na	10/11/2004	10/11/2004
NC06	Hopkins Verbal Learning Test-Revised	na	na	na	na	na	na	na	na	na	na
NC07	Stroop Test	na	na	na	na	na	na	na	na	na	na
NC08	Verbal Fluency	na	na	na	na	na	na	na	na	na	na
NC09	Letter Number Span	na	na	na	na	na	na	na	na	na	na
NC10	Grooved Pegboard	na	na	na	na	na	na	na	na	na	na
PAQ*	Physical Activity Questionnaire	na	na	na	na	na	na	na	na	na	na
PBM*	Performance-based Measurements	na	na	na	na	na	na	na	na	na	na
PTSD	Civilian Post-Traumatic Stress Disorder Questionnaire	na	na	na	na	na	na	na	na	na	na

NIDA I/V AND HCU											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
NI01*	Health Care Utilization Collaborative WIHS/HERS Interview	na	na	na	na	na	na	na	na	na	na
NI02*	General Abstraction	na	na	na	na	na	na	na	na	na	na
NI03*	Pneumonia Abstraction	na	na	na	na	na	na	na	na	na	na
NI04*	Pneumonia Episode Abstraction	na	na	na	na	na	na	na	na	na	na
NI05*	Diarrhea Abstraction	na	na	na	na	na	na	na	na	na	na
NVNOTI*	Participant Notification	na	na	na	na	na	na	na	na	na	na
NV01*	Enrollment Interview	na	na	na	na	na	na	na	na	na	na
NV02*	Antiretroviral Drug Use	na	na	na	na	na	na	na	na	na	na
NV03*	Specimen Collection	na	na	na	na	na	na	na	na	na	na
NV04*	Specimen Processing	na	na	na	na	na	na	na	na	na	na
NV05*	Flow Cytometry	na	na	na	na	na	na	na	na	na	na
NV06*	RNA Quantification on CVL	na	na	na	na	na	na	na	na	na	na
NV07*	Urine Toxicology	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 17		VISIT 18		VISIT 19		VISIT 20		VISIT 21	
ORAL PROTOCOL FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
OPNOTI*	Oral Protocol Participant Notification (expansion)	na	na	na	na	na	na	na	na	na	na
OP01*	Medical Evaluation	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	4/1/2004	10/1/1998a	na	na
OP02*	Research Interview	10/1/1998	10/1/1998	4/1/2003	4/1/2003	10/1/2003	10/1/2003	10/1/2003	10/1/2003	na	na
OP03*	Saliva Sample Collection	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	na	na
OP04*	Oral Mucosal Tissue Exam	4/1/2000a	4/1/2000	4/1/2000a	4/1/2000	4/1/2000a	4/1/2000	4/1/2000a	4/1/2000a	na	na
OP04a*	Addendum	10/1/1998a	na	10/1/1998a	na	10/1/1998a	na	10/1/1998a	na	na	na
OP05*	Smear Results	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	na	na
OP06*	Tooth Count & Random Half Mouth	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	na	na
OP07*	Plaque Index	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	na	na
OP08*	Gingival Banding Score	10/1/1998	10/1/1998	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003	na	na
OP09*	Papillary Assessment	10/1/1998	10/1/1998	4/1/2003	4/1/2003	10/1/2003	10/1/2003	10/1/2003	10/1/2003	na	na
OP10*	Subgingival Plaque	10/1/1998	10/1/1998a	4/1/2003	4/1/2003	10/1/2003	10/1/2003	10/1/2003	10/1/2003	na	na
OP11*	Coronal Caries	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	na	na
OP12*	Root Caries	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	na	na
OP13*	Gingival Bleeding	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	3/1/1995	10/1/1998	na	na
OP14*	Loss of Attachment	3/1/1995	10/1/1998	3/1/1995	4/1/2003	3/1/1995	4/1/2003	3/1/1995	4/1/2003	na	na
OP15*	Dental Prostheses	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	10/1/1998	na	na
OP16*	Oral Referral and F/U	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	4/1/1999a	na	na
PREGNANCY PROTOCOL FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PRNOTI*	Enrollment	10/1/1999	na	10/1/1999	na	10/1/1999	na	10/1/1999	na	10/1/1999	na
PR01*	Pregnancy Form	4/1/1999b	4/1/1999b	4/1/1999b	4/1/1999c	4/1/1999b	4/1/1999c	4/1/1999b	4/1/1999b	10/1/2004	10/1/2004
PR02*	Post-partum Form	4/1/1999d	4/1/1999c	4/1/1999d	4/1/1999d	10/1/2003	10/1/2003	10/1/2003	10/1/2003	10/1/2004	10/1/2004
PROSPECTIVE METABOLIC SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
MSSCR	MS: Screening form	na	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
MSNOTI	MS: Participant notification	na	na	4/1/2003	na	4/1/2003	na	4/1/2003a	na	4/1/2003a	na
MS01	MS: Specimen Collection for Metabolic Study	na	na	6/13/2003	na	6/13/2003a	na	6/11/2004	na	6/11/2004a	na
MS02	MS: Lab test report form	na	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
MS03	MS: DXA scan form	na	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
PULMONARY SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PQBL*	Baseline Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
PQ02	Follow-up Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
SEX STEROID SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
SSSCR*	SS: Sex steroid screening form	na	na	4/1/2003a	4/1/2003	4/1/2003a	4/1/2003	4/1/2003b	4/1/2003a	4/1/2003b	4/1/2003a
SSNOTI*	SS: Participant notification	na	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
SS01*	SS: Sex steroid lab test report form	na	na	4/1/2003	na	10/1/2003	na	10/1/2003	na	10/1/2003a	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 17		VISIT 18		VISIT 19		VISIT 20		VISIT 21	
VRS SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
VRSNOTI*	VRS Enrollment Form	na	na	10/1/2000	na	10/1/2000	na	na	na	na	na
VRS01 *	Stage II Eligibility	na	na	na	na	na	na	na	na	na	na
VRS01r*	VRS Eligibility for VRS Supplement	1/1/2002	1/1/2002	1/1/2002	1/1/2002	1/1/2002	1/1/2002	na	na	na	na
VRS03*	VRS Illnesses and Medications	10/1/2002	10/1/2002	10/1/2002	10/1/2002	10/1/2002	10/1/2002	na	na	na	na
VRS04*	VRS Antiviral Medications	10/1/2001a	10/1/2001a	1/1/2002c	1/1/2002c	10/1/2003	10/1/2003	na	na	na	na
VRS05*	VRS Screening to Determine Changes in HAART Regimen	4/1/2001a	4/1/2001a	4/1/2003	4/1/2003	4/1/2003a	10/1/2003	na	na	na	na
VRS06*	VRS Telephone Interview for Medical Providers	10/1/2000b	10/1/2000b	10/1/2000b	10/1/2000b	10/1/2000b	10/1/2000b	na	na	na	na
VRS06r*	VRS Telephone Interview for Medical Providers	6/1/2002	6/1/2002	6/1/2002	6/1/2002	6/1/2002	6/1/2002	na	na	na	na
VRS10*	VRS Plasma Separation and Freezing	10/1/2002	1/10/2002	10/1/2002	10/1/2002	10/1/2003	10/1/2003	na	na	na	na
VRS29*	VRS Blood Specimen Collection Form	10/1/2002	10/1/2002	4/1/2003	4/1/2003	10/1/2003	10/1/2003	na	na	na	na

EXPANSION FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
EL*	New Recruit Eligibility Form	na	na	na	na	na	na	na	na	na	na
F07r*	Physical Exam Addendum	na	na	na	na	na	na	na	na	na	na
F20*	New Recruit Baseline History	na	na	na	na	na	na	na	na	na	na
F20a*	New Recruit Baseline History: Addendum	na	na	na	na	na	na	na	na	na	na
F22r*	New Recruit ART History	na	na	na	na	na	na	na	na	na	na
F29r*	Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na
F31r*	Specimens Collected During PE	na	na	na	na	na	na	na	na	na	na
RAB*	Retrospective Medical Record Abstraction	na	na	na	na	na	na	na	na	na	na
RAB App*	Retrospective Medical Record Abstraction Appendix	na	na	na	na	na	na	na	na	na	na
S2*	New Recruit Sreening Form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 17		VISIT 18		VISIT 19		VISIT 20		VISIT 21	
SPANISH VERSIONS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ABRV	Abbreviated Visit	10/1/2001	na	10/1/2001a	na	10/1/2001a	na	10/1/2001a	na	10/1/2001a	na
CV01	Carotid Ultrasound Tracking Form	na	na	na	na	na	na	4/1/2004b	na	10/1/2004	na
CV29*	Fasting Blood Specimen Collection Form	na	na	na	na	na	na	4/2/2004	na	10/14/2004	na
DERM*	Dermatology Addendum	na	na	na	na	na	na	na	na	na	na
DRUG1	Antiretroviral Medications	10/1/2002a	na	4/1/2003	na	4/1/2003a	na	4/1/2004	na	10/1/2004	na
DRUG2	Non-antiviral Medications	10/1/2000b	na	10/1/2000c	na	10/1/2003	na	4/1/2004	na	10/1/2004	na
DRUG3	Hepatitis Medications	10/1/2002a	na	4/1/2003a	na	4/1/2003b	na	4/1/2004	na	10/1/2004	na
F07	Physical Exam	10/1/2002	na	4/1/2003	na	10/1/2003	na	10/1/2003b	na	10/1/2004	na
F20*	New Recruit Baseline History (Spanish)	na	na	na	na	na	na	na	na	na	na
F20a*	New Recruit Baseline History: Addendum (Spanish)	na	na	na	na	na	na	na	na	na	na
F01*/F21	Sociodemographics	10/1/2002	na	10/1/2002	na	10/1/2002	na	10/1/2002	na	10/1/2002	na
F02*/F22*	Medical & Health History	na	na	na	na	na	na	na	na	na	na
F22HX	Follow-up Health History	10/1/2002a	na	4/1/2003a	na	10/1/2003	na	4/1/2004	na	10/1/2004	na
F22MED	Medication History	10/1/2002	na	4/1/2003a	na	10/1/2003	na	4/1/2004	na	10/1/2004	na
F22r *	New Recruit ART History	na	na	na	na	na	na	na	na	na	na
F03*/F23	OB/GYN History	10/1/2002	na	4/1/2003a	na	10/1/2003	na	4/1/2004	na	10/1/2004	na
F23a*	Fertility and Infertility History	na	na	na	na	na	na	na	na	na	na
F04*/F24*	Alcohol, Drugs & Sexual Behavior (visits 1 - 24)	10/1/2002	na	4/1/2003	na	10/1/2003	na	4/1/2004	na	10/1/2004	na
F24BEH	Alcohol, Drugs & Sexual Behavior (visits 25+)	na	na	na	na	na	na	na	na	na	na
F05*/F25	Health Care Utilization	10/1/1998b	na	10/1/1998b	na	10/1/1998b	na	4/1/2004	na	10/1/2004	na
F25a*	Health Care Utilization Supplement	na	na	na	na	na	na	na	na	na	na
F25b*	Mental Health Care Utilization Supplement	na	na	na	na	na	na	na	na	na	na
F06*/F26	Psychosocial	10/1/1998d	na	10/1/1998d	na	10/1/2003	na	10/1/2003	na	10/1/2003	na
F26a*	Assessment of Physical Functioning	na	na	na	na	na	na	na	na	na	na
F26r*	History of Abuse	na	na	na	na	na	na	na	na	na	na
F29	Blood Specimen Collection Form	na	na	na	na	na	na	4/2/2004	na	4/2/2004a	na
F29a	Antiviral Usage Assessment for Blood Draw	10/1/2002	na	4/1/2003	na	4/1/2003a	na	4/1/2004	na	10/1/2004	na
F29r*	Blood Specimen Collection Form - New Recruits	na	na	na	na	na	na	na	na	na	na
F31a	Hair Color, Texture and Treatment History	na	na	na	na	na	na	na	na	na	na
FHX*	Family and Personal History	na	na	na	na	na	na	na	na	na	na
FSFI*	Female Sexual Functioning Inventory	na	na	na	na	na	na	na	na	na	na
HPVKAB*	HPV Knowledge and Beliefs	na	na	na	na	na	na	na	na	na	na
INT*	Interim Events Form	10/1/2000c	na	10/1/2000c	na	10/1/2000c	na	10/1/2000c	na	na	na
MEN01	Menopause Symptom Questionnaire	na	na	na	na	na	na	na	na	na	na
MS01	MS: Specimen Collection for Metabolic Study	na	na	6/13/2003a	na	6/13/2003a	na	6/11/2004	na	6/11/2004a	na
NC01a*	Interviewer Script	na	na	na	na	na	na	na	na	10/1/2004	na
NC01b*	Interviewer Script	na	na	na	na	na	na	na	na	10/1/2004	na
NC02a	English Word List (WRAT)	na	na	na	na	na	na	na	na	10/1/2004b	10/1/2004b
NC02b*	Spanish Word List (WAT)	na	na	na	na	na	na	na	na	10/1/2004b	10/1/2004b
NC03	Educational Experience	na	na	na	na	na	na	na	na	10/1/2004	na
NI01*	NIDA Health Care Utilization Interview	na	na	na	na	na	na	na	na	na	na
NP01*	Neuropathy Signs and Symptoms - baseline	na	na	na	na	na	na	na	na	na	na
NP02	Neuropathy Signs and Symptoms - follow up	na	na	na	na	na	na	na	na	na	na
OP02*	Oral Interview	10/1/1998	na	10/1/1998	na	10/1/2003	na	10/1/2003	na	na	na
PAQ*	Physical Activity Questionnaire	na	na	na	na	na	na	na	na	na	na
PBM*	Performance-based Measurements	na	na	na	na	na	na	na	na	na	na
PK02	PK: Current Antiretroviral Medication Use	na	na	4/1/2003	na	4/1/2003a	na	4/1/2003b	na	10/1/2004	na
PK02a	PK: Antiretroviral Adherence	na	na	4/1/2003	na	4/1/2003	na	4/1/2003a	na	4/1/2003a	na
PK03	PK: Recent Illnesses, Concurrent Meds & OB/GYN History	na	na	4/1/2003	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na
PK04	PK: Recent Substance Use	na	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
PQBL*	Baseline Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
PQ02	Follow-up Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
PTSD*	Civilian Post-Traumatic Stress Disorder Questionnaire	na	na	na	na	na	na	na	na	na	na
S2*	New Recruit Sreening Form	na	na	na	na	na	na	na	na	na	na
SSSCR*	SS: Sex steroid Screening Form	na	na	4/1/2003a	na	4/1/2003	na	4/1/2003b	na	4/1/2003b	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 22		VISIT 23		VISIT 24		VISIT 25		VISIT 26	
FOLLOW-UP INTERVIEW/EXAM FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
DRUG1	Antiretroviral Medications	10/1/2004	10/1/2004	10/1/2005	10/1/2005	10/1/2005a	10/1/2005a	10/1/2005b	10/1/2005b	10/1/2005b	10/1/2005b
DRUG2	Non-antiviral Medications	10/1/2004	10/1/2004	10/1/2004a	10/1/2004a	10/1/2004a	10/1/2004a	10/1/2004a	10/1/2004a	10/1/2004a	10/1/2004a
DRUG3	Hepatitis Medications	10/1/2004a	10/1/2004a	10/1/2004b	10/1/2004b	10/1/2004b	10/1/2004b	10/1/2004c	10/1/2004b	10/1/2004c	10/1/2004b
DSG	Antiretroviral Dosage	na	na	10/2/2005	10/2/2005	10/2/2005b	10/2/2005a	10/2/2005e	10/2/2005c	10/2/2005e	10/2/2005c
F07	Physical Exam	10/1/2004a	10/1/2004a	10/1/2005	10/1/2005	10/1/2005	10/1/2005a	10/1/2005	10/1/2005a	4/1/2007a	4/1/2007a
F08	Gynecological Exam	10/1/2004	10/1/2004	10/1/2005	10/1/2005	10/1/2005a	10/1/2005a	10/1/2005a	10/1/2005a	10/1/2005a	10/1/2005a
F08a	Potential CVL Contaminants	10/1/1998	na	10/1/2005	na	10/1/2005	na	10/1/2005	na	10/1/2005	na
F01*/F21	Sociodemographics	10/1/2002	10/1/2002	10/1/2005	10/1/2005a	10/1/2005	10/1/2005a	10/1/2005	10/1/2005a	10/1/2005	10/1/2005a
F02*/F22*	Medical & Health History (visits 1 - 16)	na	na	na	na	na	na	na	na	na	na
F22HX	Follow-up Health History (visit 17+)	10/1/2004	10/1/2004	10/1/2005	10/1/2005	4/1/2006	4/1/2006	10/1/2006a	10/1/2006a	4/1/2007a	4/1/2007a
F22MED	Medication History (visit 17+)	10/1/2004c	10/1/2004	10/1/2005	10/1/2005	4/1/2006	4/1/2006	10/1/2006a	10/1/2006	4/1/2007	4/1/2007a
F03*/F23	OB/GYN History	4/1/2005	4/1/2005	10/1/2005a	10/1/2005a	4/2/2006	4/2/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006
F04*/F24*	Alcohol, Drugs & Sexual Behavior (visits 1 - 24)	10/1/2004	10/1/2004	10/2/2005	10/2/2005	4/12/2006	4/12/2006	na	na	na	na
F24BEH	Alcohol, Drugs & Sexual Behavior (visit 25+)	na	na	na	na	na	na	10/1/2006	10/1/2006	4/1/2007	4/1/2007
F05*/F25	Health Care Utilization	10/1/2004a	10/1/2004a	10/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2005
F25a*	Health Care Utilization Supplement	na	na	na	na	na	na	na	na	na	na
F06*/F26	Psychosocial	4/1/2005	4/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2005a	10/1/2005a	10/1/2005b	10/1/2005b
F26r*	History of Abuse	na	na	na	na	na	na	10/1/2006	10/1/2006	10/1/2006	10/1/2006
FHX*	Family and Personal History	na	na	na	na	na	na	na	na	na	na
NP01*	Neuropathy Signs and Symptoms - baseline	na	na	na	na	na	na	na	na	na	na
NP02	Neuropathy Signs and Symptoms - follow up	na	na	na	na	na	na	na	na	na	na
MISCELLANEOUS SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
DERM*	Dermatology Addendum	na	na	na	na	na	na	na	na	na	na
F23a*	Fertility and Infertility History	na	na	na	na	na	na	na	na	na	na
F25b*	Mental Health Care Utilization	na	na	11/8/2005	na	11/8/2005	na	na	na	na	na
FSFI*	Female Sexual Functioning Inventory	na	na	na	na	na	na	10/1/2006	10/1/2006	na	na
HPVKAB*	HPV Knowledge and Beliefs	na	na	na	na	na	na	na	na	4/1/2007	4/1/2007
MINOTI	Mucosal Immunity Notificaiton Form	na	na	na	na	na	na	na	na	na	na
TRUST*	Opinions about Health System and HIV/AIDS	na	na	na	na	4/1/2006	4/1/2006	na	na	na	na
SPECIMEN COLLECTION FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
F10*	Plasma & Cell Separation and Freezing	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994	8/15/1994
F09*/F29	Blood Specimen Collection Form	4/2/2004b	4/2/2004a	10/1/2005	10/1/2005	4/1/2006a	4/1/2006a	4/1/2006a	4/1/2006a	4/1/2006a	4/1/2006a
F29a	Antiviral Usage Assessment for Blood Draw	10/1/2004	10/1/2004	10/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2005a	10/1/2005a	10/1/2005a	10/1/2005a
F11*/F31	Specimens Collected During PE	10/1/2004	10/1/2004	10/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2005a	10/1/2005a	10/1/2005b	10/1/2005b
F31a	Hair Color, Texture and Treatment History	na	na	na	na	na	na	10/1/2006	na	10/1/2006	na
L20	Repository Specimen Processing	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 22		VISIT 23		VISIT 24		VISIT 25		VISIT 26	
LOCAL LAB FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
L01	HIV ELISA and Western Blot	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na	10/1/1998	na
L02*	Serum Antibody Tests - Hepatitis	na	na	na	na	na	na	na	na	na	na
L03	Automated CBC/Differential	10/1/2004	na	10/1/2004	na	10/1/2004	na	10/1/2006	na	10/1/2006	na
L03a	Hand-Manual Differential	10/1/2004	na	10/1/2004	na	10/1/2004	na	10/1/2004	na	10/1/2004	na
L04	Flow Cytometry	10/1/2004	na	10/1/2004	na	10/1/2004	na	10/1/2004	na	10/1/2004	na
L05	Liver/Renal Function Tests	4/1/2003	na	4/1/2003	na	4/1/2006	na	4/1/2006	na	4/1/2006	na
L06*	Serum Antibody Tests - Syphilis Screening	na	na	na	na	na	na	na	na	na	na
L07*	Mantoux Skin Test Result Anergy Panel	na	na	na	na	na	na	na	na	na	na
L08*	PPD Skin Test	na	na	na	na	na	na	na	na	na	na
L09*	Chlamydia	na	na	na	na	na	na	na	na	na	na
L10*	Urinalysis	na	na	na	na	na	na	na	na	na	na
L11*	Urine Culture Results	na	na	na	na	na	na	na	na	na	na
L12	(Urine) Pregnancy Test	8/15/1994d	na	8/15/1994d	na	8/15/1994d	na	8/15/1994d	na	8/15/1994d	na
L13*	Gonorrhea	na	na	na	na	na	na	na	na	na	na
L14	Colposcopy Results	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a
L15	Biopsy Histopathology Pelvic Exam	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003	4/1/2003
L16	Dysplasia Treatment	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997
L17*	Herpes Culture of Ulcers and Fissures	na	na	na	na	na	na	na	na	na	na
L18	Trichomonas Vaginalis Culture (optional)	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
L19*	CVL Processing	10/1/2001	na	10/1/2001	na	10/1/2001	na	10/1/2001	na	10/1/2001	na
CENTRAL LAB FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
C30*	Toxoplasma Serology	na	na	na	na	na	na	na	na	na	na
C31*	Human Retrovirus Testing	na	na	na	na	na	na	na	na	na	na
C45	Bacterial Vaginosis Smear Gram Stain	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
C50*	Urine for Chlamydia	na	na	na	na	na	na	na	na	na	na
C52	HPV by PCR	8/1/1995	na	8/1/1995	na	8/1/1995	na	8/1/1995	na	8/1/1995	na
C54	Viral Load	4/1/2000	na	4/1/2000	na	4/1/2000	na	4/1/2000	na	4/1/2000	na
C60	Pap Smear	4/1/2002	na	4/1/2002	na	4/1/2002	na	4/1/2002	na	4/1/2002	na
C60a*	Pap Smear Retrospective Re-Read v1-15	4/1/2003	na	4/1/2003	na	4/1/2003	na	na	na	na	na
C60b*	Pap Smear Retrospective Re-Read v16	4/1/2003	na	4/1/2003	na	4/1/2003	na	na	na	na	na
C65*	Syphilis DFA - Genital Ulcers & Fissure	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
C66*	Serum Antibody Type-Specific Herpes Serology	na	na	na	na	na	na	na	na	na	na
C70*	Laboratory - Stimulated Saliva Evaluation	na	na	na	na	na	na	na	na	na	na
C71*	Laboratory - Subgingival Plaque	na	na	na	na	na	na	na	na	na	na
C72*	Laboratory - Erythematous Candidiasis Smear Results	na	na	na	na	na	na	na	na	na	na
ADMINISTRATIVE FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ABRV	Abbreviated Visit	10/1/2001a	na	10/1/2001b	na	10/1/2001b	na	10/1/2001b	na	10/1/2001b	na
ANTHRO	Anthropometry Training Form	10/1/2002a	na	10/1/2002a	na	10/1/2002a	na	10/1/2002a	na	10/1/2002a	na
CONS	Consent Status Tracking Form	na	na	na	na	na	na	na	na	na	na
CRST*	Central Repository Shipment Tracking	04/01/2005a	na	04/01/2005a	na	11/1/2005	na	11/1/2005	na	4/1/2007	4/1/2007
DENR	Disenrollment Form	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004
INT*	Interim Events Form	na	na	na	na	na	na	na	na	na	na
MVIS	Missed Visit Form	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a
REF	Referral Checklist	4/1/2005	na	10/1/2005a	na	4/1/2006	na	10/1/2006	na	4/1/2007	na
TRANS	Transfer Form	10/1/2001a	10/1/2001a	10/1/2001a	10/1/2001a	10/1/2001b	10/1/2001b	10/1/2001c	10/1/2001c	10/1/2001c	10/1/2001c

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 22		VISIT 23		VISIT 24		VISIT 25		VISIT 26	
OUTCOMES ASCERTAINMENT FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ACS*	Ascertainment Control Sheet	na	na	na	na	na	na	na	na	na	na
ACSR ATC*	ACSR Ascertainment Tracking Checklist	4/1/1999b	na	4/1/1999b	na	4/1/1999b	na	4/1/1999b	na	4/1/1999b	na
ATC	Ascertainment Tracking Checklist	10/1/1998a	4/1/2004	10/1/1998a	4/1/2004	10/1/1998a	4/1/2006	10/1/1998a	4/1/2006	10/1/1998a	4/1/2006a
CNCR	Cancer Registry Case Report	5/20/1999b	5/20/1999b	5/20/1999b	5/20/1999b	5/20/1999b	5/20/1999b	5/20/1999b	5/20/1999b	4/1/2007	4/1/2007
CORE	Clinical Outcomes Reporting Form	4/1/2005	4/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2005	4/1/2007a	4/1/2007a
QCCD	QC Review of Cancer Diagnoses	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004
QCGY	QC Review of Gynecologic Material	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na
QCHS*	Hysterectomy Abstraction Form	na	na	na	na	4/1/2006	na	4/1/2006	na	4/1/2006	na
QCLB	Liver Biopsy Abstraction Form	na	na	na	na	7/15/2006	na	7/15/2006	na	6/8/2007	na
QCSS	QC Central Review of Surgical Specimens	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na
TB	TB - Verified Case Report	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999
VAC*	Vaccination History Form	na	na	na	na	na	na	11/1/2006	na	11/1/2006	na
CARDIOVASCULAR SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
CVNOTI*	Participant Notification	4/1/2004a	4/1/2004a	na	na	na	na	na	na	na	na
CV01	Carotid Ultrasound Tracking Form	10/1/2004	10/1/2004	10/1/2004	10/1/2004	10/1/2004	10/1/2004	10/1/2004a	10/1/2004a	10/1/2004a	10/1/2004a
CV29*	Fasting Blood Specimen Collection Form	10/14/2004a	10/14/2004	10/14/2004a	10/14/2004	4/1/2006	4/1/2006a	4/1/2006	4/1/2006a	4/1/2006	4/1/2006a
HHV-8 SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
HVDENR*	Disenrollment	na	na	na	na	na	na	na	na	na	na
HVMVIS*	Missed Visit	na	na	na	na	na	na	na	na	na	na
HVNOTI*	Recruitment Outcome Form	na	na	na	na	na	na	na	na	na	na
HVSPEC*	Specimen Collection	na	na	na	na	na	na	na	na	na	na
INTENSIVE PK SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PK01	Eligibility for Intensive PK Stubstudy	4/1/2004	na	4/1/2004	na	4/1/2004	na	10/1/2006	na	10/1/2006	na
PKNOTI	PK: Participant notification	4/1/2004	na	4/1/2004	na	4/1/2004	na	4/1/2004	na	4/1/2004	na
PK02	PK: Current Antiretroviral medication use	10/1/2004	na	10/1/2004a	na	10/1/2004a	na	10/1/2004b	na	10/1/2004b	na
PK02a	PK: Antiretroviral adherence	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na
PK03	PK: Recent illnesses, concurrent meds & OB/GYN hist	4/1/2003a	na	10/1/2005	na	10/1/2005	na	10/1/2005	na	10/1/2005	na
PK04	PK: Recent substance use	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
PK05a	PK: Weight and Specimen collection: group A	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na
PK05b	PK: Weight and Specimen collection: group B	4/1/2004	na	4/1/2004	na	4/1/2004	na	4/1/2004	na	4/1/2004	na
PK05c	PK: Weight and Specimen collection: group C	4/1/2004	na	4/1/2004	na	4/1/2004	na	4/1/2004	na	4/1/2004	na
PK06	PK: Dosing of antiretroviral medications	4/1/2005	na	4/1/2005a	na	4/1/2005b	na	10/1/2006a	na	10/1/2006a	na
PK07	PK: Plasma Separation and Freezing Form	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
PK08	PK: Dietary Fat Percentage Questionnaire	5/14/2003a	na	5/14/2003a	na	5/14/2003a	na	5/14/2003a	na	5/14/2003a	na
PK-DIET	PK: Dietary Assessment	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na
MALT / GALT SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
MG01	Pre-Eligibility (complete after core)	na	na	na	na	na	na	na	na	na	na
MG02	Pre-Eligibility (complete by study coordinator)	na	na	na	na	na	na	na	na	na	na
MG03	Screening Visit	na	na	na	na	na	na	na	na	na	na
MG04	Notification of Enrollment (NOTI)	na	na	na	na	na	na	na	na	na	na
MG05	Colonoscopy/EMB Preparation Checklist/Worksheet	na	na	na	na	na	na	na	na	na	na
MG06	Colonoscopy Procedure Form	na	na	na	na	na	na	na	na	na	na
MG07	Endometrial & Endocervical Biopsy Procedure Form	na	na	na	na	na	na	na	na	na	na
MG08	Biopsy Specimen Tracking Form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 22		VISIT 23		VISIT 24		VISIT 25		VISIT 26	
NEUROCOGNITION AND AGING FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
F26a*	Assessment of Physical Functioning	4/1/2005	na	4/1/2005	na	na	na	na	na	na	na
MEN01	Menopause Symptom Questionnaire	na	na	na	na	na	na	10/1/2006	na	na	na
NC01a	Cognitive Measures (Standard TMT and SDMT)	10/1/2004c	10/1/2004c	10/1/2004c	10/1/2004c	10/1/2004c	10/1/2004c	na	na	na	na
NC01a*	Interviewer Script	10/1/2004	na	10/1/2004	na	10/1/2004	na	na	na	na	na
NC01b*	Cognitive Measures (Color TMT)	10/1/2004b	10/1/2004b	na	na	na	na	na	na	na	na
NC01b*	Interviewer Script	10/1/2004	na	na	na	na	na	na	na	na	na
NC02a	English Word List (WRAT)	10/1/2004b	10/1/2004b	na	na	na	na	na	na	na	na
NC03	Educational Experience	10/1/2004	10/1/2004	na	na	na	na	na	na	na	na
NC04	Wechsler Test of Adult Reading (WTAR)	4/1/2005	4/1/2005	4/1/2005	4/1/2005	na	na	na	na	na	na
NC05*	Interviewer Feedback	4/1/2005	4/1/2005	4/1/2005	4/1/2005	4/1/2006	4/1/2006	na	na	na	na
NC06	Hopkins Verbal Learning Test-Revised	na	na	na	na	na	na	10/1/2006a	10/1/2006b	na	na
NC07	Stroop Test	na	na	na	na	na	na	10/1/2006b	10/1/2006b	na	na
NC08	Verbal Fluency	na	na	na	na	na	na	na	na	na	na
NC09	Letter Number Span	na	na	na	na	na	na	na	na	na	na
NC10	Grooved Pegboard	na	na	na	na	na	na	na	na	na	na
PAQ*	Physical Activity Questionnaire	4/1/2005	na	4/1/2005	na	na	na	na	na	na	na
PBM*	Performance-based Measurements	4/1/2005a	4/1/2005a	4/1/2005a	4/1/2005a	na	na	na	na	na	na
PTSD	Civilian Post-Traumatic Stress Disorder Questionnaire	na	na	na	na	na	na	na	na	na	na

NIDA I/V AND HCU											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
NI01*	Health Care Utilization Collaborative WIHS/HERS Interview	na	na	na	na	na	na	na	na	na	na
NI02*	General Abstraction	na	na	na	na	na	na	na	na	na	na
NI03*	Pneumonia Abstraction	na	na	na	na	na	na	na	na	na	na
NI04*	Pneumonia Episode Abstraction	na	na	na	na	na	na	na	na	na	na
NI05*	Diarrhea Abstraction	na	na	na	na	na	na	na	na	na	na
NVNOTI*	Participant Notification	na	na	na	na	na	na	na	na	na	na
NV01*	Enrollment Interview	na	na	na	na	na	na	na	na	na	na
NV02*	Antiretroviral Drug Use	na	na	na	na	na	na	na	na	na	na
NV03*	Specimen Collection	na	na	na	na	na	na	na	na	na	na
NV04*	Specimen Processing	na	na	na	na	na	na	na	na	na	na
NV05*	Flow Cytometry	na	na	na	na	na	na	na	na	na	na
NV06*	RNA Quantification on CVL	na	na	na	na	na	na	na	na	na	na
NV07*	Urine Toxicology	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 22		VISIT 23		VISIT 24		VISIT 25		VISIT 26	
ORAL PROTOCOL FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
OPNOTI*	Oral Protocol Participant Notification (expansion)	na	na	na	na	na	na	na	na	na	na
OP01*	Medical Evaluation	na	na	na	na	na	na	na	na	na	na
OP02*	Research Interview	na	na	na	na	na	na	na	na	na	na
OP03*	Saliva Sample Collection	na	na	na	na	na	na	na	na	na	na
OP04*	Oral Mucosal Tissue Exam	na	na	na	na	na	na	na	na	na	na
OP04a*	Addendum	na	na	na	na	na	na	na	na	na	na
OP05*	Smear Results	na	na	na	na	na	na	na	na	na	na
OP06*	Tooth Count & Random Half Mouth	na	na	na	na	na	na	na	na	na	na
OP07*	Plaque Index	na	na	na	na	na	na	na	na	na	na
OP08*	Gingival Banding Score	na	na	na	na	na	na	na	na	na	na
OP09*	Papillary Assessment	na	na	na	na	na	na	na	na	na	na
OP10*	Subgingival Plaque	na	na	na	na	na	na	na	na	na	na
OP11*	Coronal Caries	na	na	na	na	na	na	na	na	na	na
OP12*	Root Caries	na	na	na	na	na	na	na	na	na	na
OP13*	Gingival Bleeding	na	na	na	na	na	na	na	na	na	na
OP14*	Loss of Attachment	na	na	na	na	na	na	na	na	na	na
OP15*	Dental Prostheses	na	na	na	na	na	na	na	na	na	na
OP16*	Oral Referral and F/U	na	na	na	na	na	na	na	na	na	na
PREGNANCY PROTOCOL FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PRNOTI*	Enrollment	4/1/2005	na	na	na	na	na	na	na	na	na
PR01*	Pregnancy Form	10/1/2004	10/1/2004	na	na	na	na	na	na	na	na
PR02*	Post-partum Form	10/1/2004a	10/1/2004a	na	na	na	na	na	na	na	na
PROSPECTIVE METABOLIC SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
MSSCR	MS: Screening form	4/1/2005a	na	4/1/2005a	na	4/1/2005a	na	4/1/2005a	na	4/1/2005a	na
MSNOTI	MS: Participant notification	4/1/2003b	na	4/1/2003b	na	4/1/2003b	na	4/1/2003b	na	4/1/2003b	na
MS01	MS: Specimen Collection for Metabolic Study	4/1/2005	na	4/1/2005b	na	4/1/2006	na	4/1/2006a	na	4/1/2006a	na
MS02	MS: Lab test report form	4/1/2005	na	4/1/2005	na	4/1/2005	na	4/1/2005	na	4/1/2005	na
MS03	MS: DXA scan form	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
PULMONARY SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PQBL*	Baseline Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
PQ02	Follow-up Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
SEX STEROID SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
SSSCR*	SS: Sex steroid screening form	4/1/2003b	4/1/2003a	4/1/2003b	4/1/2003a	4/1/2003b	4/1/2003a	na	na	na	na
SSNOTI*	SS: Participant notification	4/1/2003	na	4/1/2003	na	4/1/2003	na	na	na	na	na
SS01*	SS: Sex steroid lab test report form	10/1/2003a	na	10/1/2003a	na	10/1/2003a	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 22		VISIT 23		VISIT 24		VISIT 25		VISIT 26	
VRS SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
VRSNOTI*	VRS Enrollment Form	na	na	na	na	na	na	na	na	na	na
VRS01 *	Stage II Eligibility	na	na	na	na	na	na	na	na	na	na
VRS01r*	VRS Eligibility for VRS Supplement	na	na	na	na	na	na	na	na	na	na
VRS03*	VRS Illnesses and Medications	na	na	na	na	na	na	na	na	na	na
VRS04*	VRS Antiviral Medications	na	na	na	na	na	na	na	na	na	na
VRS05*	VRS Screening to Determine Changes in HAART Regimen	na	na	na	na	na	na	na	na	na	na
VRS06*	VRS Telephone Interview for Medical Providers	na	na	na	na	na	na	na	na	na	na
VRS06r*	VRS Telephone Interview for Medical Providers	na	na	na	na	na	na	na	na	na	na
VRS10*	VRS Plasma Separation and Freezing	na	na	na	na	na	na	na	na	na	na
VRS29*	VRS Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na

EXPANSION FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
EL*	New Recruit Eligibility Form	na	na	na	na	na	na	na	na	na	na
F07r*	Physical Exam Addendum	na	na	na	na	na	na	na	na	na	na
F20*	New Recruit Baseline History	na	na	na	na	na	na	na	na	na	na
F20a*	New Recruit Baseline History: Addendum	na	na	na	na	na	na	na	na	na	na
F22r*	New Recruit ART History	na	na	na	na	na	na	na	na	na	na
F29r*	Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na
F31r*	Specimens Collected During PE	na	na	na	na	na	na	na	na	na	na
RAB*	Retrospective Medical Record Abstraction	na	na	na	na	na	na	na	na	na	na
RAB App*	Retrospective Medical Record Abstraction Appendix	na	na	na	na	na	na	na	na	na	na
S2*	New Recruit Sreening Form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 22		VISIT 23		VISIT 24		VISIT 25		VISIT 26	
SPANISH VERSIONS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ABRV	Abbreviated Visit	10/1/2001a	na	10/1/2001b	na	10/1/2001b	na	10/1/2001b	na	10/1/2001b	na
CV01	Carotid Ultrasound Tracking Form	10/1/2004	na	10/1/2004	na	10/1/2004	na	10/1/2004a	na	10/1/2004a	na
CV29*	Fasting Blood Specimen Collection Form	10/14/2004a	na	10/14/2004a	na	4/1/2006	na	4/1/2006	na	4/1/2006	na
DERM*	Dermatology Addendum	na	na	na	na	na	na	na	na	na	na
DRUG1	Antiretroviral Medications	10/1/2004	na	10/1/2005	na	10/1/2005a	na	10/1/2005b	na	10/1/2005b	na
DRUG2	Non-antiviral Medications	10/1/2004	na	10/1/2004a	na	10/1/2004b	na	10/1/2004b	na	10/1/2004b	na
DRUG3	Hepatitis Medications	10/1/2004a	na	10/1/2004b	na	10/1/2004b	na	10/1/2004c	na	10/1/2004c	na
F07	Physical Exam	10/1/2004a	na	10/1/2005	na	10/1/2005	na	10/1/2005	na	4/1/2007a	na
F20*	New Recruit Baseline History (Spanish)	na	na	na	na	na	na	na	na	na	na
F20a*	New Recruit Baseline History: Addendum (Spanish)	na	na	na	na	na	na	na	na	na	na
F01*/F21	Sociodemographics	10/1/2002	na	10/1/2005	na	10/1/2005a	na	10/1/2005a	na	10/1/2005a	na
F02*/F22*	Medical & Health History	na	na	na	na	na	na	na	na	na	na
F22HX	Follow-up Health History	10/1/2004	na	10/1/2005	na	4/1/2006	na	10/1/2006a	na	4/1/2007a	na
F22MED	Medication History	10/1/2004b	na	10/1/2005	na	4/1/2006	na	10/1/2006a	na	4/1/2007a	na
F22r *	New Recruit ART History	na	na	na	na	na	na	na	na	na	na
F03*/F23	OB/GYN History	4/1/2005	na	10/1/2005a	na	4/2/2006	na	10/1/2006	na	10/1/2006	na
F23a*	Fertility and Infertility History	na	na	na	na	na	na	na	na	na	na
F04*/F24*	Alcohol, Drugs & Sexual Behavior (visits 1 - 24)	10/1/2004	na	10/2/2005	na	4/12/2006	na	na	na	na	na
F24BEH	Alcohol, Drugs & Sexual Behavior (visits 25+)	na	na	na	na	na	na	10/1/2006	na	4/1/2007	na
F05*/F25	Health Care Utilization	10/1/2004a	na	10/1/2005	na	10/1/2005a	na	10/1/2005a	na	10/1/2005a	na
F25a*	Health Care Utilization Supplement	na	na	na	na	na	na	na	na	na	na
F25b*	Mental Health Care Utilization Supplement	na	na	11/8/2005	na	11/8/2005	na	na	na	na	na
F06*/F26	Psychosocial	4/1/2005	na	10/1/2005	na	10/1/2005	na	10/1/2005a	na	10/1/2005b	na
F26a*	Assessment of Physical Functioning	4/1/2005	na	4/1/2005	na	na	na	na	na	na	na
F26r*	History of Abuse	na	na	na	na	na	na	10/1/2006	na	10/1/2006	na
F29	Blood Specimen Collection Form	4/2/2004b	na	10/1/2005	na	4/1/2006a	na	4/1/2006a	na	4/1/2006a	na
F29a	Antiviral Usage Assessment for Blood Draw	10/1/2004	na	10/1/2005	na	10/1/2005	na	10/1/2005a	na	10/1/2005a	na
F29r*	Blood Specimen Collection Form - New Recruits	na	na	na	na	na	na	na	na	na	na
F31a	Hair Color, Texture and Treatment History	na	na	na	na	na	na	10/1/2006	na	10/1/2006	na
FHX*	Family and Personal History	na	na	na	na	na	na	na	na	na	na
FSFI*	Female Sexual Functioning Inventory	na	na	na	na	na	na	10/1/2006	na	na	na
HPVKAB*	HPV Knowledge and Beliefs	na	na	na	na	na	na	na	na	4/1/2007	na
INT*	Interim Events Form	na	na	na	na	na	na	na	na	na	na
MEN01	Menopause Symptom Questionnaire	na	na	na	na	na	na	na	na	na	na
MS01	MS: Specimen Collection for Metabolic Study	4/1/2005	na	4/1/2005b	na	4/1/2006	na	4/1/2006a	na	4/1/2006a	na
NC01a*	Interviewer Script	10/1/2004	na	10/1/2004a	na	10/1/2004a	na	na	na	na	na
NC01b*	Interviewer Script	10/1/2004	na	na	na	na	na	na	na	na	na
NC02a	English Word List (WRAT)	10/1/2004b	10/1/2004b	na	na	na	na	na	na	na	na
NC02b*	Spanish Word List (WAT)	10/1/2004b	10/1/2004b	na	na	na	na	na	na	na	na
NC03	Educational Experience	10/1/2004	na	na	na	na	na	na	na	na	na
NI01*	NIDA Health Care Utilization Interview	na	na	na	na	na	na	na	na	na	na
NP01*	Neuropathy Signs and Symptoms - baseline	na	na	na	na	na	na	na	na	na	na
NP02	Neuropathy Signs and Symptoms - follow up	na	na	na	na	na	na	na	na	na	na
OP02*	Oral Interview	na	na	na	na	na	na	na	na	na	na
PAQ*	Physical Activity Questionnaire	4/1/2005	na	4/1/2005	na	na	na	na	na	na	na
PBM*	Performance-based Measurements	4/1/2005a	na	4/1/2005a	na	na	na	na	na	na	na
PK02	PK: Current Antiretroviral Medication Use	10/1/2004	na	10/1/2004a	na	10/1/2004a	na	10/1/2004b	na	10/1/2004b	na
PK02a	PK: Antiretroviral Adherence	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na
PK03	PK: Recent Illnesses, Concurrent Meds & OB/GYN History	4/1/2003a	na	10/1/2005	na	10/1/2005	na	10/1/2005	na	10/1/2005	na
PK04	PK: Recent Substance Use	4/1/2003	na	4/1/2003a	na	4/1/2003a	na	4/1/2003	na	4/1/2003	na
PQBL*	Baseline Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
PQ02	Follow-up Pulmonary Questionnaire	na	na	na	na	na	na	na	na	na	na
PTSD*	Civilian Post-Traumatic Stress Disorder Questionnaire	na	na	na	na	na	na	na	na	na	na
S2*	New Recruit Sreening Form	na	na	na	na	na	na	na	na	na	na
SSSCR*	SS: Sex steroid Screening Form	4/1/2003b	na	4/1/2003b	na	4/1/2003b	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 27		VISIT 28		VISIT 29		VISIT 30		VISIT 31	
FOLLOW-UP INTERVIEW/EXAM FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
DRUG1	Antiretroviral Medications	10/1/2005c	10/1/2005c	10/01/2005d	10/1/2005c	10/01/2005d	10/1/2005c	10/01/2005e	10/1/2005d	10/01/2005e	10/1/2005d
DRUG2	Non-antiviral Medications	10/1/2004d	10/1/2004b	10/01/2004e	10/1/2004b	10/01/2004e	10/1/2004b	10/01/2004e	10/1/2004b	10/01/2004e	10/1/2004b
DRUG3	Hepatitis Medications	10/1/2004c	10/1/2004b	10/01/2004d	10/1/2004b	10/01/2004d	10/1/2004b	10/01/2004d	10/1/2004b	10/01/2004d	10/1/2004b
DSG	Antiretroviral Dosage	10/2/2005f	10/2/2005d	10/02/2005g	10/02/2005d	10/02/2005i	10/02/2005h	10/02/2005j	10/02/2005h	10/02/2005j	10/02/2005h
F07	Physical Exam	4/1/2007a	4/1/2007a	4/1/2007a	4/1/2007a	10/1/2008	10/1/2008	10/1/2008	10/1/2008	10/1/2009	10/1/2009
F08	Gynecological Exam	10/1/2005a	10/1/2005a	10/1/2005a	10/1/2005a	10/1/2005a	10/1/2005a	10/1/2005a	10/1/2005a	10/1/2005b	10/1/2005b
F08a	Potential CVL Contaminants	10/1/2005	na	10/1/2005	na	10/1/2005	na	10/1/2005	na	10/1/2005	na
F01*/F21	Sociodemographics	10/1/2007	10/1/2007	4/1/2008	4/1/2008	10/1/2008	10/1/2008	4/2/2009a	4/2/2009a	4/2/2009b	4/2/2009a
F02*/F22*	Medical & Health History (visits 1 - 16)	na	na	na	na	na	na	na	na	na	na
F22HX	Follow-up Health History (visit 17+)	4/1/2007a	4/1/2007b	4/1/2008	4/1/2008	10/1/2008	10/1/2008	4/1/2009a	4/1/2009	10/1/2009	10/1/2009
F22MED	Medication History (visit 17+)	4/1/2007a	4/1/2007b	4/1/2008	4/1/2008	10/1/2008	10/1/2008	4/1/2009a	4/1/2009	10/1/2009a	10/1/2009
F03*/F23	OB/GYN History	10/1/2007	10/1/2007	10/1/2007a	10/1/2007a	10/1/2008	10/1/2008	4/1/2009	4/1/2009	10/1/2009a	10/1/2009
F04*/F24*	Alcohol, Drugs & Sexual Behavior (visits 1 - 24)	na	na	na	na	na	na	na	na	na	na
F24BEH	Alcohol, Drugs & Sexual Behavior (visit 25+)	4/1/2007a	4/1/2007a	4/1/2008	4/1/2008	10/1/2008a	10/1/2008	4/1/2009a	4/1/2009a	10/1/2009a	10/1/2009
F05*/F25	Health Care Utilization	10/1/2005	10/1/2005	10/1/2005	10/1/2005	10/1/2008	10/1/2008	10/1/2008	10/1/2008	10/1/2008	10/1/2008
F25a*	Health Care Utilization Supplement	na	na	na	na	na	na	na	na	na	na
F06*/F26	Psychosocial	10/1/2005b	10/1/2005b	10/1/2005b	10/1/2005b	10/1/2005b	10/1/2005b	10/1/2005b	10/1/2005b	10/1/2005c	10/1/2005b
F26r*	History of Abuse	na	na	na	na	na	na	na	na	na	na
FHX*	Family and Personal History	na	na	na	na	na	na	na	na	na	na
NP01*	Neuropathy Signs and Symptoms - baseline	10/1/2007a	10/1/2007a	10/1/2007a	10/1/2007a	na	na	na	na	na	na
NP02	Neuropathy Signs and Symptoms - follow up	na	na	na	na	na	na	4/1/2009a	4/1/2009	4/1/2009b	4/1/2009a
MISCELLANEOUS SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
DERM*	Dermatology Addendum	na	na	na	na	10/1/2008c	na	na	na	na	na
F23a*	Fertility and Infertility History	na	na	na	na	na	na	na	na	na	na
F25b*	Mental Health Care Utilization	na	na	na	na	na	na	na	na	na	na
FSFI*	Female Sexual Functioning Inventory	na	na	na	na	na	na	na	na	na	na
HPVKAB*	HPV Knowledge and Beliefs	na	na	na	na	10/1/2008a	10/1/2008a	10/1/2008a	10/1/2008a	na	na
MINOTI	Mucosal Immunity Notificaiton Form	na	na	na	na	na	na	4/1/2009a	na	4/1/2009a	na
TRUST*	Opinions about Health System and HIV/AIDS	na	na	na	na	na	na	na	na	na	na
SPECIMEN COLLECTION FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
F10*	Plasma & Cell Separation and Freezing	8/15/1994	8/15/1994	8/15/1994	8/15/1994	na	na	na	na	na	na
F09*/F29	Blood Specimen Collection Form	4/1/2006a	4/1/2006a	4/1/2006b	4/1/2006b	10/1/2008a	10/1/2008	10/1/2008a	10/1/2008	10/1/2008b	10/1/2008
F29a	Antiviral Usage Assessment for Blood Draw	10/1/2005b	10/1/2005b	10/1/2005c	10/1/2005c	10/1/2005c	10/1/2005c	10/1/2005c	10/1/2005c	10/1/2009	10/1/2009
F11*/F31	Specimens Collected During PE	10/1/2005b	10/1/2005b	10/1/2005b	10/1/2005b	10/1/2008	10/1/2008	10/1/2008	10/1/2008	10/1/2009	10/1/2009
F31a	Hair Color, Texture and Treatment History	10/1/2006	na	10/1/2006	na	10/1/2006	na	10/1/2006	na	10/1/2006	na
L20	Repository Specimen Processing	na	na	na	na	10/1/2008	na	10/1/2008	na	10/1/2009	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 27		VISIT 28		VISIT 29		VISIT 30		VISIT 31	
LOCAL LAB FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
L01	HIV ELISA and Western Blot	8/3/2007	na	8/3/2007	na	8/3/2007	na	8/3/2007	na	8/3/2007	na
L02*	Serum Antibody Tests - Hepatitis	na	na	na	na	na	na	na	na	na	na
L03	Automated CBC/Differential	10/1/2006	na	10/1/2006	na	10/1/2006	na	10/1/2006	na	10/1/2006	na
L03a	Hand-Manual Differential	10/1/2004	na	10/1/2004	na	10/1/2004	na	10/1/2004	na	10/1/2004	na
L04	Flow Cytometry	10/1/2004	na	10/1/2004	na	10/1/2004	na	10/1/2004	na	10/1/2004	na
L05	Liver/Renal Function Tests	4/1/2006	na	4/1/2006a	na	4/1/2006a	na	4/1/2006a	na	10/1/2009a	na
L06*	Serum Antibody Tests - Syphilis Screening	na	na	na	na	na	na	na	na	na	na
L07*	Mantoux Skin Test Result Anergy Panel	na	na	na	na	na	na	na	na	na	na
L08*	PPD Skin Test	na	na	na	na	na	na	na	na	na	na
L09*	Chlamydia	na	na	na	na	na	na	na	na	na	na
L10*	Urinalysis	na	na	na	na	na	na	na	na	na	na
L11*	Urine Culture Results	na	na	na	na	na	na	na	na	na	na
L12	(Urine) Pregnancy Test	10/1/2007	na	10/1/2007	na	10/1/2007	na	10/1/2007	na	10/1/2007	na
L13*	Gonorrhea	na	na	na	na	na	na	na	na	na	na
L14	Colposcopy Results	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a	10/1/2002a
L15	Biopsy Histopathology Pelvic Exam	10/1/2007	10/1/2007	10/1/2007a	10/1/2007	10/1/2007a	10/1/2007	10/1/2007a	10/1/2007	10/1/2007a	10/1/2007
L16	Dysplasia Treatment	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997	5/1/1995	9/15/1997
L17*	Herpes Culture of Ulcers and Fissures	na	na	na	na	na	na	na	na	na	na
L18	Trichomonas Vaginalis Culture (optional)	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
L19*	CVL Processing	10/1/2001	na	10/1/2001	na	na	na	na	na	na	na
CENTRAL LAB FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
C30*	Toxoplasma Serology	na	na	na	na	na	na	na	na	na	na
C31*	Human Retrovirus Testing	na	na	na	na	na	na	na	na	na	na
C45	Bacterial Vaginosis Smear Gram Stain	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na
C50*	Urine for Chlamydia	na	na	na	na	na	na	na	na	na	na
C52	HPV by PCR	8/1/1995	na	8/1/1995	na	8/1/1995	na	8/1/1995	na	8/1/1995	na
C54	Viral Load	4/1/2000	na	4/1/2000	na	4/1/2000	na	4/1/2000	na	4/1/2000	na
C60	Pap Smear	4/1/2002	na	4/1/2002	na	4/1/2002	na	4/1/2002	na	4/1/2002	na
C60a*	Pap Smear Retrospective Re-Read v1-15	na	na	na	na	na	na	na	na	na	na
C60b*	Pap Smear Retrospective Re-Read v16	na	na	na	na	na	na	na	na	na	na
C65*	Syphilis DFA - Genital Ulcers & Fissure	8/15/1994	na	8/15/1994	na	8/15/1994	na	8/15/1994	na	na	na
C66*	Serum Antibody Type-Specific Herpes Serology	na	na	na	na	na	na	na	na	na	na
C70*	Laboratory - Stimulated Saliva Evaluation	na	na	na	na	na	na	na	na	na	na
C71*	Laboratory - Subgingival Plaque	na	na	na	na	na	na	na	na	na	na
C72*	Laboratory - Erythematous Candidiasis Smear Results	na	na	na	na	na	na	na	na	na	na
ADMINISTRATIVE FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ABRV	Abbreviated Visit	10/1/2001b	na	10/1/2001b	na	10/1/2001c	na	10/1/2001c	na	10/1/2001c	na
ANTHRO	Anthropometry Training Form	10/1/2002a	na	10/1/2002a	na	10/1/2002a	na	10/1/2002a	na	10/1/2002a	na
CONS	Consent Status Tracking Form	na	na	4/1/2008	4/1/2008	4/1/2008	4/1/2008	4/1/2008	4/1/2008	4/1/2008	4/1/2008
CRST*	Central Repository Shipment Tracking	4/1/2007	4/1/2007	4/1/2007	4/1/2007	4/1/2007	4/1/2007	na	na	na	na
DENR	Disenrollment Form	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004
INT*	Interim Events Form	na	na	na	na	na	na	na	na	na	na
MVIS	Missed Visit Form	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a	10/1/1998a
REF	Referral Checklist	10/1/2007	na	4/1/2008	na	10/1/2008	na	4/1/2009	na	4/1/2009	na
TRANS	Transfer Form	10/1/2001c	10/1/2001c	10/1/2001c	10/1/2001c	10/1/2001c	10/1/2001c	10/1/2001c	10/1/2001c	10/1/2001c	10/1/2001c

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 27		VISIT 28		VISIT 29		VISIT 30		VISIT 31	
OUTCOMES ASCERTAINMENT FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ACS*	Ascertainment Control Sheet	na	na	na	na	na	na	na	na	na	na
ACSR ATC*	ACSR Ascertainment Tracking Checklist	na	na	na	na	na	na	na	na	na	na
ATC	Ascertainment Tracking Checklist	10/1/2007a	10/1/2007	10/1/2007a	10/1/2007	10/1/2007b	10/1/2007b	10/1/2007b	10/1/2007b	10/1/2007c	10/1/2007b
CNCR	Cancer Registry Case Report	4/1/2007	4/1/2007	4/1/2008	4/1/2008	4/1/2008	4/1/2008	4/1/2008b	4/1/2008a	4/1/2008b	4/1/2008a
CORE	Clinical Outcomes Reporting Form	4/1/2007a	4/1/2007a	4/1/2007a	4/1/2007a	4/1/2007a	4/1/2007a	4/1/2007b	4/1/2007b	4/1/2007b	4/1/2007b
QCCD	QC Review of Cancer Diagnoses	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004	4/1/2004
QCGY	QC Review of Gynecologic Material	10/1/2000	na	10/1/2000a	na	10/1/2008	na	10/1/2008	na	10/1/2008	na
QCHS*	Hysterectomy Abstraction Form	4/1/2006	na	4/1/2006	na	na	na	na	na	na	na
QCLB	Liver Biopsy Abstraction Form	6/8/2007	na	6/8/2007	na	6/8/2007	na	6/8/2007	na	6/8/2007	na
QCSS	QC Central Review of Surgical Specimens	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na	10/1/2000	na
TB	TB - Verified Case Report	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999	1/12/1999
VAC*	Vaccination History Form	11/1/2006	na	11/1/2006	na	11/1/2006	na	na	na	na	na
CARDIOVASCULAR SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
CVNOTI*	Participant Notification	na	na	na	na	na	na	na	na	na	na
CV01	Carotid Ultrasound Tracking Form	10/1/2004a	10/1/2004a	10/1/2004a	10/1/2004a	10/1/2004a	10/1/2004a	10/1/2004a	10/1/2004a	10/1/2004c	10/1/2004a
CV29*	Fasting Blood Specimen Collection Form	4/1/2006	4/1/2006a	na	na	na	na	na	na	na	na
HHV-8 SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
HVDENR*	Disenrollment	na	na	na	na	na	na	na	na	na	na
HVMVIS*	Missed Visit	na	na	na	na	na	na	na	na	na	na
HVNOTI*	Recruitment Outcome Form	na	na	na	na	na	na	na	na	na	na
HVSPEC*	Specimen Collection	na	na	na	na	na	na	na	na	na	na
INTENSIVE PK SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PK01	Eligibility for Intensive PK Stubstudy	10/1/2006	na	10/1/2006	na	10/1/2006	na	4/1/2009	na	4/1/2009	na
PKNOTI	PK: Participant notification	4/1/2004	na	4/1/2004	na	4/1/2004	na	4/1/2009	na	4/1/2009	na
PK02	PK: Current Antiretroviral medication use	10/1/2004c	na	10/1/2004d	na	10/1/2004d	na	10/1/2004e	na	10/1/2004e	na
PK02a	PK: Antiretroviral adherence	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003b	na	4/1/2003b	na
PK03	PK: Recent illnesses, concurrent meds & OB/GYN hist	10/1/2005	na	10/1/2005	na	10/1/2005	na	4/1/2009a	na	4/1/2009a	na
PK04	PK: Recent substance use	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
PK05a	PK: Weight and Specimen collection: group A	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2009	na	4/1/2009	na
PK05b	PK: Weight and Specimen collection: group B	4/1/2004	na	4/1/2004	na	4/1/2004	na	na	na	na	na
PK05c	PK: Weight and Specimen collection: group C	4/1/2004	na	4/1/2004	na	4/1/2004	na	na	na	na	na
PK06	PK: Dosing of antiretroviral medications	10/1/2007	na	4/1/2008	na	4/1/2008	na	4/1/2009a	na	4/1/2009a	na
PK07	PK: Plasma Separation and Freezing Form	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
PK08	PK: Dietary Fat Percentage Questionnaire	5/14/2003a	na	5/14/2003a	na	5/14/2003a	na	5/14/2003a	na	5/14/2003a	na
PK-DIET	PK: Dietary Assessment	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na
MALT / GALT SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
MG01	Pre-Eligibility (complete after core)	na	na	na	na	na	na	na	na	10/1/2009	10/1/2009
MG02	Pre-Eligibility (complete by study coordinator)	na	na	na	na	na	na	na	na	10/1/2009	na
MG03	Screening Visit	na	na	na	na	na	na	na	na	10/1/2009	10/1/2009
MG04	Notification of Enrollment (NOTI)	na	na	na	na	na	na	na	na	10/1/2009	na
MG05	Colonoscopy/EMB Preparation Checklist/Worksheet	na	na	na	na	na	na	na	na	10/1/2009	na
MG06	Colonoscopy Procedure Form	na	na	na	na	na	na	na	na	10/1/2009	na
MG07	Endometrial & Endocervical Biopsy Procedure Form	na	na	na	na	na	na	na	na	10/1/2009a	na
MG08	Biopsy Specimen Tracking Form	na	na	na	na	na	na	na	na	10/1/2009	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 27		VISIT 28		VISIT 29		VISIT 30		VISIT 31	
NEUROCOGNITION AND AGING FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
F26a*	Assessment of Physical Functioning	na	na	na	na	na	na	na	na	na	na
MEN01	Menopause Symptom Questionnaire	na	na	na	na	10/1/2008a	na	4/1/2009a	4/1/2009b	10/1/2009a	10/1/2009
NC01a	Cognitive Measures (Standard TMT and SDMT)	na	na	na	na	na	na	4/1/2009	4/1/2009	4/1/2009b	4/1/2009b
NC01a*	Interviewer Script	na	na	na	na	na	na	na	na	na	na
NC01b*	Cognitive Measures (Color TMT)	na	na	na	na	na	na	na	na	na	na
NC01b*	Interviewer Script	na	na	na	na	na	na	na	na	na	na
NC02a	English Word List (WRAT)	na	na	na	na	na	na	4/1/2009	4/1/2009a	4/1/2009	4/1/2009b
NC03	Educational Experience	na	na	na	na	na	na	na	na	10/1/2004a	10/1/2004a
NC04	Wechsler Test of Adult Reading (WTAR)	na	na	na	na	na	na	4/1/2009	4/1/2009a	4/1/2009	4/1/2009a
NC05*	Interviewer Feedback	na	na	na	na	na	na	na	na	na	na
NC06	Hopkins Verbal Learning Test-Revised	na	na	na	na	na	na	4/1/2009	4/1/2009	4/1/2009a	4/1/2009a
NC07	Stroop Test	na	na	na	na	na	na	4/1/2009	4/1/2009	4/1/2009	4/1/2009
NC08	Verbal Fluency	na	na	na	na	na	na	4/1/2009	4/1/2009	10/1/2009	10/1/2009
NC09	Letter Number Span	na	na	na	na	na	na	4/1/2009	4/1/2009	10/1/2009	10/1/2009
NC10	Grooved Pegboard	na	na	na	na	na	na	4/1/2009	4/1/2009	4/1/2009	4/1/2009
PAQ*	Physical Activity Questionnaire	na	na	na	na	na	na	na	na	na	na
PBM*	Performance-based Measurements	na	na	na	na	na	na	na	na	na	na
PTSD	Civilian Post-Traumatic Stress Disorder Questionnaire	na	na	na	na	10/1/2008b	na	10/1/2008c	na	10/1/2008d	na

NIDA I/V AND HCU											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
NI01*	Health Care Utilization Collaborative WIHS/HERS Interview	na	na	na	na	na	na	na	na	na	na
NI02*	General Abstraction	na	na	na	na	na	na	na	na	na	na
NI03*	Pneumonia Abstraction	na	na	na	na	na	na	na	na	na	na
NI04*	Pneumonia Episode Abstraction	na	na	na	na	na	na	na	na	na	na
NI05*	Diarrhea Abstraction	na	na	na	na	na	na	na	na	na	na
NVNOTI*	Participant Notification	na	na	na	na	na	na	na	na	na	na
NV01*	Enrollment Interview	na	na	na	na	na	na	na	na	na	na
NV02*	Antiretroviral Drug Use	na	na	na	na	na	na	na	na	na	na
NV03*	Specimen Collection	na	na	na	na	na	na	na	na	na	na
NV04*	Specimen Processing	na	na	na	na	na	na	na	na	na	na
NV05*	Flow Cytometry	na	na	na	na	na	na	na	na	na	na
NV06*	RNA Quantification on CVL	na	na	na	na	na	na	na	na	na	na
NV07*	Urine Toxicology	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 27		VISIT 28		VISIT 29		VISIT 30		VISIT 31	
ORAL PROTOCOL FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
OPNOTI*	Oral Protocol Participant Notification (expansion)	na	na	na	na	na	na	na	na	na	na
OP01*	Medical Evaluation	na	na	na	na	na	na	na	na	na	na
OP02*	Research Interview	na	na	na	na	na	na	na	na	na	na
OP03*	Saliva Sample Collection	na	na	na	na	na	na	na	na	na	na
OP04*	Oral Mucosal Tissue Exam	na	na	na	na	na	na	na	na	na	na
OP04a*	Addendum	na	na	na	na	na	na	na	na	na	na
OP05*	Smear Results	na	na	na	na	na	na	na	na	na	na
OP06*	Tooth Count & Random Half Mouth	na	na	na	na	na	na	na	na	na	na
OP07*	Plaque Index	na	na	na	na	na	na	na	na	na	na
OP08*	Gingival Banding Score	na	na	na	na	na	na	na	na	na	na
OP09*	Papillary Assessment	na	na	na	na	na	na	na	na	na	na
OP10*	Subgingival Plaque	na	na	na	na	na	na	na	na	na	na
OP11*	Coronal Caries	na	na	na	na	na	na	na	na	na	na
OP12*	Root Caries	na	na	na	na	na	na	na	na	na	na
OP13*	Gingival Bleeding	na	na	na	na	na	na	na	na	na	na
OP14*	Loss of Attachment	na	na	na	na	na	na	na	na	na	na
OP15*	Dental Prostheses	na	na	na	na	na	na	na	na	na	na
OP16*	Oral Referral and F/U	na	na	na	na	na	na	na	na	na	na
PREGNANCY PROTOCOL FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PRNOTI*	Enrollment	na	na	na	na	na	na	na	na	na	na
PR01*	Pregnancy Form	na	na	na	na	na	na	na	na	na	na
PR02*	Post-partum Form	na	na	na	na	na	na	na	na	na	na
PROSPECTIVE METABOLIC SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
MSSCR	MS: Screening form	4/1/2005a	na	4/1/2005a	na	4/1/2005a	na	4/1/2005a	na	4/1/2005a	na
MSNOTI	MS: Participant notification	4/1/2003b	na	4/1/2003b	na	4/1/2003b	na	4/1/2003b	na	4/1/2003b	na
MS01	MS: Specimen Collection for Metabolic Study	10/1/2007a	na	10/1/2007b	na	10/1/2007b	na	10/1/2007b	na	10/1/2007b	na
MS02	MS: Lab test report form	4/1/2005	na	4/1/2005	na	4/1/2005	na	4/1/2005	na	4/1/2005a	na
MS03	MS: DXA scan form	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
PULMONARY SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
PQBL*	Baseline Pulmonary Questionnaire	10/1/2007b	10/01/2007b	10/1/2007b	10/01/2007b	na	na	na	na	na	na
PQ02	Follow-up Pulmonary Questionnaire	na	na	na	na	10/1/2008	10/1/2008	10/1/2008	10/1/2008	10/1/2008	10/1/2008
SEX STEROID SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
SSSCR*	SS: Sex steroid screening form	na	na	na	na	na	na	na	na	na	na
SSNOTI*	SS: Participant notification	na	na	na	na	na	na	na	na	na	na
SS01*	SS: Sex steroid lab test report form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 27		VISIT 28		VISIT 29		VISIT 30		VISIT 31	
VRS SUBSTUDY FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
VRSNOTI*	VRS Enrollment Form	na	na	na	na	na	na	na	na	na	na
VRS01 *	Stage II Eligibility	na	na	na	na	na	na	na	na	na	na
VRS01r*	VRS Eligibility for VRS Supplement	na	na	na	na	na	na	na	na	na	na
VRS03*	VRS Illnesses and Medications	na	na	na	na	na	na	na	na	na	na
VRS04*	VRS Antiviral Medications	na	na	na	na	na	na	na	na	na	na
VRS05*	VRS Screening to Determine Changes in HAART Regimen	na	na	na	na	na	na	na	na	na	na
VRS06*	VRS Telephone Interview for Medical Providers	na	na	na	na	na	na	na	na	na	na
VRS06r*	VRS Telephone Interview for Medical Providers	na	na	na	na	na	na	na	na	na	na
VRS10*	VRS Plasma Separation and Freezing	na	na	na	na	na	na	na	na	na	na
VRS29*	VRS Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na

EXPANSION FORMS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
EL*	New Recruit Eligibility Form	na	na	na	na	na	na	na	na	na	na
F07r*	Physical Exam Addendum	na	na	na	na	na	na	na	na	na	na
F20*	New Recruit Baseline History	na	na	na	na	na	na	na	na	na	na
F20a*	New Recruit Baseline History: Addendum	na	na	na	na	na	na	na	na	na	na
F22r*	New Recruit ART History	na	na	na	na	na	na	na	na	na	na
F29r*	Blood Specimen Collection Form	na	na	na	na	na	na	na	na	na	na
F31r*	Specimens Collected During PE	na	na	na	na	na	na	na	na	na	na
RAB*	Retrospective Medical Record Abstraction	na	na	na	na	na	na	na	na	na	na
RAB App*	Retrospective Medical Record Abstraction Appendix	na	na	na	na	na	na	na	na	na	na
S2*	New Recruit Sreening Form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 27		VISIT 28		VISIT 29		VISIT 30		VISIT 31	
SPANISH VERSIONS											
Form#	***Title***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***	***Form***	***QxQ***
ABRV	Abbreviated Visit	10/1/2001b	na	10/1/2001b	na	10/1/2001c	na	10/1/2001c	na	10/1/2001c	na
CV01	Carotid Ultrasound Tracking Form	10/1/2004a	na	10/1/2004a	na	10/1/2004a	na	10/1/2004a	na	10/1/2004a	na
CV29*	Fasting Blood Specimen Collection Form	4/1/2006	na	na	na	na	na	na	na	na	na
DERM*	Dermatology Addendum	na	na	na	na	10/1/2008b	na	na	na	na	na
DRUG1	Antiretroviral Medications	10/1/2005c	na	10/1/2005d	na	10/1/2005d	na	10/1/2005d	na	10/1/2005e	na
DRUG2	Non-antiviral Medications	10/1/2004e	na	10/1/2004f	na	10/1/2004f	na	10/1/2004f	na	10/1/2004f	na
DRUG3	Hepatitis Medications	10/1/2004c	na	10/1/2004d	na	10/1/2004d	na	10/1/2004d	na	10/1/2004d	na
F07	Physical Exam	4/1/2007a	na	4/1/2007a	na	10/1/2008	na	10/1/2008	na	10/1/2009	na
F20*	New Recruit Baseline History (Spanish)	na	na	na	na	na	na	na	na	na	na
F20a*	New Recruit Baseline History: Addendum (Spanish)	na	na	na	na	na	na	na	na	na	na
F01*/F21	Sociodemographics	10/1/2007a	na	4/1/2008	na	10/1/2008	na	4/2/2009a	na	4/2/2009b	na
F02*/F22*	Medical & Health History	na	na	na	na	na	na	na	na	na	na
F22HX	Follow-up Health History	4/1/2007a	na	4/1/2008	na	10/1/2008	na	4/1/2009a	na	10/1/2009	na
F22MED	Medication History	4/1/2007b	na	4/1/2008	na	10/1/2008	na	4/1/2009a	na	10/1/2009a	na
F22r *	New Recruit ART History	na	na	na	na	na	na	na	na	na	na
F03*/F23	OB/GYN History	10/1/2007	na	10/1/2007a	na	10/1/2008	na	4/1/2009	na	10/1/2009	na
F23a*	Fertility and Infertility History	na	na	na	na	na	na	na	na	na	na
F04*/F24*	Alcohol, Drugs & Sexual Behavior (visits 1 - 24)	na	na	na	na	na	na	na	na	na	na
F24BEH	Alcohol, Drugs & Sexual Behavior (visits 25+)	4/1/2007a	na	4/1/2008	na	10/1/2008	na	4/1/2009a	na	10/1/2009a	na
F05*/F25	Health Care Utilization	10/1/2005a	na	10/1/2005a	na	10/1/2008	na	10/1/2008	na	10/1/2008	na
F25a*	Health Care Utilization Supplement	na	na	na	na	na	na	na	na	na	na
F25b*	Mental Health Care Utilization Supplement	na	na	na	na	na	na	na	na	na	na
F06*/F26	Psychosocial	10/1/2005b	na	10/1/2005b	na	10/1/2005b	na	10/1/2005b	na	10/1/2005c	na
F26a*	Assessment of Physical Functioning	na	na	na	na	na	na	na	na	na	na
F26r*	History of Abuse	na	na	na	na	na	na	na	na	na	na
F29	Blood Specimen Collection Form	4/1/2006a	na	4/1/2006b	na	10/1/2008a	na	10/1/2008a	na	10/1/2008b	na
F29a	Antiviral Usage Assessment for Blood Draw	10/1/2005b	na	10/1/2005c	na	10/1/2005c	na	10/1/2005c	na	10/1/2009	na
F29r*	Blood Specimen Collection Form - New Recruits	na	na	na	na	na	na	na	na	na	na
F31a	Hair Color, Texture and Treatment History	10/1/2006	na	10/1/2006	na	10/1/2006	na	10/1/2006	na	10/1/2006	na
FHX*	Family and Personal History	na	na	na	na	na	na	na	na	na	na
FSFI*	Female Sexual Functioning Inventory	na	na	na	na	na	na	na	na	na	na
HPVKAB*	HPV Knowledge and Beliefs	na	na	na	na	10/1/2008a	na	10/1/2008a	na	na	na
INT*	Interim Events Form	na	na	na	na	na	na	na	na	na	na
MEN01	Menopause Symptom Questionnaire	na	na	na	na	10/1/2008a	na	4/1/2009a	na	10/1/2009a	na
MS01	MS: Specimen Collection for Metabolic Study	10/1/2007a	na	10/1/2007b	na	10/1/2007b	na	10/1/2007b	na	10/1/2007b	na
NC01a*	Interviewer Script	na	na	na	na	na	na	na	na	na	na
NC01b*	Interviewer Script	na	na	na	na	na	na	na	na	na	na
NC02a	English Word List (WRAT)	na	na	na	na	na	na	4/1/2009	na	4/1/2009	na
NC02b*	Spanish Word List (WAT)	na	na	na	na	na	na	na	na	na	na
NC03	Educational Experience	na	na	na	na	na	na	na	na	10/1/2004a	na
NI01*	NIDA Health Care Utilization Interview	na	na	na	na	na	na	na	na	na	na
NP01*	Neuropathy Signs and Symptoms - baseline	10/1/2007b	na	10/1/2007b	na	na	na	na	na	na	na
NP02	Neuropathy Signs and Symptoms - follow up	na	na	na	na	na	na	4/1/2009b	na	4/1/2009c	na
OP02*	Oral Interview	na	na	na	na	na	na	na	na	na	na
PAQ*	Physical Activity Questionnaire	na	na	na	na	na	na	na	na	na	na
PBM*	Performance-based Measurements	na	na	na	na	na	na	na	na	na	na
PK02	PK: Current Antiretroviral Medication Use	10/1/2004c	na	10/1/2004d	na	10/1/2004d	na	10/1/2004e	na	10/1/2004e	na
PK02a	PK: Antiretroviral Adherence	4/1/2003a	na	4/1/2003a	na	4/1/2003a	na	4/1/2003b	na	4/1/2003b	na
PK03	PK: Recent Illnesses, Concurrent Meds & OB/GYN History	10/1/2005	na	10/1/2005	na	10/1/2005	na	4/1/2009	na	4/1/2009	na
PK04	PK: Recent Substance Use	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na	4/1/2003	na
PQBL*	Baseline Pulmonary Questionnaire	10/1/2007b	na	10/1/2007b	na	na	na	na	na	na	na
PQ02	Follow-up Pulmonary Questionnaire	na	na	na	na	10/1/2008	na	10/1/2008	na	10/1/2008	na
PTSD*	Civilian Post-Traumatic Stress Disorder Questionnaire	na	na	na	na	10/1/2008b	na	na	na	na	na
S2*	New Recruit Sreening Form	na	na	na	na	na	na	na	na	na	na
SSSCR*	SS: Sex steroid Screening Form	na	na	na	na	na	na	na	na	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

VISIT 32

FOLLOW-UP INTERVIEW/EXAM FORMS			
Form#	***Title***	***Form***	***QxQ***
DRUG1	Antiretroviral Medications	10/01/2005e	10/1/2005d
DRUG2	Non-antiviral Medications	10/01/2004e	10/1/2004b
DRUG3	Hepatitis Medications	10/01/2004d	10/1/2004b
DSG	Antiretroviral Dosage	k	10/02/2005h
F07	Physical Exam	10/1/2009	10/1/2009
F08	Gynecological Exam	10/1/2005c	10/1/2005c
F08a	Potential CVL Contaminants	10/1/2005	na
F01*/F21	Sociodemographics	4/1/2010	4/1/2010
F02*/F22*	Medical & Health History (visits 1 - 16)	na	na
F22HX	Follow-up Health History (visit 17+)	4/1/2010	4/1/2010
F22MED	Medication History (visit 17+)	4/1/2010	4/1/2010
F03*/F23	OB/GYN History	10/1/2009b	10/1/2009a
F04*/F24*	Alcohol, Drugs & Sexual Behavior (visits 1 - 24)	na	na
F24BEH	Alcohol, Drugs & Sexual Behavior (visit 25+)	4/1/2010	4/1/2010
F05*/F25	Health Care Utilization	10/1/2008	10/1/2008
F25a*	Health Care Utilization Supplement	na	na
F06*/F26	Psychosocial	10/1/2005c	10/1/2005b
F26r*	History of Abuse	na	na
FHX*	Family and Personal History	na	na
NP01*	Neuropathy Signs and Symptoms - baseline	na	na
NP02	Neuropathy Signs and Symptoms - follow up	4/1/2009b	4/1/2009a

MISCELLANEOUS SUBSTUDY FORMS			
Form#	***Title***	***Form***	***QxQ***
DERM*	Dermatology Addendum	na	na
F23a*	Fertility and Infertility History	na	na
F25b*	Mental Health Care Utilization	na	na
FSFI*	Female Sexual Functioning Inventory	na	na
HPVKAB*	HPV Knowledge and Beliefs	na	na
MINOTI	Mucosal Immunity Notificaiton Form	4/1/2009a	na
TRUST*	Opinions about Health System and HIV/AIDS	na	na

SPECIMEN COLLECTION FORMS			
Form#	***Title***	***Form***	***QxQ***
F10*	Plasma & Cell Separation and Freezing	na	na
F09*/F29	Blood Specimen Collection Form	10/1/2008b	10/1/2008
F29a	Antiviral Usage Assessment for Blood Draw	10/1/2009	10/1/2009
F11*/F31	Specimens Collected During PE	10/1/2009	10/1/2009
F31a	Hair Color, Texture and Treatment History	10/1/2006	na
L20	Repository Specimen Processing	10/1/2009	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

VISIT 32

LOCAL LAB FORMS

Form#	*Title*	*Form*	*QxQ*
L01	HIV ELISA and Western Blot	8/3/2007	na
L02*	Serum Antibody Tests - Hepatitis	na	na
L03	Automated CBC/Differential	10/1/2006	na
L03a	Hand-Manual Differential	10/1/2004	na
L04	Flow Cytometry	10/1/2004	na
L05	Liver/Renal Function Tests	10/1/2009a	na
L06*	Serum Antibody Tests - Syphilis Screening	na	na
L07*	Mantoux Skin Test Result Anergy Panel	na	na
L08*	PPD Skin Test	na	na
L09*	Chlamydia	na	na
L10*	Urinalysis	na	na
L11*	Urine Culture Results	na	na
L12	(Urine) Pregnancy Test	10/1/2007	na
L13*	Gonorrhea	na	na
L14	Colposcopy Results	4/1/2010	4/1/2010
L15	Biopsy Histopathology Pelvic Exam	10/1/2007a	10/1/2007
L16	Dysplasia Treatment	5/1/1995	9/15/1997
L17*	Herpes Culture of Ulcers and Fissures	na	na
L18	Trichomonas Vaginalis Culture (optional)	8/15/1994	na
L19*	CVL Processing	na	na

CENTRAL LAB FORMS

Form#	*Title*	*Form*	*QxQ*
C30*	Toxoplasma Serology	na	na
C31*	Human Retrovirus Testing	na	na
C45	Bacterial Vaginosis Smear Gram Stain	8/15/1994	na
C50*	Urine for Chlamydia	na	na
C52	HPV by PCR	8/1/1995	na
C54	Viral Load	4/1/2000	na
C60	Pap Smear	4/1/2002	na
C60a*	Pap Smear Retrospective Re-Read v1-15	na	na
C60b*	Pap Smear Retrospective Re-Read v16	na	na
C65*	Syphilis DFA - Genital Ulcers & Fissure	na	na
C66*	Serum Antibody Type-Specific Herpes Serology	na	na
C70*	Laboratory - Stimulated Saliva Evaluation	na	na
C71*	Laboratory - Subgingival Plaque	na	na
C72*	Laboratory - Erythematous Candidiasis Smear Results	na	na

ADMINISTRATIVE FORMS

Form#	*Title*	*Form*	*QxQ*
ABRV	Abbreviated Visit	4/1/2010	na
ANTHRO	Anthropometry Training Form	10/1/2002a	na
CONS	Consent Status Tracking Form	4/1/2008	4/1/2008
CRST*	Central Repository Shipment Tracking	na	na
DENR	Disenrollment Form	4/1/2004	4/1/2004
INT*	Interim Events Form	na	na
MVIS	Missed Visit Form	10/1/1998a	10/1/1998a
REF	Referral Checklist	4/1/2009	na
TRANS	Transfer Form	10/1/2001c	10/1/2001c

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

VISIT 32

OUTCOMES ASCERTAINMENT FORMS			
Form#	***Title***	***Form***	***QxQ***
ACS*	Ascertainment Control Sheet	na	na
ACSR ATC*	ACSR Ascertainment Tracking Checklist	na	na
ATC	Ascertainment Tracking Checklist	10/1/2007c	10/1/2007b
CNCR	Cancer Registry Case Report	4/1/2008b	4/1/2008a
CORE	Clinical Outcomes Reporting Form	4/1/2010	4/1/2010
QCCD	QC Review of Cancer Diagnoses	4/1/2004	4/1/2004
QCGY	QC Review of Gynecologic Material	10/1/2008	na
QCHS*	Hysterectomy Abstraction Form	na	na
QCLB	Liver Biopsy Abstraction Form	6/8/2007	na
QCSS	QC Central Review of Surgical Specimens	10/1/2000	na
TB	TB - Verified Case Report	1/12/1999	1/12/1999
VAC*	Vaccination History Form	na	na

CARDIOVASCULAR SUBSTUDY FORMS			
Form#	***Title***	***Form***	***QxQ***
CVNOTI*	Participant Notification	na	na
CV01	Carotid Ultrasound Tracking Form	10/1/2004c	10/1/2004a
CV29*	Fasting Blood Specimen Collection Form	na	na

HHV-8 SUBSTUDY FORMS			
Form#	***Title***	***Form***	***QxQ***
HVDENR*	Disenrollment	na	na
HVMVIS*	Missed Visit	na	na
HVNOTI*	Recruitment Outcome Form	na	na
HVSPEC*	Specimen Collection	na	na

INTENSIVE PK SUBSTUDY FORMS			
Form#	***Title***	***Form***	***QxQ***
PK01	Eligibility for Intensive PK Stubstudy	4/1/2009	na
PKNOTI	PK: Participant notification	4/1/2009	na
PK02	PK: Current Antiretroviral medication use	10/1/2004e	na
PK02a	PK: Antiretroviral adherence	4/1/2003b	na
PK03	PK: Recent illnesses, concurrent meds & OB/GYN hist	4/1/2009a	na
PK04	PK: Recent substance use	4/1/2003	na
PK05a	PK: Weight and Specimen collection: group A	4/1/2009	na
PK05b	PK: Weight and Specimen collection: group B	na	na
PK05c	PK: Weight and Specimen collection: group C	na	na
PK06	PK: Dosing of antiretroviral medications	4/1/2009b	na
PK07	PK: Plasma Separation and Freezing Form	4/1/2003	na
PK08	PK: Dietary Fat Percentage Questionnaire	5/14/2003a	na
PK-DIET	PK: Dietary Assessment	4/1/2003a	na

MALT / GALT SUBSTUDY FORMS			
Form#	***Title***	***Form***	***QxQ***
MG01	Pre-Eligibility (complete after core)	10/1/2009	10/1/2009
MG02	Pre-Eligibility (complete by study coordinator)	10/1/2009	na
MG03	Screening Visit	10/1/2009	10/1/2009
MG04	Notification of Enrollment (NOTI)	10/1/2009	na
MG05	Colonoscopy/EMB Preparation Checklist/Worksheet	10/1/2009	na
MG06	Colonoscopy Procedure Form	10/1/2009	na
MG07	Endometrial & Endocervical Biopsy Procedure Form	10/1/2009a	na
MG08	Biopsy Specimen Tracking Form	10/1/2009	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

VISIT 32

NEUROCOGNITION AND AGING FORMS			
Form#	***Title***	***Form***	***QxQ***
F26a*	Assessment of Physical Functioning	na	na
MEN01	Menopause Symptom Questionnaire	10/1/2009a	10/1/2009
NC01a	Cognitive Measures (Standard TMT and SDMT)	4/1/2009b	4/1/2009b
NC01a*	Interviewer Script	na	na
NC01b*	Cognitive Measures (Color TMT)	na	na
NC01b*	Interviewer Script	na	na
NC02a	English Word List (WRAT)	4/1/2009	4/1/2009b
NC03	Educational Experience	10/1/2004a	10/1/2004a
NC04	Wechsler Test of Adult Reading (WTAR)	4/1/2009	4/1/2009a
NC05*	Interviewer Feedback	na	na
NC06	Hopkins Verbal Learning Test-Revised	4/1/2009a	4/1/2009a
NC07	Stroop Test	4/1/2009	4/1/2009
NC08	Verbal Fluency	10/1/2009	10/1/2009
NC09	Letter Number Span	10/1/2009	10/1/2009
NC10	Grooved Pegboard	4/1/2009	4/1/2009
PAQ*	Physical Activity Questionnaire	na	na
PBM*	Performance-based Measurements	na	na
PTSD	Civilian Post-Traumatic Stress Disorder Questionnaire	10/1/2008d	na

NIDA I/V AND HCU			
Form#	***Title***	***Form***	***QxQ***
NI01*	Health Care Utilization Collaborative WIHS/HERS Interview	na	na
NI02*	General Abstraction	na	na
NI03*	Pneumonia Abstraction	na	na
NI04*	Pneumonia Episode Abstraction	na	na
NI05*	Diarrhea Abstraction	na	na
NVNOTI*	Participant Notification	na	na
NV01*	Enrollment Interview	na	na
NV02*	Antiretroviral Drug Use	na	na
NV03*	Specimen Collection	na	na
NV04*	Specimen Processing	na	na
NV05*	Flow Cytometry	na	na
NV06*	RNA Quantification on CVL	na	na
NV07*	Urine Toxicology	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

VISIT 32

ORAL PROTOCOL FORMS			
Form#	***Title***	***Form***	***QxQ***
OPNOTI*	Oral Protocol Participant Notification (expansion)	na	na
OP01*	Medical Evaluation	na	na
OP02*	Research Interview	na	na
OP03*	Saliva Sample Collection	na	na
OP04*	Oral Mucosal Tissue Exam	na	na
OP04a*	Addendum	na	na
OP05*	Smear Results	na	na
OP06*	Tooth Count & Random Half Mouth	na	na
OP07*	Plaque Index	na	na
OP08*	Gingival Banding Score	na	na
OP09*	Papillary Assessment	na	na
OP10*	Subgingival Plaque	na	na
OP11*	Coronal Caries	na	na
OP12*	Root Caries	na	na
OP13*	Gingival Bleeding	na	na
OP14*	Loss of Attachment	na	na
OP15*	Dental Prostheses	na	na
OP16*	Oral Referral and F/U	na	na

PREGNANCY PROTOCOL FORMS			
Form#	***Title***	***Form***	***QxQ***
PRNOTI*	Enrollment	na	na
PR01*	Pregnancy Form	na	na
PR02*	Post-partum Form	na	na

PROSPECTIVE METABOLIC SUBSTUDY FORMS			
Form#	***Title***	***Form***	***QxQ***
MSSCR	MS: Screening form	4/1/2005a	na
MSNOTI	MS: Participant notification	4/1/2003b	na
MS01	MS: Specimen Collection for Metabolic Study	10/1/2007b	na
MS02	MS: Lab test report form	4/1/2005a	na
MS03	MS: DXA scan form	4/1/2003	na

PULMONARY SUBSTUDY FORMS			
Form#	***Title***	***Form***	***QxQ***
PQBL*	Baseline Pulmonary Questionnaire	na	na
PQ02	Follow-up Pulmonary Questionnaire	10/1/2008	10/1/2008

SEX STEROID SUBSTUDY FORMS			
Form#	***Title***	***Form***	***QxQ***
SSSCR*	SS: Sex steroid screening form	na	na
SSNOTI*	SS: Participant notification	na	na
SS01*	SS: Sex steroid lab test report form	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 32	
VRS SUBSTUDY FORMS			
Form#	***Title***	***Form***	***QxQ***
VRSNOTI*	VRS Enrollment Form	na	na
VRS01 *	Stage II Eligibility	na	na
VRS01r*	VRS Eligibility for VRS Supplement	na	na
VRS03*	VRS Illnesses and Medications	na	na
VRS04*	VRS Antiviral Medications	na	na
VRS05*	VRS Screening to Determine Changes in HAART Regimen	na	na
VRS06*	VRS Telephone Interview for Medical Providers	na	na
VRS06r*	VRS Telephone Interview for Medical Providers	na	na
VRS10*	VRS Plasma Separation and Freezing	na	na
VRS29*	VRS Blood Specimen Collection Form	na	na

EXPANSION FORMS			
Form#	***Title***	***Form***	***QxQ***
EL*	New Recruit Eligibility Form	na	na
F07r*	Physical Exam Addendum	na	na
F20*	New Recruit Baseline History	na	na
F20a*	New Recruit Baseline History: Addendum	na	na
F22r*	New Recruit ART History	na	na
F29r*	Blood Specimen Collection Form	na	na
F31r*	Specimens Collected During PE	na	na
RAB*	Retrospective Medical Record Abstraction	na	na
RAB App*	Retrospective Medical Record Abstraction Appendix	na	na
S2*	New Recruit Sreening Form	na	na

* Discontinued forms

WOMEN'S INTERAGENCY HIV STUDY - FORM AND QxQ VERSIONS - VISIT 32

		VISIT 32	
SPANISH VERSIONS			
Form#	***Title***	***Form***	***QxQ***
ABRV	Abbreviated Visit	4/1/2010	na
CV01	Carotid Ultrasound Tracking Form	10/1/2004a	na
CV29*	Fasting Blood Specimen Collection Form	na	na
DERM*	Dermatology Addendum	na	na
DRUG1	Antiretroviral Medications	10/1/2005e	na
DRUG2	Non-antiviral Medications	10/1/2004f	na
DRUG3	Hepatitis Medications	10/1/2004d	na
F07	Physical Exam	10/1/2009	na
F20*	New Recruit Baseline History (Spanish)	na	na
F20a*	New Recruit Baseline History: Addendum (Spanish)	na	na
F01*/F21	Sociodemographics	4/1/2010	na
F02*/F22*	Medical & Health History	na	na
F22HX	Follow-up Health History	4/1/2010	na
F22MED	Medication History	4/1/2010	na
F22r *	New Recruit ART History	na	na
F03*/F23	OB/GYN History	10/1/2009a	na
F23a*	Fertility and Infertility History	na	na
F04*/F24*	Alcohol, Drugs & Sexual Behavior (visits 1 - 24)	na	na
F24BEH	Alcohol, Drugs & Sexual Behavior (visits 25+)	4/1/2010	na
F05*/F25	Health Care Utilization	10/1/2008	na
F25a*	Health Care Utilization Supplement	na	na
F25b*	Mental Health Care Utilization Supplement	na	na
F06*/F26	Psychosocial	10/1/2005c	na
F26a*	Assessment of Physical Functioning	na	na
F26r*	History of Abuse	na	na
F29	Blood Specimen Collection Form	10/1/2008b	na
F29a	Antiviral Usage Assessment for Blood Draw	10/1/2009	na
F29r*	Blood Specimen Collection Form - New Recruits	na	na
F31a	Hair Color, Texture and Treatment History	10/1/2006	na
FHX*	Family and Personal History	na	na
FSFI*	Female Sexual Functioning Inventory	na	na
HPVKAB*	HPV Knowledge and Beliefs	na	na
INT*	Interim Events Form	na	na
MEN01	Menopause Symptom Questionnaire	10/1/2009a	na
MS01	MS: Specimen Collection for Metabolic Study	10/1/2007b	na
NC01a*	Interviewer Script	na	na
NC01b*	Interviewer Script	na	na
NC02a	English Word List (WRAT)	4/1/2009	na
NC02b*	Spanish Word List (WAT)	na	na
NC03	Educational Experience	10/1/2004a	na
NI01*	NIDA Health Care Utilization Interview	na	na
NP01*	Neuropathy Signs and Symptoms - baseline	na	na
NP02	Neuropathy Signs and Symptoms - follow up	4/1/2009c	na
OP02*	Oral Interview	na	na
PAQ*	Physical Activity Questionnaire	na	na
PBM*	Performance-based Measurements	na	na
PK02	PK: Current Antiretroviral Medication Use	10/1/2004e	na
PK02a	PK: Antiretroviral Adherence	4/1/2003b	na
PK03	PK: Recent Illnesses, Concurrent Meds & OB/GYN History	4/1/2009	na
PK04	PK: Recent Substance Use	4/1/2003	na
PQBL*	Baseline Pulmonary Questionnaire	na	na
PQ02	Follow-up Pulmonary Questionnaire	10/1/2008	na
PTSD*	Civilian Post-Traumatic Stress Disorder Questionnaire	na	na
S2*	New Recruit Sreening Form	na	na
SSSCR*	SS: Sex steroid Screening Form	na	na

* Discontinued forms