



**SECTION B. BLOOD DRAW**

**LISTED IN ORDER OF PRIORITY**

**FOR EACH SAMPLE NOT COLLECTED, PLEASE WRITE COMMENT.  
IF REQUIRED VOLUME WAS NOT COLLECTED, PLEASE WRITE COMMENT.**

	<u>TEST TYPE</u>	<u>TUBE TYPE</u>	<u>VOLUME</u>	<u>a.) SPECIMEN COLLECTED</u>			<u>b.) REQUIRED VOLUME COLLECTED</u>	
				<u>YES</u>	<u>NO</u>	<u>N/A</u>	<u>YES</u>	<u>NO</u>
B1.	Viral Load and Genotyping*	CPT Tube	8ml	1	2	3	1	2
<b>IF A2 EQUALS 4 (NON PK) CIRCLE "3" (NA) FOR B2)</b>								
B2.	0 min PK sample**	Purple Top on ice	8 ml	1	2	3	1	2
B3.	CBC/DIFF	Purple Top	One 8ml or two 5 ml	1	2	3	1	2
B4.	T-Cell Subsets			1	2	3	1	2
<b>IF A2 EQUALS 3 OR 4 (RANDOM OR NON PK) CIRCLE "3" (NA) FOR B5</b>								
B5.	120 min PK sample**	Purple Top on ice	8 ml	1	2	3	1	2

\* Includes cells and plasma for central repository

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COMMENTS:

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