

**NIDA IMMUNOLOGY/VIROLOGY SUBSTUDY
FORM NV07: URINE TOXICOLOGY**

ID LABEL
HERE --->

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VISIT #:

FORM COMPLETED BY:

VERSION DATE: **10/01/98**

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

A1. SPECIMEN DATE: _____ / _____ / _____
 M D Y

A2. WERE YOU ABLE TO ANALYZE SPECIMEN?

YES1 (A3)
NO2

a. IF NO, REASON:

_____ (END)
(SPECIFY)

A3. COCAINE:

POSITIVE1
NEGATIVE2
UNDETERMINED3
NOT DONE4

A4. OPIATES:

POSITIVE1
NEGATIVE2
UNDETERMINED3
NOT DONE4

A5. URINE CREATININE:

NORMAL1
ABNORMAL2
UNDETERMINED3
NOT DONE4