

WOMEN'S INTERAGENCY HIV STUDY

ORAL PROTOCOL

FORM OPNOTI: PARTICIPATION NOTIFICATION

INSTRUCTIONS:

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

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

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A2. FORM VERSION:

$\frac{1}{M} \frac{0}{D} / \frac{0}{D} \frac{1}{Y} / \frac{0}{D} \frac{1}{Y}$

A3. FORM COMPLETED BY:

— — —

A4. WIHS CORE VISIT NUMBER AT WHICH THE PARTICIPANT WAS ENROLLED INTO THE ORAL PROTOCOL:

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A5. ORAL VISIT NUMBER AT WHICH THE PARTICIPANT WAS ENROLLED INTO THE ORAL PROTOCOL:

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A6. DOES PARTICIPANT CONSENT TO ENROLL INTO THE ORAL PROTOCOL?

YES.....1
NO.....2 (END)

A7. DATE OF ORAL ENROLLMENT VISIT:

— — / — — / — —
M D Y

If A6 = 1, then complete appropriate ORAL SUBSTUDY FORMS as per protocol