

**LABORATORY - BACTERIAL VAGINOSIS SMEAR
GRAM STAIN**

FORM C45

ID LABEL
HERE --->

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| _ | - | _ _ | - | _ _ _ _ | - | _ |
|---|---|-----|---|---------|---|---|

VISIT #:

FORM COMPLETED BY:

VERSION DATE: **08/15/94**

ANY MISSING OR INCOMPLETE TEST RESULTS MUST BE EXPLAINED ON THIS FORM.

A1. ARE TEST RESULTS AVAILABLE?

- Yes 1 (A2)
- No, Sample Inadequate 2 (END)
- No, Other Reason..... 3

_____ (END)
(SPECIFY)

A2. DATE OF SPECIMEN:

____ / ____ / ____
 M D Y

A3. RESULTS:

| <u>SCORE</u> | (a) <u>LACTOBACILLUS MORPHOTYPES</u> | (b) <u>GARDNERELLA & BACTEROIDES MORPHOTYPES</u> | (c) <u>CURVED GRAM- VARIABLE RODS</u> |
|--------------|---|---|--|
| 0 | 4+ | 0 | 0 |
| 1 | 3+ | 1+ | 1+ or 2+ |
| 2 | 2+ | 2+ | 3+ or 4+ |
| 3 | 1+ | 3+ | |
| 4 | 0 | 4+ | |

- a. LACTOBACILLUS MORPHOTYPES SCORE _____ (range 0 - 4)
- b. GARDNERELLA & BACTEROIDES SCORE _____ (range 0 - 4)
- c. CURVED GRAM-VARIABLE RODS SCORE _____ (range 0 - 2)

A4. *TOTAL SCORE _____

*** SCORE of \geq 7 IS CONSISTENT WITH BV, 4-6 IS INTERMEDIATE, 0-3 IS NORMAL**

WIHS ID#

A5. ARE CLUE CELLS PRESENT:

YES..... 1
NO 2 (A7)

A6. PERCENTAGE OF EPITHELIAL CELLS THAT ARE CLUE CELLS:

|_|_|_|_| %

A7. OTHER FINDINGS:

YES..... 1
NO 2 (A9)

a. SPECIFY _____

A8. OTHER ADDITIONAL FINDINGS:

YES..... 1
NO 2 (A9)

a. SPECIFY _____

A9. DATE REPORTED:

___ / ___ / ___
M D Y