

40 FORM 2—NON-ANTI-VIRAL DRUGS

ID Number				Visit No.			Date		
MACSID				4 0 0			<input type="radio"/> Jan DAY YEAR <input type="radio"/> Feb <input type="radio"/> Mar <input type="radio"/> Apr <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July (4) 04 <input type="radio"/> Aug (5) 05 <input type="radio"/> Sept (6) 06 <input type="radio"/> Oct (7) 07 <input type="radio"/> Nov (8) 08 <input type="radio"/> Dec (9) 09		
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COMPLETE THE FOLLOWING FOR EACH DRUG LISTED IN QUESTION 15.C.(2).

- | | |
|--|---|
| <input type="radio"/> Atovaquone (BW566C80, Mepron) | <input type="radio"/> Hydroxyurea (Hydrea) |
| <input type="radio"/> Azithromycin (Zithromax) | <input type="radio"/> Interleukin-2 (IL-2) |
| <input type="radio"/> Bactrim (Septra, SMZ-TMP, Sulfamethoxazole) | <input type="radio"/> Itraconazole (Sporonox) |
| <input type="radio"/> Ciprofloxacin (CIPRO) | <input type="radio"/> Ketoconazole (Nizoral) |
| <input type="radio"/> Clarithromycin (Biaxin) | <input type="radio"/> Megace |
| <input type="radio"/> Co-enzyme Q | <input type="radio"/> Mycelex (Clotrimazole) |
| <input type="radio"/> Colony stimulating factors (G-CSF, Neupogen) | <input type="radio"/> NAC (N-acetyl-cysteine) |
| <input type="radio"/> Cortisone | <input type="radio"/> Nandralone (Deca-Durabolin) |
| <input type="radio"/> Dapsone | <input type="radio"/> Nystatin (Mycostatin) |
| <input type="radio"/> DHEA | <input type="radio"/> Oxandrin (Oxandrolone) |
| <input type="radio"/> Ethambutol (Myambutal) | <input type="radio"/> Pentamidine (Aerosolized) |
| <input type="radio"/> Erythropoietin (Epogen, Procrit) | <input type="radio"/> Rifabutin (Ansamycin, Mycobutin) |
| <input type="radio"/> Flagyl (Metronidazole) | <input type="radio"/> Serostim |
| <input type="radio"/> Fluconazole (Diflucan) | <input type="radio"/> Testosterone (Delatestryl, Virilon, Testoderm, Androderm, Androgel) |
| <input type="radio"/> Ganciclovir (DHPG, Cytovene) | <input type="radio"/> Vaccine trial (Generic) |

Other → Name of Drug:

↓

Drug Code

	0	100	200	300	400	500	600	700	800	900
	0	10	20	30	40	50	60	70	80	90
	0	1	2	3	4	5	6	7	8	9

You said you were taking (DRUG) since your last visit:

1. A. Did you take this drug as part of a research study?

- NO (GO TO Q2) RESF2_40
- YES

B. Was this study one in which you may have taken a placebo (not the actual drug) or in which you were blinded to the treatment?

- NO PLCF2_40
- YES

C. Was this part of the AIDS Clinical Trial Group (ACTG)?

- NO
- YES ACTF2_40
- DON'T KNOW

D. Are you currently taking this drug as part of the research study?

- NO
- YES RNWF2_40

STOP IF PARTICIPANT WAS BLINDED TO THE TREATMENT AND GO TO NEXT DRUG.

2. How often did you take this drug?

(RECORD MOST RECENT NUMBER OF TIMES PER DAY OR TIMES PER WEEK OR TIMES PER MONTH OR TIMES PER YEAR)

NUMBER OF TIMES	<table border="1"> <tr><td>0</td><td>0</td></tr> <tr><td>10</td><td>1</td></tr> <tr><td>20</td><td>2</td></tr> <tr><td>30</td><td>3</td></tr> <tr><td>40</td><td>4</td></tr> <tr><td>50</td><td>5</td></tr> <tr><td>60</td><td>6</td></tr> <tr><td>70</td><td>7</td></tr> <tr><td>80</td><td>8</td></tr> <tr><td>90</td><td>9</td></tr> </table>	0	0	10	1	20	2	30	3	40	4	50	5	60	6	70	7	80	8	90	9	PER	<input type="radio"/> Day or <input type="radio"/> Week or <input type="radio"/> Month or <input type="radio"/> Year <input type="radio"/> Don't Know
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50	5																						
60	6																						
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80	8																						
90	9																						
TMNAV_40			TUNAV_40																				

3. How many (days, weeks, months) did you use (DRUG) since your last visit?

LNGNV_40	<table border="1"> <tr><td>0</td><td>0</td><td>0</td></tr> <tr><td>100</td><td>10</td><td>1</td></tr> <tr><td>200</td><td>20</td><td>2</td></tr> <tr><td>300</td><td>30</td><td>3</td></tr> <tr><td>400</td><td>40</td><td>4</td></tr> <tr><td>500</td><td>50</td><td>5</td></tr> <tr><td>600</td><td>60</td><td>6</td></tr> <tr><td>700</td><td>70</td><td>7</td></tr> <tr><td>800</td><td>80</td><td>8</td></tr> <tr><td>900</td><td>90</td><td>9</td></tr> </table>	0	0	0	100	10	1	200	20	2	300	30	3	400	40	4	500	50	5	600	60	6	700	70	7	800	80	8	900	90	9	<input type="radio"/> Days or <input type="radio"/> Weeks or <input type="radio"/> Months <input type="radio"/> Don't Know
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800	80	8																														
900	90	9																														
		NVLGU_40																														

4. Are you currently taking this drug [not as part of a research study]?

- NO
- YES NAVNW_40