WOMEN'S INTERAGENCY HIV STUDY

CVL PROCESSING FORM

FORM L19

ID LABEL HERE ---> |__| - |__|__| - |__|__|__|__| - |__|

VISIT #: ___ ___

FORM COMPLETED BY: ___ ___ ___

VERSION DATE 02/15/97

A1. DATE CVL SAMPLE COLLECTED: ___ ___ / ___ ___ / ___ ___
M D Y

a. TIME SAMPLE COLLECTED: |___|___| : |___|___| AM.....1 PM.....2

b. DATE SAMPLE PROCESSED: ___ ___ / ___ ___ / ___ ___
M D Y

i. TIME SAMPLE PROCESSED: |___|___| : |___|___| AM.....1 PM.....2

ii. TIME SAMPLE FROZEN (put in freezer): |___|___| : |___|___| AM.....1 PM.....2

A2. CVL VOLUME: |___|___| . |___| ml

A3. CVL COLOR:
CLEAR 1
CLOUDY.....2
BLOOD TINGED.....3
OTHER 4
_____
(SPECIFY)

A4. RESULTS OF CHEM-STRIP - OB INDICATOR STRIP

a. BLOOD:
NEGATIVE.....1
5-10 RBC's per uL.....2
50 RBC's per uL.....3
250 RBC's per uL.....4
NOT DONE.....5

b. LEUKOCTYES (WBC):
NEGATIVE.....1
TRACE (10 WBC per uL).....2
1+ (75 WBC per uL).....3
2+ (500 WBC per uL).....4
NOT DONE.....5

A5. TOTAL VOLUME OF SUPERNATANT: |___|___| . |___| ml

A6. ROUND CELL STAIN TEST AND CELL COUNT RESULTS:

a. Total Round Cells Counted: |___| . |___|___| x 10 — (per ml)

b. Number of Peroxidase Positive Cells: |___| . |___|___| x 10 — (per ml)

c. % Peroxidase Positive Cells: |___|___| . |___|___| % (per ml)