

**WOMEN'S INTERAGENCY HIV STUDY  
F22MEDs3: MEDICATION HISTORY, ARV SUBFORM**

**COMPLETE ONE SET OF QUESTIONS #1 THROUGH #9 FOR EACH ARV MEDICATION PARTICIPANT REPORTS SHE HAS TAKEN SINCE HER (MONTH) STUDY VISIT.**

WIHSID:  _ - _ _ - _ _ _ _ - _	VISIT #  _ _
VERSION: 10/02/15	COMPLETED BY:  _ _ _
DATE COMPLETED:  _ _ / _ _ / _ _	

**IF THE PARTICIPANT DOES NOT TAKE A MEDICATION EVERY DAY (E.G., TAKES IT ONLY EVERY OTHER DAY, OR ONCE PER WEEK), ENTER CODE "99" (FOR "OTHER") IN QUESTION #8. ENTER THE ACTUAL DOSING SCHEDULE (E.G., "300 MG PER WEEK") IN THE SPECIFY FIELD. QUESTIONS #6 & #7 SHOULD BE CODED AS "-9." SEE QxQS FOR DETAILED EXAMPLES.**

**1. INTERVIEWER, REVIEW RESPONSE CARD DSG1.**

Enter 1<sup>st</sup> Drug Code: |\_|\_|\_| SPECIFY: \_\_\_\_\_

**2. INTERVIEWER: HOW WAS USE OF THIS MEDICATION REPORTED?**

- SELF-REPORT .....1
- PARTICIPANT BROUGHT WRITTEN LIST TO VISIT .....2
- PARTICIPANT BROUGHT MEDICATION BOTTLES TO VISIT.....3
- PARTICIPANT BROUGHT PHARMACY RECORD TO VISIT.....4
- RECORD OBTAINED DIRECTLY FROM PHARMACY .....5
- OTHER.....6

SPECIFY: \_\_\_\_\_

**3. A medication you have taken in the past three days includes any you have taken at least one time today, yesterday or the day before yesterday. Have you taken (DRUG) in the past three days?**

- YES.....1
- NO .....2 **(GO TO #9)**

**4. Is this either a new medication you have started using since your (MONTH) study visit, or a medication that you had stopped using for some time, but started again since your (MONTH) study visit?**

- YES.....1
- NO .....2 **(GO TO #6)**

**5. What was the date you began taking (DRUG)? I just need the month and year. If this is a medication that you are re-using, please give me the most recent date that you began taking or re-using this medication.**

|\_|\_| / |\_|\_|\_|\_|\_|  
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**6. How many doses per day do you take?**

|\_|\_| DOSES/DAY

**7. How many pills (or mL) per dose do you take?**

|\_|\_| PER DOSE

**8. INTERVIEWER, REVIEW RESPONSE CARD DSG1.**

What formulation of (DRUG) do you take?

|\_|\_| (END)

IF "99" SPECIFY: \_\_\_\_\_ **(END)**

**9. When did you stop taking (DRUG)? I just need the month and year.**

|\_|\_| / |\_|\_|\_|\_|\_|  
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