

WOMEN'S INTERAGENCY HIV STUDY
**LABORATORY – AUTOMATED CBC/DIFFERENTIAL
 FORM L03**

ID LABEL
 HERE --->

| | - | | | - | | | | | - | |

FORM COMPLETED BY: _____ VERSION DATE:
 _____ **10/01/00**

WIHS STUDY VISIT #: ___ ___

WIHS Core Visit 1
 3 Month VRS Visit 2

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

PROMPT: FOR HIV-NEGATIVE WOMEN, COMPLETE THIS FORM ONLY AT EVEN-NUMBERED VISITS.

A1. ARE TEST RESULTS AVAILABLE?

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

_____ **(END)**
(SPECIFY)

CBC:

A2. DATE SAMPLE DRAWN:

___ M ___ / ___ D ___ / ___ Y ___

- | | |
|---|--|
| <p>a. HGB _ _ . _ (GM/DL)</p> <p>b. HCT _ _ . _ (%)</p> <p>c. MCV _ _ _ . _ (F1, μm^3,
 cumm or mm^3)</p> | <p>d. Platelet _ _ _ _ (K,cumm,mm^3,
 CT or $10^3/\text{ul}$)</p> <p>e. WBC _ _ . _ _ ($10^3, 10^3/\text{ul}$,
 (total) cumm, or mm^3)</p> |
|---|--|

AUTOMATED DIFFERENTIAL COUNT:

A3. TYPE OF AUTOMATED COUNT:

- 3-PART1 **(COMPLETE A3a,b,c,f)**
 5-PART2 **(COMPLETE A3a,b,c,d,e,f)**
 Automated results not reported
 and/or flagged as unreliable.....3 **(COMPLETE FORM L3A)**

WIHS ID#

VISIT #

a. Lymphocytes:

- Item not listed on lab report.....1 (A3b)
- Item listed with no value.....2 (A3b)
- Item listed with value.....3 (SPECIFY BELOW)

|_|_|_|.|_|_| (%) and/or |_|_|_|_|_|_|_|_| (per mm³)

b. Polymorphs/Granulocytes/Neuts/Segs:

- Item not listed on lab report.....1 (A3c)
- Item listed with no value.....2 (A3c)
- Item listed with value.....3 (SPECIFY BELOW)

|_|_|_|.|_|_| (%) and/or |_|_|_|_|_|_|_|_| (per mm³)

c. Monocytes:

- Item not listed on lab report.....1 (A3d)
- Item listed with no value.....2 (A3d)
- Item listed with value.....3 (SPECIFY BELOW)

|_|_|_|.|_|_| (%) and/or |_|_|_|_|_|_|_|_| (per mm³)

d. Eosinophils:

- Item not listed on lab report.....1 (A3e)
- Item listed with no value.....2 (A3e)
- Item listed with value.....3 (SPECIFY BELOW)

|_|_|_|.|_|_| (%) and/or |_|_|_|_|_|_|_|_| (per mm³)

e. Basophils:

- Item not listed on lab report.....1 (A3f)
- Item listed with no value.....2 (A3f)
- Item listed with value.....3 (SPECIFY BELOW)

|_|_|_|.|_|_| (%) and/or |_|_|_|_|_|_|_|_| (per mm³)

f. LUC's (large undifferentiated or unidentified cells):

- Item not listed on lab report.....1 (END)
- Item listed with no value.....2 (END)
- Item listed with value.....3 (SPECIFY BELOW)

|_|_|_|.|_|_| (%) and/or |_|_|_|_|_|_|_|_| (per mm³) (END)