

WOMEN'S INTERAGENCY HIV STUDY
NIDA IMMUNOLOGY/VIROLOGY PROTOCOL
FORM NVNOTI: PARTICIPATION NOTIFICATION

INSTRUCTIONS:

The purpose of this form is to track in the Data Management System when a participant enrolls into the NIDA Immunology/Virology protocol substudy. This form should be completed for each participant that has been targeted as eligible for the NIDA Immunology/Virology protocol.

A1. PARTICIPANT ID: ENTER NUMBER HERE ONLY IF ID LABEL IS NOT AVAILABLE

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

A2. FORM VERSION: $\frac{1}{M} \frac{1}{D} / \frac{1}{M} \frac{5}{D} / \frac{9}{M} \frac{7}{Y}$

A3. FORM COMPLETED BY: _ _ _

A4. WIHS CORE VISIT NUMBER AT WHICH THE PARTICIPANT WAS APPROACHED FOR ENROLLMENT INTO THE NIDA I/V PROTOCOL:

_ _

A5. DOES PARTICIPANT CONSENT TO ENROLL IN NIDA I/V PROTOCOL?

YES.....1
 NO.....2 (END AND DO NOT COMPLETE OTHER NIDA FORMS)

A6. IS PARTICIPANT PART OF INTENSIVE SUBSTUDY?

YES.....1
 NO.....2

A7. DATE OF INTERVIEW:

_ _ / _ _ / _ _
 M D Y

If A5 = 1, then complete appropriate NIDA FORMS as per protocol