

**WOMENS INTERAGENCY HIV STUDY
INTENSIVE PK STUDY
FORM PK02: CURRENT ANTIRETROVIRAL MEDICATION USE**

SECTION A: GENERAL INFORMATION

- A1. PARTICIPANT ID: ENTER NUMBER HERE ONLY IF ID LABEL IS NOT AVAILABLE |_|_| - |_|_|_| - |_|_|_|_|_| - |_|_|
- A2. LAST WIHS CORE VISIT #: ___ ___
- A3. VERSION DATE: 10/01/04
- A4. DATE OF INTERVIEW: ___ ___ / ___ ___ / ___ ___
M D Y
- A5. INTERVIEWER'S INITIALS: ___ ___ ___

SECTION B: ANTIRETROVIRAL MEDICATION USE

B1. **INTRODUCTION TO PARTICIPANT:** Now, I am going to ask you a series of questions about antiretroviral medications (HIV drugs) you may have taken since your last core WIHS visit when you were scheduled for this "Intensive PK Substudy" visit.

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 TAKEN THIS DRUG SINCE HER LAST CORE WIHS VISIT. CHECK EACH DRUG THE PARTICIPANT REPORTS HAVING TAKEN.

B2. Since your last core WIHS visit, have you taken. . .

<p>Nucleoside/Nucleotide RTIs</p> <p>204 ___ Efavir (3TC, lamivudine)</p> <p>218 ___ Ziagen (abacavir)</p> <p>092 ___ Retrovir (AZT, zidovudine, ZDV)</p> <p>227 ___ Combivir (AZT + 3TC)</p> <p>159 ___ Zerit (d4T, stavudine)</p> <p>094 ___ Hivid (zalcitabine, ddC)</p> <p>147 ___ Videx (didanosine, ddI)</p> <p>240 ___ Trizivir (abacavir + AZT + 3TC)</p> <p>234 ___ Viread (tenofovir)</p> <p>239 ___ Emtriva (emtricitabine, FTC)</p> <p>253 ___ Truvada (Viread + Emtriva)</p> <p>254 ___ Epzicom (Ziagen + Efavir)</p> <p>Non-Nucleoside RTIs</p> <p>194 ___ Rescriptor (delavirdine)</p> <p>220 ___ Sustiva (efavirenz)</p> <p>191 ___ Viramune (nevirapine)</p>	<p>Protease Inhibitors</p> <p>219 ___ Agnerase (amprenavir)</p> <p>212 ___ Crixivan (indinavir)</p> <p>217 ___ Kaletra (lopinavir + ritonavir)</p> <p>216 ___ Viracept (nelfinavir)</p> <p>211 ___ Norvir (ritonavir)</p> <p>210 ___ Invirase or Fortovase (saquinavir)</p> <p>243 ___ Reyataz (atazanavir)</p> <p>238 ___ Aptivus (tipranvir)</p> <p>249 ___ Lexiva (fosamprenavir)</p> <p>Entry Inhibitors</p> <p>233 ___ Fuzeon (T-20, enfuvirtide)</p> <p>___ Other antiretroviral</p> <p>Drug code: _ _ _ _ </p> <p>Specify: _____</p>
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B3. ENTER THE TOTAL NUMBER OF ANTIRETROVIRAL MEDICATIONS THE PARTICIPANT REPORTED TAKING IN QUESTION B2: |_|_|

PLEASE FILL OUT A PK ADHERENCE FORM (FORM PK02A) FOR EACH TARGET MEDICATION (Sustiva, Viramune, Kaletra, Viracept, Reyataz) CHECKED ABOVE.