

WOMEN'S INTERAGENCY HIV STUDY
MALT STUDY
FORM MG02: PRE-ELIGIBILITY (TO BE COMPLETED BY SITE STUDY COORDINATOR)

SECTION A: GENERAL INFORMATION

- A1. PARTICIPANT ID: ENTER NUMBER HERE ONLY IF ID LABEL IS NOT AVAILABLE |_|-|_|_|-|_|_|_|_|-|_|
- A2. WIHS STUDY VISIT #: |_|_|
- A3. FORM VERSION: **10/01/09**
- A4. DATE OF INTERVIEW: |_|_|/|_|_|/|_|_|
 M D Y
- A5. INTERVIEWER'S INITIALS: |_|_|_|
-

SECTION B: TO BE COMPLETED BY SITE STUDY COORDINATOR

- B1. To which of the following WDMAC pre-eligibility groups has the participant been assigned?
- a. HIV Uninfected Group 1 (GO TO SECTION C)
 - b. Natural Controller Group 2 (GO TO SECTION D)
 - c. Good CD4 Responder to HAART Group 3 (GO TO SECTION E)
 - d. Poor CD4 Responder to HAART Group..... 4 (GO TO SECTION F)
 - e. Off Treatment Progressor Group..... 5 (GO TO SECTION G)

SECTION C: UNINFECTED GROUP

- C1. Has the participant been HIV negative at each WIHS visit, and does she remain negative?
- YES 1 (Appears eligible, pending HIV antibody result. Refer to appropriate WIHS site staff for potential substudy participation. END.)
- NO 2 (Ineligible. END.)

SECTION D: NATURAL CONTROLLER GROUP

- D1. Since visit 29, has HIV viral load consistently been below WIHS threshold of detectability?
- YES 1 (GO TO D2)
- NO 2 (Ineligible. END.)
- D2. Does the participant's most recent HIV viral load remain below WIHS threshold of detectability?
- YES 1 (GO TO D2a)
- NO 2 (Ineligible. END.)
-

a. Source of current viral load: _____

b. Date of current viral load: |__|_|_|/|__|_|_|/|__|_|_|
M D Y

D3. Since Visit 29, has the participant taken HAART?

- YES 1 **(GO TO D4)**
- NO 2 **(Appears eligible. Refer to appropriate WIHS site staff for potential substudy participation. END.)**

D4. Was use of HAART during pregnancy only?

- YES 1 **(Appears eligible. Refer to appropriate WIHS site staff for potential substudy participation. END.)**
- NO 2 **(Ineligible. END.)**

SECTION E: GOOD CD4 RESPONDER GROUP

E1. Since V29, has participant been on HAART consistently?

- YES 1 **(GO TO E2)**
- NO 2 **(Ineligible. END.)**

E2. Since visit 29, has HIV viral load consistently been below WIHS threshold of detectability?

- YES 1 **(GO TO E3)**
- NO 2 **(Ineligible. END.)**

E3. Does the participant's most recent HIV viral load remain below WIHS threshold of detectability?

- YES 1 **(GO TO E3a)**
- NO 2 **(Ineligible. END.)**

a. Source of current viral load: _____

b. Date of current viral load: |__|_|_|/|__|_|_|/|__|_|_|
M D Y

E4. Since visit 29, has CD4 count remained consistently increased over pretreatment level?

- YES 1 **(Appears eligible. Refer to appropriate WIHS site staff for potential substudy participation. GO TO E4a.)**
- NO 2 **(Ineligible. END.)**

a. Source of current CD4 count: _____

b. Date of current CD4 count: |__|_|_|/|__|_|_|/|__|_|_| **(END)**
M D Y

SECTION F: POOR CD4 RESPONDER GROUP

- F1. Since visit 29, has participant been on HAART consistently?
 YES 1 **(GO TO F2)**
 NO 2 **(Ineligible. END.)**
- F2. Since visit 29, has HIV viral load consistently been below WIHS threshold of detectability?
 YES 1 **(GO TO F3)**
 NO 2 **(Ineligible. END.)**
- F3. Does the participant’s most recent HIV viral load remain below WIHS threshold of detectability?
 YES 1 **(GO TO F3a)**
 NO 2 **(Ineligible. END.)**
- a. Source of current viral load: _____
- b. Date of current viral load: |__|_|_|/|__|_|_|/|__|_|_|
 M D Y
- F4. Since visit 29, has CD4 cell count reached at least 100 cells above pretreatment count?
 YES 1 **(Ineligible. END.)**
 NO 2 **(Appears eligible. Refer to appropriate WIHS site staff for potential substudy participation. GO TO F4a.)**
- a. Source of current CD4 count: _____
- b. Date of current CD4 count: |__|_|_|/|__|_|_|/|__|_|_| **(END)**
 M D Y

SECTION G: OFF TREATMENT PROGRESSOR GROUP

- G1. Since visit 29, has the participant taken HAART?
 YES 1 **(GO TO G2)**
 NO 2 **(GO TO G3)**
- G2. Was use of HAART during pregnancy only?
 YES 1 **(GO TO G3)**
 NO 2 **(Ineligible. END.)**
- G3. Since visit 29, has HIV viral load consistently been detectable?
 YES 1 **(GO TO G4)**
 NO 2 **(Ineligible. END.)**

WIHSID

G4. Do results of most recent HIV viral load remain detectable?

- YES 1 **(Appears eligible. Refer to appropriate WIHS site staff for potential substudy participation. GO TO G4a.)**
- NO 2 **(Ineligible. END)**

c. Source of current viral load: _____

d. Date of current viral load: |__|__|/|__|__|/|__|__| **(END)**
 M D Y