

3. Please identify any medications on this list that you have ever taken as I read/show you each one.

PROMPT: HAND PARTICIPANT ANTIRETROVIRAL PHOTO MEDICATION CARDS. GO THROUGH THE CARDS WITH THE PARTICIPANT, SAYING THE NAME OF EACH DRUG ALOUD AND ASKING HER TO TELL YOU “YES” OR “NO” WHETHER SHE HAS EVER TAKEN THIS DRUG.

CHECK THE BOX NEXT TO THE DRUG(S) THE PARTICIPANT HAS TAKEN. FOR DRUGS NOT ON THE LIST, RECORD THE NAME UNDER “OTHER” AS STATED BY THE PARTICIPANT AND FILL IN THE CORRESPONDING THREE-DIGIT DRUG CODE FROM DRUG LIST 1.

a. How about (EACH)?

Nucleoside/Nucleotide RTIs

- 204 Epivir (lamivudine, 3-TC)
- 218 Ziagen (abacavir, 1592U89)
- 092 Retrovir (AZT, zidovudine, ZDV)
- 227 Combivir (AZT + 3TC)
- 159 Zerit (stavudine, d4T)
- 094 Hivid (dideoxycytidine, zalcitabine, ddC)
- 147 Videx / Videx EC (dideoxyinosine, didanosine, ddI)
- 240 Trizivir (abacavir + AZT + 3TC)
- 234 Viread (tenofovir, bis-POC-PMPA)

Fusion Inhibitors

- 233 T-20 (pentafuside)

Protease Inhibitors

- 219 Agenerase (amprenavir, 141W94)
- 212 Crixivan (indinavir)
- 217 Kaletra (lopinavir/ritonavir, ABT-378/r)
- 216 Viracept (nelfinavir)
- 211 Norvir (ritonavir)
- 210 Invirase or Fortovase (saquinavir)
- 243 Atazanavir (BMS-232632)

Non-Nucleoside RTIs

- 194 Rescriptor (delavirdine, U-90)
- 220 Sustiva (efavirenz, DMP266)
- 191 Viramune (nevirapine)

Other

- 207 Droxia or Hydrea (hydroxyurea)
- Other anti-viral(s) (from Drug List 1)

Name of Drug:
Name of Drug:
Name of Drug:
Name of Drug:
Name of Drug:

Drug Code:

Drug Code:

Drug Code:

Drug Code:

Drug Code: