

**WOMENS INTERAGENCY HIV STUDY
INTENSIVE PK STUDY
PK07: PLASMA SEPARATION AND FREEZING FORM**

ID LABEL
HERE --->

_	-	_ _	-	_ _ _ _	-	_
---	---	-----	---	---------	---	---

VISIT #:

____ - ____ - ____

FORM COMPLETED BY:

____ - ____ - ____

VERSION DATE **4/01/03**

ANY MISSING INFORMATION MUST BE EXPLAINED ON THIS FORM

EDTA TUBES

- B1. TIMEPOINT OF EDTA TUBE _____ MINUTES
- B2. DATE EDTA TUBE DRAWN: _____ / _____ / _____
M D Y
- B3. DATE EDTA TUBE RECEIVED IN LAB: _____ / _____ / _____
M D Y
- B4. TIME EDTA TUBE RECEIVED IN LAB: _____ : _____ AM.....1
PM.....2
- B5. DATE EDTA TUBES CENTRIFUGED IN LAB: _____ / _____ / _____
M D Y
- a. TIME: _____ : _____ AM.....1
PM.....2
- B6. PLASMA SEPARATION DATE: _____ / _____ / _____
M D Y
- a. TIME: _____ : _____ AM.....1
PM.....2
- B7. PLASMA FROZEN DATE: _____ / _____ / _____
M D Y
- a. TIME: _____ : _____ AM.....1
PM.....2
- B8. TOTAL VOLUME OF PLASMA FROZEN: _____ . _____ ml

DO NOT DATA ENTER FORM PK07.