

**WOMENS INTERAGENCY HIV STUDY
INTENSIVE PK STUDY
FORM PK05A: WEIGHT/SPECIMEN COLLECTION FORM
FOR GROUP A PARTICIPANTS**

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: 04/01/03
- A4. DATE OF COLLECTION: M / D / Y
- A5. COLLECTOR'S INITIALS:
- A6. NAME OF TARGET MEDICATION (CIRCLE YES OR NO FOR EACH):
- | | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| a. NEVIRAPINE (<i>VIRAMUNE</i>)..... | 1 | 2 |
| b. NELFINAVIR (<i>VIRACEPT</i>)..... | 1 | 2 |
| c. LOPINAVIR/RITONAVIR (<i>KALETRA</i>)..... | 1 | 2 |

SECTION B: WEIGHT

- B1. WEIGHT OF PARTICIPANT IN POUNDS (LBS):
(ROUND TO NEAREST 1.0 POUND)
WEIGHT (LBS)

SECTION C: URINE PREGNANCY TEST

- C1. URINE PREGNANCY TEST
- | | |
|--------------------|---|
| PREGNANT | 1 |
| NOT PREGNANT | 2 |
| NOT DONE | 3 |
- SPECIFY REASON: _____

SECTION D: TIMES OF BLOOD COLLECTIONS FOR PK SAMPLING

- D1. TIME PARTICIPANT TOOK TARGET MEDICATION THE EVENING BEFORE PK SAMPLING: : AM..... 1
PM 2
- a. TIME POINT OF **D1** CONFIRMED BY:
- | | |
|---|---|
| TELEPHONE INTERVIEW | 1 |
| WITNESSED DOSE IN CLINICAL CENTER | 2 |

