

NIDA

Annotated Design For Trial: ctn0032

Protocol: CTN0032

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December 12, 2008 10:28AM

| Time and Events Schedule For Study: ctn0032 | | | | | | | | |
|---|--|--------------------------|-------------------------------|--------------------------------|-------------------------|------------------------------|----------------------------------|----------------------------------|
| Assessment | CRF | CROSS Active (CAS) [S] | Conflict (Conflict) [U/R/D] | SCREEN Failure (SCRFF) [U/D] | BASELINE (BASE) [U/D] | INTERVENTION (INTER) [U/D] | 1 MONTH Follow up (MTH1) [U/D] | 6 MONTH Follow up (MTH6) [U/D] |
| 1 | Study Completion | COMP | 1-DF | | | | | |
| 2 | Adverse Events | AE | 2-RF-DF | | | | | |
| 3 | Serious Adverse Event | SAE | 3-RF-DF | | | | | |
| 4 | Protocol Violation Log | PVL | 4-RF-DF | | | | | |
| 5 | Unscheduled Expected Events | EEU | 5-RF-DF | | | | | |
| 6 | Screening/Randomization Status | SRST | 6 | | | | | |
| 7 | Screen Failure/Demographics | DEM2 | | 1 | | | | |
| 8 | Screening Failure/Eligibility Criteria | ELG2 | | 2 | | | | |
| 9 | HIV/Hepatitis Status | HHE | | 3 | 3 | | | |
| 10 | Written Informed Consent | WIC | | 4 | 4 | | | |
| 11 | Demographics | DEM | | | 1 | | | |
| 12 | Screening Visit/Eligibility Criteria | ELG | | | 2 | | | |
| 13 | Randomization | RAN | | | 5 | | | |
| 14 | Group 1 HIV Informed Consent Respect -2 Counseling | HIVG1 | | | | 1-DF | | |
| 15 | Group 2 HIV Informed Consent/Information | HIVG2 | | | | 2-DF | | |
| 16 | Group 3 HIV Informed Consent/Referral | HIVG3 | | | | 3-DF | | |
| 17 | HIV Oral Rapid Result | HIVRER | | | | 4-DF | | |
| 18 | HIV Repeat Oral Rapid Result | HIVREP | | | | 5-DF | | |
| 19 | HIV Fingerstick Result | HIVRERF | | | | 6-DF | | |
| 20 | HIV Repeat Fingerstick Result | HIVREPF | | | | 7-DF | | |
| 21 | HIV Fingerstick Results Counseling | HIVFR | | | | 8-DF | | |
| 22 | OraSure HIV Confirmatory Collection | HIVCC | | | | 9-DF | | |
| 23 | OraSure HIV Confirmatory Results | HIVCO | | | | 10-DF | | |
| 24 | OraSure HIV Confirmatory Re-Collection | HIVRC | | | | 11-DF | | |
| 25 | OraSure HIV Confirmatory Re-Collection Results | HIVRCO | | | | 12-DF | | |
| 26 | Confirmatory Positive of HIV Results | HIVPOS | | | | 13-DF | | |
| 27 | Follow-up Visit | VIS | | | | | 1 | 1 |
| 28 | Expected Events | EE | | | | | 2 | 2 |
| 29 | HIV Off-Site Expenses | HIVEXP | | | | | 3-DF | 3-DF |
| 30 | Testing Record Verification | HTVR | | | | | 4-DF | 4-DF |
| 31 | HIV Primary Care Medical | MRVPC | | | | | 5-DF | 5-DF |

Key: [S] = Scheduled Visit [O] = Optional Visit [D] = Dynamic Visit [U] = Unscheduled Visit [R] = Repeating Visit
C = Common Form DF = Dynamic Form RF = Repeating Form

| ctn0032 : Trial Screening (SCR) | |
|---------------------------------|--------------------------------------|
| . | |
| 1. IVRS ID | A3 (ctn0032cdd:SCR.IVRSID / IVRS ID) |

| CDD: ctn0032cdd Table: SCR Key Type: PATIENTVISIT | | |
|---|------------------|-------------|
| Column Name | Column Data Type | Design Note |
| IVRSID | STRING(3) - A3 | |

| ctn0032 : Enrollment (ENR) | | |
|----------------------------|--------------------|--|
| Patient Number | | |
| 1. | Participant Number | A20 (ctn0032cdd:ENR.SUBJNO / Participant number) |

| Item Design Notes: | |
|--------------------|--|
| Item No. | Design Note |
| 1. | mapped from Enrollment form to PI form |

| CDD: ctn0032cdd Table: ENR Key Type: PATIENTVISIT | | |
|---|------------------|-------------|
| Column Name | Column Data Type | Design Note |
| SUBJNO | STRING(20) - A20 | |

| ctn0032 : Study Completion (COMP) | |
|--|--|
| 1. Staff ID: | A5 (ctn0032cdd:COMP.COMP01 / STAFF ID) |
| 2. Date of study completion or early termination: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:COMP.COMP02DT / Completion date) |
| 3. Did participant complete the study? | (ctn0032cdd:COMP.COMP03 / Study completed) [1] <input type="radio"/> Yes [0] <input type="radio"/> (ctn0032cdd:COMP.COMP03a / Reason study not complete) No-- Provide primary reason: [1] <input type="radio"/> Participant incarcerated [2] <input type="radio"/> Participant lost to follow-up (lost contact) not due to incarceration [3] <input type="radio"/> Participant withdrew consent [4] <input type="radio"/> Participant died Date of Death Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:COMP.COMP03DT / Death date) [5] <input type="radio"/> (ctn0032cdd:COMP.COMP03b / CTP PI Decision) CTP PI's decision-- Provide primary reason [1] <input type="radio"/> Study harmful to participant [2] <input type="radio"/> Participant too disruptive to remain in study [3] <input type="radio"/> Participant experiencing severe psychological occurrences [4] <input type="radio"/> Other (specify): A200 (ctn0032cdd:COMP.COMPSP / Specify PI primary decision) |
| Investigator's Signature | |
| I have reviewed all the data recorded on all eCRF pages and certify that they are accurate and complete to the best of my knowledge. | |
| 4. Principal Investigator or designee: | A100 Signature (ctn0032cdd:COMP.COMPSIG / Investigator signature) |
| 5. Date: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:COMP.COMPDT / Signature date) |

| Column Name | Column Data Type | Design Note |
|-------------|--------------------|-------------|
| COMP01 | STRING(200) - A5 | |
| COMP02DT | DATE - DDMONYYYY | |
| COMP03 | NUMERIC | |
| COMP03a | NUMERIC | |
| COMP03DT | DATE - DDMONYYYY | |
| COMP03b | NUMERIC | |
| COMPSP | STRING(200) - A200 | |
| COMPSIG | STRING(100) - A100 | |
| COMPDT | DATE - DDMONYYYY | |

| ctn0032 : Adverse Events (AE) - Repeating Form | | | | | | | | | | | |
|--|--------------------------------|--|---------|--------------------------------|---------------|-------------|------------------|-------------------------------|-----------------------|------------|-------------|
| # | Staff ID: | Report Date | 1. AE # | 2. AE symptom(s) or diagnosis: | 3. Onset Date | 4. Severity | 5. Actions Taken | 6. Study intervention related | 7. Was Event Serious? | 8. Outcome | 9. End Date |
| 1 | | | | | | | | | | | |
| . | | | | | | | | | | | |
| 1. | Staff ID: | A5 (ctn0032cdd:AE.AEID / Staff ID) | | | | | | | | | |
| 2. | Report Date: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:AE.VISITDT / AE ASSESSMENT DATE) | | | | | | | | | |
| 3. | 1. AE #: | xx (1 =< n <= 99) (ctn0032cdd:AE.AE01 / AE NUMBER) | | | | | | | | | |
| 4. | 2. AE symptom(s) or diagnosis: | A100 (ctn0032cdd:AE.AE02 / AE SYMPTOMS OR DIAGNOSIS) | | | | | | | | | |
| 5. | 3. Onset Date: | Req [v] / Req/Unk [v] / Req [v] (2008-2012) (ctn0032cdd:AE.AE03DT / AE ONSET DATE) | | | | | | | | | |
| 6. | 4. Severity: | (ctn0032cdd:AE.AE04 / AE SEVERITY) [1] <input type="radio"/> Mild [2] <input type="radio"/> Moderate [3] <input type="radio"/> Severe [4] <input type="radio"/> Life Threatening [5] <input type="radio"/> Death | | | | | | | | | |
| 7. | 5. Actions Taken: | (ctn0032cdd:AE.AE05 / AE ACTIONS TAKEN) [0] <input type="radio"/> None [1] <input type="radio"/> Temporarily Discontinued Study Therapy [2] <input type="radio"/> Discontinued Study Therapy [3] <input type="radio"/> Terminated from Study | | | | | | | | | |
| 8. | 6. Study intervention related: | (ctn0032cdd:AE.AE06 / AE STUDY RELATED) [1] <input type="radio"/> Unrelated [2] <input type="radio"/> Possibly [3] <input type="radio"/> Probably [4] <input type="radio"/> Definitely | | | | | | | | | |
| 9. | 7. Was Event Serious? | (ctn0032cdd:AE.AE07 / AE SERIOUS) [0] <input type="radio"/> No [1] <input type="radio"/> Yes-- If serious, complete SAE form | | | | | | | | | |
| 10. | 8. Outcome: | (ctn0032cdd:AE.AE08 / AE OUTCOME) [1] <input type="radio"/> Resolved [2] <input type="radio"/> Resolved with Sequelae [3] <input type="radio"/> Not Resolved [4] <input type="radio"/> Fatal | | | | | | | | | |
| 11. | 9. End Date: | [2] <input type="radio"/> Req [v] / Req/Unk [v] / Req [v] (2008-2012) (ctn0032cdd:AE.AE09DT / AE END DATE) [1] <input type="radio"/> Ongoing | | | | | | | | | |

CDD: ctn0032cdd Table: AE Key Type: PATIENTVISIT

| Column Name | Column Data Type | Design Note |
|-------------|--------------------|-------------|
| AEID | STRING(5) - A5 | |
| VISITDT | DATE - DDMONYYYY | |
| AE01 | NUMERIC - N2 | |
| AE02 | STRING(100) - A100 | |
| AE03DT | DATE - DDMONYYYY | |
| AE04 | NUMERIC | |
| AE05 | NUMERIC | |
| AE06 | NUMERIC | |
| AE07 | NUMERIC | |
| AE08 | NUMERIC | |
| AE09 | NUMERIC | |
| AE09DT | DATE - DDMONYYYY | |

| ctn0032 : Serious Adverse Event (SAE) - Repeating Form | | | | | | | | | | | | | | | | |
|---|--|--|----------------------|----------------------|------------------------------|----------------------|----------------------|---|----------------------|---------------------------------------|--|--|---|-----------------------------------|---|----------------------|
| # | Staff ID: | AE Number: | SAE Number: | Report Type: | SAE symptom(s) or diagnosis: | a. Death: | b. Life-threatening: | c. Hospitalization (other than detox or rehab): | d. Disability: | e. Congenital anomaly: | f. Required intervention to prevent one of the above outcomes: | Relevant tests/laboratory data, including dates: | Was any Concomitant Drug Therapy provided?: | Concomitant Drug Therapy | Relevant history, including date of consent and pre-existing medical conditions | Additional comments: |
| 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| . | | | | | | | | | | | | | | | | |
| 1. | Staff ID: | <input type="text" value="A4"/> (ctn0032cdd:SAE.SAESTID / SAE STAFF ID) | | | | | | | | | | | | | | |
| 2. | AE Number: | <input type="text" value="xx"/> (1 = < n <= 99) (ctn0032cdd:SAE.SAEAENUM / SAE AE NUMBER) | | | | | | | | | | | | | | |
| 3. | SAE Number: | <input type="text" value="xx"/> (1 = < n <= 99) (ctn0032cdd:SAE.SAENUM / SAE NUMBER) | | | | | | | | | | | | | | |
| 4. | Report Type: | (ctn0032cdd:SAE.SAETYPE / SAE INITIAL\FOLLOWUP) [1] <input type="radio"/> Initial [2] <input type="radio"/> Follow-up | | | | | | | | | | | | | | |
| 5. | SAE symptom(s) or diagnosis: | Must match corresponding AE (ctn0032cdd:SAE.SAE01 / SAE SYMPTOMS OR DIAGNOSIS) <input type="text" value="A200"/> | | | | | | | | | | | | | | |
| SAE categorization (respond No or Yes to all questions): | | | | | | | | | | | | | | | | |
| 6. | a. Death: | (ctn0032cdd:SAE.SAE02A / SAE DEATH) [0] <input type="radio"/> No [1] <input type="radio"/> Yes | | | | | | | | | | | | | | |
| 7. | b. Life-threatening: | (ctn0032cdd:SAE.SAE02B / SAE LIFE-THREAT) [0] <input type="radio"/> No [1] <input type="radio"/> Yes | | | | | | | | | | | | | | |
| 8. | c. Hospitalization (other than detox or rehab): | (ctn0032cdd:SAE.SAE02C / SAE HOSPITALIZATION) [0] <input type="radio"/> No [1] <input type="radio"/> Yes | | | | | | | | | | | | | | |
| 9. | d. Disability: | (ctn0032cdd:SAE.SAE02D / SAE DISABILITY) [0] <input type="radio"/> No [1] <input type="radio"/> Yes | | | | | | | | | | | | | | |
| 10. | e. Congenital anomaly: | (ctn0032cdd:SAE.SAE02E / SAE CONGENITAL ANOMALY) [0] <input type="radio"/> No [1] <input type="radio"/> Yes | | | | | | | | | | | | | | |
| 11. | f. Required intervention to prevent one of the above outcomes: | (ctn0032cdd:SAE.SAE02F / SAE REQUIRED INTERVENTION) [0] <input type="radio"/> No [1] <input type="radio"/> Yes | | | | | | | | | | | | | | |
| . | | | | | | | | | | | | | | | | |
| 12. | Relevant tests/laboratory data, including dates: | (ctn0032cdd:SAE.SAE03 / SAE RELEVANT TESTS RADIO) [1] <input type="radio"/> <input type="text" value="A200"/> (ctn0032cdd:SAE.SAE03R / SAE RELEVANT TEST\LABS) [98] <input type="radio"/> NA | | | | | | | | | | | | | | |
| 13. | Was any Concomitant Drug Therapy provided? | (ctn0032cdd:SAE.SAE04 / SAE CONCOMITANT DRUG) [0] <input type="radio"/> No [1] <input type="radio"/> Yes [98] <input type="radio"/> Unknown | | | | | | | | | | | | | | |
| 4a Drug (include generic name) | | | | | | | | | | 4b Quantity per Administration | | | | 4c Route of Administration | | |
| 14. | <input type="text"/> | | | | | | | | | <input type="text"/> | | | | <input type="text"/> | | |
| Concomitant Drug Therapy Entry | | | | | | | | | | | | | | | | |
| 14.a | 4a Drug (include generic name) | <input type="text" value="A50"/> (ctn0032cdd:SAE2.SAE04A / SAE DRUG) | | | | | | | | | | | | | | |
| 14.b* | 4b Quantity per Administration | <input type="text" value="A200"/> (ctn0032cdd:SAE2.SAE04B / SAE QUANTITY) | | | | | | | | | | | | | | |
| 14.c* | 4c Route of Administration | <input type="text" value="A200"/> (ctn0032cdd:SAE2.SAE04C / SAE ROUTE) | | | | | | | | | | | | | | |
| . | | | | | | | | | | | | | | | | |
| 15. | Relevant history, including date of consent and pre-existing medical conditions (e.g., allergies, pregnancy, smoking and alcohol use, Hepatic/renal dysfunction, etc): | <input type="text" value="A200"/> (ctn0032cdd:SAE.SAE05a / SAE RELEVANT HISTORY) <input type="text" value="A200"/> (ctn0032cdd:SAE.SAE05b / SAE RELEVANT HISTORY) <input type="text" value="A200"/> (ctn0032cdd:SAE.SAE05c / SAE RELEVANT HISTORY) | | | | | | | | | | | | | | |
| 16.* | Additional comments: | <input type="text"/> (ctn0032cdd:SAE.SAE06A / SAE ADDITIONAL COMMENTS A) | | | | | | | | | | | | | | |

| | | |
|----------------------|-----------------------------------|---|
| Additional comments: | <input type="text" value="A200"/> | (ctn0032cdd:SAE.SAE06B / SAE ADDITIONAL COMMENTS B) |
| Additional comments: | <input type="text" value="A200"/> | (ctn0032cdd:SAE.SAE06C / SAE ADDITIONAL COMMENTS C) |
| Additional comments: | <input type="text" value="A200"/> | (ctn0032cdd:SAE.SAE06d / SAE ADDITIONAL COMMENTS C) |
| Additional comments: | <input type="text" value="A200"/> | (ctn0032cdd:SAE.SAE06e / SAE ADDITIONAL COMMENTS C) |

* Item is not required

| CDD: ctn0032cdd Table: SAE Key Type: PATIENTVISIT | | |
|---|--------------------|-------------|
| Column Name | Column Data Type | Design Note |
| SAESTID | STRING(4) - A4 | |
| SAEAENUM | NUMERIC - N2 | |
| SAENUM | NUMERIC - N2 | |
| SAETYPE | NUMERIC | |
| SAE01 | STRING(200) - A200 | |
| SAE02A | NUMERIC | |
| SAE02B | NUMERIC | |
| SAE02C | NUMERIC | |
| SAE02D | NUMERIC | |
| SAE02E | NUMERIC | |
| SAE02F | NUMERIC | |
| SAE03 | NUMERIC | |
| SAE03R | STRING(200) - A200 | |
| SAE04 | NUMERIC | |
| SAE05a | STRING(200) - A200 | |
| SAE05b | STRING(200) - A200 | |
| SAE05c | STRING(200) - A200 | |
| SAE06A | STRING(200) - A200 | |
| SAE06B | STRING(200) - A200 | |
| SAE06C | STRING(200) - A200 | |
| SAE06d | STRING(200) - A200 | |
| SAE06e | STRING(200) - A200 | |

| CDD: ctn0032cdd Table: SAE2 Key Type: PATIENTVISIT | | |
|--|--------------------|-------------|
| Column Name | Column Data Type | Design Note |
| SAE04A | STRING(50) - A50 | |
| SAE04B | STRING(200) - A200 | |
| SAE04C | STRING(200) - A200 | |

| ctn0032 : Protocol Violation Log (PVL) - Repeating Form | | | | | | | | |
|---|-----------|--------------|-----------------------|--|---|-----------------------------|---|--------------|
| # | Staff ID: | Report Date: | 1. Date of violation: | 2. Violation type (Enter code number from Violation Type Code List): | 3. If Other is indicated, please provide the specification: | 4. Description of violation | 5. Has this protocol violation been resolved? | 6. Comments: |
| 1 | | | | | | | | |

To be filled in by person(s) reporting this protocol violation

| | | |
|-----|--|---|
| 1. | Staff ID: | A5 (ctn0032cdd:PVL.PVLID / Staff ID) |
| 2. | Report Date: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:PVL.REPORTD / Protocol report date) |
| 3. | 1. Date of violation: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:PVL.PVL01DT / Protocol violation date) |
| 4. | 2. Violation type (Enter code number from Violation Type Code List): | Pulldown List 1 [v] (ctn0032cdd:PVL.PVL02 / Protocol violation type) |
| 5.* | 3. If Other is indicated, please provide the specification: | A100 (ctn0032cdd:PVL.PVL03 / Specify other violation) |
| 6. | 4. Description of violation: | A200 (ctn0032cdd:PVL.PVL04 / PV description) |
| 7. | 5. Has this protocol violation been resolved? | (ctn0032cdd:PVL.PVL05 / Protocol violation resolved) [0] <input type="radio"/> No [1] <input type="radio"/> Yes If Yes: Indicate resolution/ corrective action taken: A200 (ctn0032cdd:PVL.PVL05SP / PV resolution description) |
| 8.* | 6. Comments: | A200 (ctn0032cdd:PVL.PVL06 / Protocol violation comments) |

* Item is not required

| Pulldown List 1: | | | |
|------------------|--|-------|-------------|
| RefName | Display Text | Value | Design Note |
| iePVL01 | 01 Informed Consent Procedures | 01 | |
| iePVL01A | 01A No consent/assent obtained | 01A | |
| iePVL01C | 01C Invalid/incomplete informed consent | 01C | |
| iePVL01D | 01D Unauthorized assessments and/or procedures conducted prior to obtaining informed consent | 01D | |
| iePVL01E | 01E Other | 01E | |
| iePVL02 | 02 Inclusion/Exclusion Criteria | 02 | |
| iePVL03 | 03 Concomitant Medication/Therapy | 03 | |
| iePVL04 | 04 Lab Assessments/Procedures | 04 | |
| iePVL04A | 04A Required testing not obtained | 04A | |
| iePVL04B | 04B Testing completed outside of window | 04B | |
| iePVL04D | 04D Unauthorized test/procedure obtained | 04D | |
| iePVL04E | 04E Other | 04E | |
| iePVL05 | 05 Study Procedures/Assessments | 05 | |
| iePVL05A | 05A Protocol required procedures not obtained | 05A | |
| iePVL05C | 05C Procedures/Assessments obtained outside of the visit time-frames | 05C | |
| iePVL05D | 05D Other | 05D | |
| iePVL06 | 06 Serious Adverse Event | 06 | |
| iePVL06A | 06A SAE not reported | 06A | |
| iePVL06B | 06B SAE reported out of time window | 06B | |
| iePVL06C | 06C Other | 06C | |
| iePVL07 | 07 Randomization Procedures | 07 | |
| iePVL07A | 07A Randomization procedures not followed | 07A | |
| iePVL07B | 07B Ineligible participant randomized | 07B | |
| iePVL07C | 07C Improper un-blinding procedures | 07C | |

| | | | |
|-----------|---|-----|--|
| iePVL07D | 07D Other | 07D | |
| iePVL07E | 07E Incorrect treatment assignment | 07E | |
| iePVL099 | 99 Other Significant Violations | 99 | |
| iePVL099C | 99C Using advertising materials or brochures without prior IRB approval | 99C | |
| iePVL099D | 99D Other | 99D | |

| CDD: ctn0032cdd Table: PVL Key Type: PATIENTVISIT | | |
|---|---|-------------|
| Column Name | Column Data Type | Design Note |
| PVLID | STRING(5) - A5 | |
| REPORDT | DATE - DDMONYYYY | |
| PVL01DT | DATE - DDMONYYYY | |
| PVL02 | STRING(3) - 01, 01A, 01C, 01D, 01E, 02, 03, 04, 04A, 04B, 04D, 04E, 05, 05A, 05C, 05D, 06, 06A, 06B, 06C, 07, 07A, 07B, 07C, 07D, 07E, 99, 99C, 99D | |
| PVL03 | STRING(100) - A100 | |
| PVL04 | STRING(200) - A200 | |
| PVL05 | NUMERIC | |
| PVL05SP | STRING(200) - A200 | |
| PVL06 | STRING(200) - A200 | |

| ctn0032 : Unscheduled Expected Events (EEU) - Repeating Form | | | | | | | | | | | | |
|--|--|-----------------|-------------|----------------|--|--|------------------------------------|--------------------------------------|------------------------------------|--|-----------------------|--|
| # | 1. Staff ID: | 2. Report Date: | 3. Anxiety: | 4. Depression: | 5. Friends treating participant differently: | 6 Worry about confidentiality | 7. Partner abuse/domestic violence | 8. New unstable housing environments | 9. Increase in substance use/abuse | Type of Substance Used. (check all that apply) | 10. General Comments: | |
| 1 | | | | | | | | | | | | |
| . | | | | | | | | | | | | |
| 1. | 1. Staff ID: | | | | | A5 (ctn0032cdd:EEU.EEU01 / Staff ID) | | | | | | |
| 2. | 2. Report Date: | | | | | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:EEU.EEUURPDT / Report Date) | | | | | | |
| 3.* | 3. Anxiety: | | | | | (ctn0032cdd:EEU.EEU01 / Anxiety) [0] <input type="radio"/> No [1] <input type="radio"/> Yes-- Complete Frequency and Severity: (ctn0032cdd:EEU.EEU02 / Freq. of anxiety) Frequency [1] <input type="radio"/> Once or more/day [2] <input type="radio"/> 2-6 times/week [3] <input type="radio"/> Once/week [4] <input type="radio"/> 1-3 times/month [5] <input type="radio"/> Less than once a month (ctn0032cdd:EEU.EEU03 / Severity of anxiety) Severity [1] <input type="radio"/> Mild [2] <input type="radio"/> Moderate [3] <input type="radio"/> Severe [4] <input type="radio"/> Life Threatenings--Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EEU.EEU03a / Anxiety explain life threat) [5] <input type="radio"/> Deaths-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EEU.EEU03b / Anxiety explain death) | | | | | | |
| 4.* | 4. Depression: | | | | | (ctn0032cdd:EEU.EEU04 / Depression) [0] <input type="radio"/> No [1] <input type="radio"/> Yes-- Complete Frequency and Severity: (ctn0032cdd:EEU.EEU05 / Freq. of depression) Frequency [1] <input type="radio"/> Once or more/day [2] <input type="radio"/> 2-6 times/week [3] <input type="radio"/> Once/week [4] <input type="radio"/> 1-3 times/month [5] <input type="radio"/> Less than once a month (ctn0032cdd:EEU.EEU06 / Severity of depression) Severity [1] <input type="radio"/> Mild [2] <input type="radio"/> Moderate [3] <input type="radio"/> Severe [4] <input type="radio"/> Life Threatenings-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EEU.EEU06a / Depress explain life threat) [5] <input type="radio"/> Deaths-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EEU.EEU06b / Depress explain death) | | | | | | |
| 5.* | 5. Friends treating participant differently: | | | | | (ctn0032cdd:EEU.EEU07 / Friends treat differ.) [0] <input type="radio"/> No [1] <input type="radio"/> Yes-- Complete Frequency and Severity: (ctn0032cdd:EEU.EEU08 / Freq. friends treat differ) Frequency [1] <input type="radio"/> Once or more/day [2] <input type="radio"/> 2-6 times/week [3] <input type="radio"/> Once/week [4] <input type="radio"/> 1-3 times/month (ctn0032cdd:EEU.EEU09 / Severity friends differ.) Severity [1] <input type="radio"/> Mild [2] <input type="radio"/> Moderate [3] <input type="radio"/> Severe [4] <input type="radio"/> Life Threatenings-- Complete SAE form | | | | | | |

| | | |
|------|--|---|
| | | <p>Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EEU.EEU09a / Friends explain life threat)</p> <p>[5] <input type="radio"/> Deaths-- Complete SAE form</p> <p>Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EEU.EEU09b / Friends explain death)</p> |
| 6.* | 6. Worry about confidentiality: | <p>(ctn0032cdd:EEU.EEU10 / Confidentiality)</p> <p>[0] <input type="radio"/> No</p> <p>[1] <input type="radio"/> Yes-- Complete Frequency and Severity: (ctn0032cdd:EEU.EEU11 / Freq. of confidentiality)</p> <p>Frequency [1] <input type="radio"/> Once or more/day [2] <input type="radio"/> 2-6 times/week [3] <input type="radio"/> Once/week [4] <input type="radio"/> 1-3 times/month</p> <p>(ctn0032cdd:EEU.EEU12 / Severity of confid.)</p> <p>Severity [1] <input type="radio"/> Mild [2] <input type="radio"/> Moderate [3] <input type="radio"/> Severe</p> <p>[4] <input type="radio"/> Life Threatenings-- Complete SAE form</p> <p>Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EEU.EEU12a / Explain life threat)</p> <p>[5] <input type="radio"/> Deaths-- Complete SAE form</p> <p>Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EEU.EEU12b / Confident explain death)</p> |
| 7.* | 7. Partner abuse/domestic violence: | <p>(ctn0032cdd:EEU.EEU13 / Domestic violence)</p> <p>[0] <input type="radio"/> No</p> <p>[1] <input type="radio"/> Yes-- Complete Frequency and Severity: (ctn0032cdd:EEU.EEU14 / Freq. of violence)</p> <p>Frequency [1] <input type="radio"/> Once or more/day [2] <input type="radio"/> 2-6 times/week [3] <input type="radio"/> Once/week [4] <input type="radio"/> 1-3 times/month</p> <p>(ctn0032cdd:EEU.EEU15 / Severity of violence)</p> <p>Severity [1] <input type="radio"/> Mild [2] <input type="radio"/> Moderate [3] <input type="radio"/> Severe</p> <p>[4] <input type="radio"/> Life Threatenings-- Complete SAE form</p> <p>Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EEU.EEU15a / Viol explain life threat)</p> <p>[5] <input type="radio"/> Deaths-- Complete SAE form</p> <p>Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EEU.EEU15b / Viol explain death)</p> |
| 8.* | 8. New unstable housing environments: | <p>(ctn0032cdd:EEU.EEU16 / Unstable housing)</p> <p>[0] <input type="radio"/> No</p> <p>[1] <input type="radio"/> Yes</p> <p>Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EEU.EEU16a / Unstable house explanation)</p> |
| 9.* | 9. Increase in substance use/abuse: | <p>(ctn0032cdd:EEU.EEU17 / Sub Abuse)</p> <p>[0] <input type="radio"/> No</p> <p>[1] <input type="radio"/> Yes-- Complete Frequency: (ctn0032cdd:EEU.EEU18 / Frequency of sub. Abuse)</p> <p>Frequency [1] <input type="radio"/> Once or more/day [2] <input type="radio"/> 2-6 times/week [3] <input type="radio"/> Once/week [4] <input type="radio"/> 1-3 times/month</p> |
| 10.* | 10. Type of Substance Used. (check all that apply) | <p>(ctn0032cdd:EEU.EEU19a / Alcohol)</p> <p>[1] <input type="checkbox"/> Alcohol</p> <p>(ctn0032cdd:EEU.EEU19b / Ecstasy)</p> <p>[1] <input type="checkbox"/> Ecstasy (E, X, MDMA)</p> <p>(ctn0032cdd:EEU.EEU19c / GHB)</p> <p>[1] <input type="checkbox"/> GHB (gamma hydroxybuturic acid, G, GBL)</p> <p>(ctn0032cdd:EEU.EEU19d / Heroin)</p> <p>[1] <input type="checkbox"/> Heroin</p> |

| | | |
|------------------------|-----------------------|--|
| | | <input type="checkbox"/> (ctn0032cdd:EEU.EEU19e / Marijuana) [1] <input type="checkbox"/> Marijuana (ctn0032cdd:EEU.EEU19f / Methamphetamine) [1] <input type="checkbox"/> Methamphetamines, other amphetamine (Crystal Meth, Speed, Tina) (ctn0032cdd:EEU.EEU19g / Hallucinogens) [1] <input type="checkbox"/> Other hallucinogens (LSD, mushrooms, peyote, mescaline) (ctn0032cdd:EEU.EEU19h / PCP) [1] <input type="checkbox"/> PCP (Angel Dust, wet, wicky sticks) (ctn0032cdd:EEU.EEU19i / Poppers) [1] <input type="checkbox"/> Poppers (amyl nitrate) (ctn0032cdd:EEU.EEU19j / Cocaine) [1] <input type="checkbox"/> Powdered cocaine (ctn0032cdd:EEU.EEU19ja / Rock cocaine) [1] <input type="checkbox"/> Rock or crack cocaine (ctn0032cdd:EEU.EEU19k / Ketamine) [1] <input type="checkbox"/> Ketamine (Special K, K) (ctn0032cdd:EEU.EEU19l / Rec Drugs) [1] <input type="checkbox"/> Recreational use of prescription drugs or pain killers to get high (Codeine, Vicodin or Hydrocodone, Percocet, Darvon, Oxycontin or Oxycodone, Demerol, Dilaudid) (ctn0032cdd:EEU.EEU19m / Tranquilizers) [1] <input type="checkbox"/> Tranquilizers or barbituates (Valium, Librium, Seconal, Xanax, Ambien, Lorazepam, Rohypnol/Roofies) (ctn0032cdd:EEU.EEU19n / Viagra) [1] <input type="checkbox"/> Viagra or similar drugs (Levitra, Cialis) |
| 11.* | 10. General Comments: | <input type="text" value="A200"/> (ctn0032cdd:EEU.EEU20 / General Comments) |
| * Item is not required | | |

| CDD: ctn0032cdd Table: EEU Key Type: PATIENTVISIT | | |
|---|--------------------|-------------|
| Column Name | Column Data Type | Design Note |
| EEUID | STRING(5) - A5 | |
| EEUURPDT | DATE - DDMONYYYY | |
| EEU01 | NUMERIC | |
| EEU02 | NUMERIC | |
| EEU03 | NUMERIC | |
| EEU03a | STRING(200) - A200 | |
| EEU03b | STRING(200) - A200 | |
| EEU04 | NUMERIC | |
| EEU05 | NUMERIC | |
| EEU06 | NUMERIC | |
| EEU06a | STRING(200) - A200 | |
| EEU06b | STRING(200) - A200 | |
| EEU07 | NUMERIC | |
| EEU08 | NUMERIC | |
| EEU09 | NUMERIC | |
| EEU09a | STRING(200) - A200 | |
| EEU09b | STRING(200) - A200 | |
| EEU10 | NUMERIC | |
| EEU11 | NUMERIC | |
| EEU12 | NUMERIC | |
| EEU12a | STRING(200) - A200 | |
| EEU12b | STRING(200) - A200 | |
| EEU13 | NUMERIC | |
| EEU14 | NUMERIC | |
| EEU15 | NUMERIC | |
| EEU15a | STRING(200) - A200 | |
| EEU15b | STRING(200) - A200 | |
| | | |

| | | |
|---------|--------------------|--|
| EEU16 | NUMERIC | |
| EEU16a | STRING(200) - A200 | |
| EEU17 | NUMERIC | |
| EEU18 | NUMERIC | |
| EEU19a | NUMERIC | |
| EEU19b | NUMERIC | |
| EEU19c | NUMERIC | |
| EEU19d | NUMERIC | |
| EEU19e | NUMERIC | |
| EEU19f | NUMERIC | |
| EEU19g | NUMERIC | |
| EEU19h | NUMERIC | |
| EEU19i | NUMERIC | |
| EEU19j | NUMERIC | |
| EEU19ja | NUMERIC | |
| EEU19k | NUMERIC | |
| EEU19l | NUMERIC | |
| EEU19m | NUMERIC | |
| EEU19n | NUMERIC | |
| EEU20 | STRING(200) - A200 | |

| ctn0032 : Screening/Randomization Status (SRST) | |
|--|---|
| Status | |
| 1. Screening / Randomization Status [<i>read-only</i>] | A4 (ctn0032cdd:SRST.EVCD / IVRS Status) |

| CDD: ctn0032cdd Table: SRST Key Type: PATIENTVISIT | | |
|--|------------------|-------------|
| Column Name | Column Data Type | Design Note |
| EVCD | STRING(4) - A4 | |

| ctn0032 : Screen Failure/Demographics (DEM2) | |
|---|--|
| 1. 1. What is participant's age range? <i>[read-only]</i> | (ctn0032cdd:DEM2.DEM201 / Subject age range) [1] <input type="radio"/> <18 [2] <input type="radio"/> 18-29 [3] <input type="radio"/> 30-39 [4] <input type="radio"/> 40-49 [5] <input type="radio"/> 50-59 [6] <input type="radio"/> 60-69 [7] <input type="radio"/> >69 |
| 2. 2. What is participant's gender? <i>[read-only]</i> | (ctn0032cdd:DEM2.DEM202) [1] <input type="radio"/> Male [2] <input type="radio"/> Female |
| 3. 3. Ethnicity: <i>[read-only]</i> | (ctn0032cdd:DEM2.DEM203) [1] <input type="radio"/> Hispanic or Latino-- If Hispanic or Latino: Which best describes your ethnic background? (ctn0032cdd:DEM2.DEM203a) [1] <input type="radio"/> Mexican, Mexican-American, Chicano [2] <input type="radio"/> Puerto Rican [3] <input type="radio"/> Cuban [4] <input type="radio"/> Other [2] <input type="radio"/> Not Hispanic or Latino [98] <input type="radio"/> Participant chooses not to answer |
| 4. 4. Race: <i>[read-only]</i> | (ctn0032cdd:DEM2.DEM204a) [1] <input type="checkbox"/> American Indian or Alaska Native (ctn0032cdd:DEM2.DEM204b) [1] <input type="checkbox"/> Asian (ctn0032cdd:DEM2.DEM204c) [1] <input type="checkbox"/> Black or African American (ctn0032cdd:DEM2.DEM204d) [1] <input type="checkbox"/> Native Hawaiian/Pacific Islander (ctn0032cdd:DEM2.DEM204e) [1] <input type="checkbox"/> White (ctn0032cdd:DEM2.DEM204f) [1] <input type="checkbox"/> Other |

CDD: ctn0032cdd Table: DEM2 Key Type: PATIENTVISIT

| Column Name | Column Data Type | Design Note |
|-------------|------------------|-------------|
| DEM201 | NUMERIC | |
| DEM202 | NUMERIC | |
| DEM203 | NUMERIC | |
| DEM203a | NUMERIC | |
| DEM204a | NUMERIC | |
| DEM204b | NUMERIC | |
| DEM204c | NUMERIC | |
| DEM204d | NUMERIC | |
| DEM204e | NUMERIC | |
| DEM204f | NUMERIC | |

| ctn0032 : Screening Failure/Eligibility Criteria (ELG2) | | |
|---|---|---|
| 1. | 1. Staff ID: | A5 (ctn0032cdd:ELG2.ELG2ID / Staff ID) |
| 2. | 2. Individual is at least 18 years old. | (ctn0032cdd:ELG2.ELG201) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 3. | 3. Individual's HIV status is negative or unknown. | (ctn0032cdd:ELG2.ELG202) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 4. | 4. Individual has not received results of an HIV test that was performed within the past 12 months. | (ctn0032cdd:ELG2.ELG203) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 5. | 5. Individual is able and willing to provide informed consent. | (ctn0032cdd:ELG2.ELG204) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 6. | 6. Individual is fluent in English. | (ctn0032cdd:ELG2.ELG205) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 7. | 7. Individual provided locator information only after Informed Consent. | (ctn0032cdd:ELG2.ELG206) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 8. | 8. Individual is willing to sign a release form that allows abstraction of HIV testing records to corroborate self-report of testing, receipt of results, and HIV status follow-up. | (ctn0032cdd:ELG2.ELG207) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 9. | 9. Individual successfully completed ACASI? | (ctn0032cdd:ELG2.ELG208) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 10. | 10. Was participant eligible for the study? <i>[read-only]</i> | (ctn0032cdd:ELG2.ELG209) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |

| Column Name | Column Data Type | Design Note |
|-------------|------------------|-------------|
| ELG2ID | STRING(5) - A5 | |
| ELG201 | NUMERIC | |
| ELG202 | NUMERIC | |
| ELG203 | NUMERIC | |
| ELG204 | NUMERIC | |
| ELG205 | NUMERIC | |
| ELG206 | NUMERIC | |
| ELG207 | NUMERIC | |
| ELG208 | NUMERIC | |
| ELG209 | NUMERIC | |

| ctn0032 : HIV/Hepatitis Status (HHE) | | |
|--------------------------------------|---|---|
| 1. | 1. Staff ID: | A5 (ctn0032cdd:HHE.HHE01 / Staff ID) |
| 2. | 2. Was this the first time that participant was interviewed to see if he/she was eligible to take part in this study? | (ctn0032cdd:HHE.HHE02 / First time interviewed) [0] <input type="radio"/> No-- What was the outcome? (ctn0032cdd:HHE.HHE02a / Interview Outcome) [1] <input type="radio"/> Determined participant not eligible at that time [2] <input type="radio"/> Determined participant eligible, but not able to complete the enrollment forms at that time [1] <input type="radio"/> Yes |
| 3. | 3. Has participant ever injected any drug? | (ctn0032cdd:HHE.HHE03 / Participt ever inject) [0] <input type="radio"/> No [1] <input type="radio"/> Yes (ctn0032cdd:HHE.HHE04 / Participt inject past 12 mos) Has participant injected any drug in the past 12 months? [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 4. | 4. When was the last time participant was tested for HIV? | (ctn0032cdd:HHE.HHE05) [1] <input type="radio"/> In the last 12 months (1 year) [2] <input type="radio"/> More than a year ago but less than or equal to 2 years ago (ctn0032cdd:HHE.HHE05a / Tested more than a year) Did you receive the results of your last HIV test? [0] <input type="radio"/> No [1] <input type="radio"/> Yes [3] <input type="radio"/> More than 2 years ago but less than or equal to 5 years ago (ctn0032cdd:HHE.HHE05b / Tested more than 2 yrs) Did you receive the results of your last HIV test? [0] <input type="radio"/> No [1] <input type="radio"/> Yes [4] <input type="radio"/> More than 5 years ago (ctn0032cdd:HHE.HHE05c / Tested more than 5 yrs) Did you receive the results of your last HIV test? [0] <input type="radio"/> No [1] <input type="radio"/> Yes [5] <input type="radio"/> Refused to answer [6] <input type="radio"/> Don't know [7] <input type="radio"/> Never |
| 5.* | 5. If participant was tested for HIV, where was participant tested? (check all that apply) | (ctn0032cdd:HHE.HHE06a / Needle Exch pgm) [1] <input type="checkbox"/> Needle exchange program (ctn0032cdd:HHE.HHE06b / Mobile outreach) [1] <input type="checkbox"/> HIV/AIDS street outreach program/mobile unit (ctn0032cdd:HHE.HHE06c / HIV Specialty Clinic) [1] <input type="checkbox"/> Adult HIV/AIDS specialty clinic (ctn0032cdd:HHE.HHE06d / STD clinic) [1] <input type="checkbox"/> Sexually transmitted disease clinic (ctn0032cdd:HHE.HHE06e / Comm. hith center) [1] <input type="checkbox"/> Community health center/public health clinic (ctn0032cdd:HHE.HHE06f / Family Plan) [1] <input type="checkbox"/> Family planning clinic (ctn0032cdd:HHE.HHE06g / Prenatal/Obstetrics clinic) [1] <input type="checkbox"/> Prenatal/obstetrics clinic (ctn0032cdd:HHE.HHE06h / Counsel\Test Site) [1] <input type="checkbox"/> HIV counseling and testing site (ctn0032cdd:HHE.HHE06i / Outpatient facility) [1] <input type="checkbox"/> Other outpatient facility (ctn0032cdd:HHE.HHE06j / Inpatient hospital) [1] <input type="checkbox"/> Hospital (inpatient) (ctn0032cdd:HHE.HHE06k / Emergency room) [1] <input type="checkbox"/> Emergency room (ctn0032cdd:HHE.HHE06l / Drug trtmt pgm) [1] <input type="checkbox"/> Drug Treatment program (ctn0032cdd:HHE.HHE06m / Dr Office) [1] <input type="checkbox"/> Private doctors office (including HMO) (ctn0032cdd:HHE.HHE06n / Correctional facility) [1] <input type="checkbox"/> Correctional facility (jail or prison) |

| | | |
|------------------------|---|--|
| | | (ctn0032cdd:HHE.HHE06o / BB/Plasma center) [1] <input type="checkbox"/> Blood bank/plasma center (ctn0032cdd:HHE.HHE06p / Military) [1] <input type="checkbox"/> Military (ctn0032cdd:HHE.HHE06q / Home) [1] <input type="checkbox"/> At home (ctn0032cdd:HHE.HHE06r / Other) [1] <input type="checkbox"/> Other (ctn0032cdd:HHE.HHE06s / Refused) [1] <input type="checkbox"/> Refused (ctn0032cdd:HHE.HHE06t / Unknown) [1] <input type="checkbox"/> Don't know |
| 6.* | 6. If participant was tested for HIV, was test positive? | (ctn0032cdd:HHE.HHE07 / HIV Test Results) [0] <input type="radio"/> No [1] <input type="radio"/> Yes [5] <input type="radio"/> Refused to answer [6] <input type="radio"/> Don't know |
| 7. | 6a. Was the participant vaccinated for Hepatitis B? | (ctn0032cdd:HHE.HHE07a / Hep B vaccine) [0] <input type="radio"/> No [1] <input type="radio"/> Yes -- Skip to Question 9 [5] <input type="radio"/> Refused to answer [6] <input type="radio"/> Don't know |
| 8.* | 7. When was the last time participant was tested for Hepatitis B? | (ctn0032cdd:HHE.HHE08) [1] <input type="radio"/> In the last 12 months (1 year) [2] <input type="radio"/> More than a year ago but less than or equal to 2 years ago [3] <input type="radio"/> More than 2 years ago but less than or equal to 5 years ago [4] <input type="radio"/> More than 5 years ago [5] <input type="radio"/> Refused to answer [6] <input type="radio"/> Don't know [7] <input type="radio"/> Never |
| 9.* | 8. If participant was tested for Hepatitis B, was test positive? | (ctn0032cdd:HHE.HHE09 / Hepatitis B Test Results) [0] <input type="radio"/> No [1] <input type="radio"/> Yes [5] <input type="radio"/> Refused to answer [6] <input type="radio"/> Don't know |
| 10. | 9. When was the last time participant was tested for Hepatitis C? | (ctn0032cdd:HHE.HHE10 / Hep C Testing) [1] <input type="radio"/> In the last 12 months (1 year) [2] <input type="radio"/> More than a year ago but less than or equal to 2 years ago [3] <input type="radio"/> More than 2 years ago but less than or equal to 5 years ago [4] <input type="radio"/> More than 5 years ago [5] <input type="radio"/> Refused to answer [6] <input type="radio"/> Don't know [7] <input type="radio"/> Never |
| 11.* | 10. If participant was tested for Hepatitis C, was test positive? | (ctn0032cdd:HHE.HHE11 / Hepatitis C Test Results) [0] <input type="radio"/> No [1] <input type="radio"/> Yes [5] <input type="radio"/> Refused to answer [6] <input type="radio"/> Don't know |
| * Item is not required | | |

CDD: ctn0032cdd Table: HHE Key Type: PATIENTVISIT

| Column Name | Column Data Type | Design Note |
|-------------|------------------|-------------|
| HHE01 | STRING(5) - A5 | |
| HHE02 | NUMERIC | |
| HHE02a | NUMERIC | |
| HHE03 | NUMERIC | |
| HHE04 | NUMERIC | |
| HHE05 | NUMERIC | |
| HHE05a | NUMERIC | |
| HHE05b | NUMERIC | |

| | | |
|--------|---------|--|
| HHE05c | NUMERIC | |
| HHE06a | NUMERIC | |
| HHE06b | NUMERIC | |
| HHE06c | NUMERIC | |
| HHE06d | NUMERIC | |
| HHE06e | NUMERIC | |
| HHE06f | NUMERIC | |
| HHE06g | NUMERIC | |
| HHE06h | NUMERIC | |
| HHE06i | NUMERIC | |
| HHE06j | NUMERIC | |
| HHE06k | NUMERIC | |
| HHE06l | NUMERIC | |
| HHE06m | NUMERIC | |
| HHE06n | NUMERIC | |
| HHE06o | NUMERIC | |
| HHE06p | NUMERIC | |
| HHE06q | NUMERIC | |
| HHE06r | NUMERIC | |
| HHE06s | NUMERIC | |
| HHE06t | NUMERIC | |
| HHE07 | NUMERIC | |
| HHE07a | NUMERIC | |
| HHE08 | NUMERIC | |
| HHE09 | NUMERIC | |
| HHE10 | NUMERIC | |
| HHE11 | NUMERIC | |

| ctn0032 : Written Informed Consent (WIC) | |
|---|---|
| 1. Staff ID: | A5 (ctn0032cdd:WIC.WIC01 / STAFF ID) |
| 2. Was Informed Consent obtained? | <p>(ctn0032cdd:WIC.WIC02 / IC obtained)</p> <p>[0] <input type="radio"/> (ctn0032cdd:WIC.WIC02a / Reason no IC) No-- Provide reason:</p> <p>[1] <input type="radio"/> Ineligible due to screening criteria (1-7)</p> <p>[2] <input type="radio"/> Participant's decision/changed mind</p> <p>[3] <input type="radio"/> Judgement of CTP Staff (specify): <input type="text" value="A200"/> (ctn0032cdd:WIC.WIC02sp / CTP specify)</p> <p>[4] <input type="radio"/> Failed to return to study</p> <p>[5] <input type="radio"/> Failed to return to treatment program</p> <p>[6] <input type="radio"/> Unable to complete ICF in appointed visit schedule</p> <p>[7] <input type="radio"/> Other (specify): <input type="text" value="A200"/> (ctn0032cdd:WIC.WIC02rs / Specify other)</p> <p>[1] <input type="radio"/> Yes: Provide date Req <input type="text" value=""/> / Req <input type="text" value=""/> / Req <input type="text" value=""/> (2008-2012) (ctn0032cdd:WIC.WICDT / IC date)</p> |
| 3. Did participant successfully complete ACASI? | <p>(ctn0032cdd:WIC.WIC03 / ACASI completed)</p> <p>[0] <input type="radio"/> (ctn0032cdd:WIC.WIC03a / Reason no ACASI completed) No-- Provide reason</p> <p>[1] <input type="radio"/> ACASI never started</p> <p>[2] <input type="radio"/> Participant's decision/changed mind</p> <p>[3] <input type="radio"/> Judgement of CTP Staff (specify): <input type="text" value="A200"/> (ctn0032cdd:WIC.WIC03sp / Specify other)</p> <p>[4] <input type="radio"/> Failed to return to study</p> <p>[5] <input type="radio"/> Failed to return to treatment program</p> <p>[6] <input type="radio"/> Unable to complete ACASI in appointed visit schedule</p> <p>[7] <input type="radio"/> Become ineligible due to ACASI response</p> <p>[8] <input type="radio"/> Other (specify): <input type="text" value="A200"/> (ctn0032cdd:WIC.WIC03rs / Specify other)</p> <p>If No: STOP here. Participant ineligible to be randomized</p> <p>[1] <input type="radio"/> Yes</p> |
| 4.* 4. If participant was eligible but failed to randomize, provide reason. | <p>(ctn0032cdd:WIC.WIC04 / Reason failed to randomize)</p> <p>[1] <input type="radio"/> Withdrew consent</p> <p>[2] <input type="radio"/> Participant's decision/changed mind</p> <p>[3] <input type="radio"/> Judgement of CTP Staff (specify): <input type="text" value="A200"/> (ctn0032cdd:WIC.WIC04sp / Specify other)</p> <p>[4] <input type="radio"/> Failed to return to study</p> <p>[5] <input type="radio"/> Failed to return to treatment program</p> <p>[6] <input type="radio"/> Other (specify): <input type="text" value="A200"/> (ctn0032cdd:WIC.WIC04rs / Specify other)</p> |
| * Item is not required | |

| Column Name | Column Data Type | Design Note |
|-------------|--------------------|-------------|
| WIC01 | STRING(5) - A5 | |
| WIC02 | NUMERIC | |
| WIC02a | NUMERIC | |
| WIC02sp | STRING(200) - A200 | |
| WIC02rs | STRING(200) - A200 | |
| WICDT | DATE - DDMONYYYY | |
| WIC03 | NUMERIC | |

| | | |
|---------|--------------------|--|
| WIC03a | NUMERIC | |
| WIC03sp | STRING(200) - A200 | |
| WIC03rs | STRING(200) - A200 | |
| WIC04 | NUMERIC | |
| WIC04sp | STRING(200) - A200 | |
| WIC04rs | STRING(200) - A200 | |

| ctn0032 : Demographics (DEM) | |
|---|--|
| 1. 1. Date of Birth: | Req <input type="text"/> / Req <input type="text"/> / Req <input type="text"/> (1900-1990) (ctn0032cdd:DEM.DEM01DT / Subject date of birth) |
| 2. 2. What is the participant's gender? [read-only] | (ctn0032cdd:DEM.DEM02 / Subject gender) [1] <input type="radio"/> Male [2] <input type="radio"/> Female |
| 3. 3. Ethnicity: [read-only] | (ctn0032cdd:DEM.DEM03 / Subject ethnicity) [1] <input type="radio"/> Hispanic or Latino-- If Hispanic or Latino: Which best describes your ethnic background? (ctn0032cdd:DEM.DEM03a / Subject ethnic background) [1] <input type="radio"/> Mexican, Mexican-American, Chicano [2] <input type="radio"/> Puerto Rican [3] <input type="radio"/> Cuban [4] <input type="radio"/> Other [2] <input type="radio"/> Not Hispanic or Latino [98] <input type="radio"/> Participant chooses not to answer |
| 4. 4. Race: [read-only] | (ctn0032cdd:DEM.DEM04a / American Indian) [1] <input type="checkbox"/> American Indian or Alaska Native (ctn0032cdd:DEM.DEM04b / Asian) [1] <input type="checkbox"/> Asian (ctn0032cdd:DEM.DEM04c / African American) [1] <input type="checkbox"/> Black or African American (ctn0032cdd:DEM.DEM04d / Native Hawaiian) [1] <input type="checkbox"/> Native Hawaiian/Pacific Islander (ctn0032cdd:DEM.DEM04e / Caucasian) [1] <input type="checkbox"/> White (ctn0032cdd:DEM.DEM04f / Other) [1] <input type="checkbox"/> Other |

CDD: ctn0032cdd Table: DEM Key Type: PATIENTVISIT

| Column Name | Column Data Type | Design Note |
|-------------|------------------|-------------|
| DEM01DT | DATE - DDMONYYYY | |
| DEM02 | NUMERIC | |
| DEM03 | NUMERIC | |
| DEM03a | NUMERIC | |
| DEM04a | NUMERIC | |
| DEM04b | NUMERIC | |
| DEM04c | NUMERIC | |
| DEM04d | NUMERIC | |
| DEM04e | NUMERIC | |
| DEM04f | NUMERIC | |

| ctn0032 : Screening Visit/Eligibility Criteria (ELG) | | |
|--|---|--|
| 1. | 1. Visit Date: | Req <input type="checkbox"/> / Req <input type="checkbox"/> / Req <input type="checkbox"/> (2008-2012) (ctn0032cdd:ELG.ELGDT / Visit date) |
| 2. | 2. Staff ID: | A5 (ctn0032cdd:ELG.ELGID / Staff ID) |
| 3. | 3. Individual is at least 18 years old. | (ctn0032cdd:ELG.ELG01 / Subject >= 18 years old) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 4. | 4. Individual's HIV status is negative or unknown. | (ctn0032cdd:ELG.ELG02 / HIV status negative/unk.) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 5. | 5. Individual has NOT received results from an HIV test that was performed within the past 12 months. | (ctn0032cdd:ELG.ELG03 / results received) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 6. | 6. Individual is able and willing to provide informed consent. | (ctn0032cdd:ELG.ELG04 / able to provide IC) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 7. | 7. Individual is fluent in English. | (ctn0032cdd:ELG.ELG05 / english) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 8. | 8. Individual provided locator information only after Informed Consent. | (ctn0032cdd:ELG.ELG06 / locator information) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 9. | 9. Individual is willing to sign a release form that allows abstraction of HIV testing records to corroborate self-report of testing, receipt of results, and HIV status follow-up. | (ctn0032cdd:ELG.ELG07 / release form) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 10. | 10. Individual successfully completed ACASI? | (ctn0032cdd:ELG.ELG08 / ACASI completed) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| 11.* | 11. Was participant eligible for the study? [read-only] | (ctn0032cdd:ELG.ELG09 / eligible) [0] <input type="radio"/> No [1] <input type="radio"/> Yes |
| * Item is not required | | |

| Column Name | Column Data Type | Design Note |
|-------------|------------------|-------------|
| ELGDT | DATE - DDMYYYY | |
| ELGID | STRING(5) - A5 | |
| ELG01 | NUMERIC | |
| ELG02 | NUMERIC | |
| ELG03 | NUMERIC | |
| ELG04 | NUMERIC | |
| ELG05 | NUMERIC | |
| ELG06 | NUMERIC | |
| ELG07 | NUMERIC | |
| ELG08 | NUMERIC | |
| ELG09 | NUMERIC | |

| ctn0032 : Randomization (RAN) | |
|---|---|
| 1. 1. Visit Date: | Req <input type="checkbox"/> / Req <input type="checkbox"/> / Req <input type="checkbox"/> (2008-2012) (ctn0032cdd:RAN.RAN01VDT / RAN visit date) |
| 2. 2. Date of Randomization: [<i>read-only</i>] | Req <input type="checkbox"/> / Req <input type="checkbox"/> / Req <input type="checkbox"/> (2008-2012) (ctn0032cdd:RAN.RAN02DT / Randomization date) |
| 3. 3. IVRS Randomization number [<i>hidden</i>] | A5 (ctn0032cdd:RAN.RAN03 / Ran. Scheme sequence number) |
| 4. 4. IVRS treatment assignment: [<i>read-only</i>] | (ctn0032cdd:RAN.RAN04 / Randomized treatment) [1] <input type="radio"/> Group 1-Onsite rapid HIV testing with RESPECT-2 counseling [2] <input type="radio"/> Group 2-Onsite rapid HIV testing with information only [3] <input type="radio"/> Group 3-Referral for offsite HIV testing |
| 5. 5. Randomization Strata: [<i>hidden</i>] | (ctn0032cdd:RAN.RAN05 / Randomization strata) [1] <input type="radio"/> African American Males [2] <input type="radio"/> African American Females [3] <input type="radio"/> Hispanic Males [4] <input type="radio"/> Hispanic Females [5] <input type="radio"/> European American Males [6] <input type="radio"/> European American Females [7] <input type="radio"/> Other Males [8] <input type="radio"/> Other Females |
| 6. 6. Has a protocol violation been identified regarding this participant since this participant was enrolled (signed ICF)? | (ctn0032cdd:RAN.RAN06 / Protocol violation) [0] <input type="radio"/> No [1] <input type="radio"/> Yes (Complete Protocol Violation Log) |

CDD: ctn0032cdd Table: RAN Key Type: PATIENTVISIT

| Column Name | Column Data Type | Design Note |
|-------------|------------------|-------------|
| RAN01VDT | DATE - DDMONYYYY | |
| RAN02DT | DATE - DDMONYYYY | |
| RAN03 | STRING(5) - A5 | |
| RAN04 | NUMERIC | |
| RAN05 | NUMERIC | |
| RAN06 | NUMERIC | |

| ctn0032 : Group 1 HIV Informed Consent Respect -2 Counseling (HIVG1) | | |
|--|--|--|
| 1. | 1. Staff ID: | A5 (ctn0032cdd:HIVG1.H101 / STAFF ID) |
| 2. | 2. Was initial (RESPECT-2 counseling) session of intervention conducted? | <p>(ctn0032cdd:HIVG1.H102 / Initial session conducted)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVG1.H102a / Reason init. not conducted) [1] <input type="radio"/> Participant's decision/changed mind [2] <input type="radio"/> Judgement of CTP Staff (specify): (ctn0032cdd:HIVG1.H102sp / Specify judge CTP) <input type="text" value="A200"/> [3] <input type="radio"/> Failed to return to study [4] <input type="radio"/> Failed to return to treatment program [5] <input type="radio"/> Unable to complete intervention in appointed visit schedule [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVG1.H102rs / Specify other reason) <input type="text" value="A200"/></p> <p>[1] <input type="radio"/> Yes-- Complete date and time: Initial Session start date and time: Req <input type="text" value=""/> / Req <input type="text" value=""/> / Req <input type="text" value=""/> (2008-2012) (ctn0032cdd:HIVG1.H102sdm / Init. session start datetime) Req <input type="text" value=""/> : Req <input type="text" value=""/> 24-hour clock Initial Session end date and time: Req <input type="text" value=""/> / Req <input type="text" value=""/> / Req <input type="text" value=""/> (2008-2012) (ctn0032cdd:HIVG1.H102edtm / Init session end datetime) Req <input type="text" value=""/> : Req <input type="text" value=""/> 24-hour clock</p> |
| 3. | 3. Did participant accept offer of rapid HIV testing? | <p>(ctn0032cdd:HIVG1.H103 / Rapid HIV offer accepted)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVG1.H103a / Reason offer not accepted) [1] <input type="radio"/> Participant stated: not ready [2] <input type="radio"/> Participant stated: will think about it [3] <input type="radio"/> Participant stated: scared of getting test [4] <input type="radio"/> Participant stated: scared of getting results [5] <input type="radio"/> Participant stated: did not have time [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVG1.H103sp / Specify other reason) <input type="text" value="A200"/> If No: STOP here, form complete</p> <p>[1] <input type="radio"/> Yes</p> |
| 4. | 4. Did participant sign HIV Informed Consent for rapid HIV testing? | <p>(ctn0032cdd:HIVG1.H104 / HIV ICF signed)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVG1.H104a / Reason HIV ICF not signed) [1] <input type="radio"/> Participant stated: changed mind [2] <input type="radio"/> Participant stated: did not have time [3] <input type="radio"/> Participant stated: wants to think about getting tested [5] <input type="radio"/> Participant stated: not ready to be tested [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVG1.H104sp / Specify other reason) <input type="text" value="A200"/> If No: STOP here, form complete</p> <p>[1] <input type="radio"/> Yes-- Provide date: Req <input type="text" value=""/> / Req <input type="text" value=""/> / Req <input type="text" value=""/> (2008-2012) (ctn0032cdd:HIVG1.H104dt / HIV ICF date)</p> |
| 5. | 5. Was (RESPECT-2 counseling) results session of intervention conducted? | <p>(ctn0032cdd:HIVG1.H105 / Result session conducted)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVG1.H105a / Reason result not conducted) [1] <input type="radio"/> Participant's decision/changed mind [2] <input type="radio"/> Judgement of CTP Staff (specify): (ctn0032cdd:HIVG1.H105sp / Specify judge CTP) <input type="text" value="A200"/> [3] <input type="radio"/> Failed to return to study [4] <input type="radio"/> Failed to return to treatment program [5] <input type="radio"/> Unable to complete intervention in appointed visit schedule [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVG1.H105rs / Specify other reason) <input type="text" value="A200"/></p> |

[1] Yes-- Complete date and time:

Results Session start date and time:

Req / Req / Req (2008-2012) (ctn0032cdd:HIVG1.H105sdtm / Res session start datetime)

Req : Req 24-hour clock

Results Session end date and time:

Req / Req / Req (2008-2012) (ctn0032cdd:HIVG1.H105edtm / Res session end datetime)

Req : Req 24-hour clock

* Item is not required

| Column Name | Column Data Type | Design Note |
|-------------|-----------------------|-------------|
| H101 | STRING(5) - A5 | |
| H102 | NUMERIC | |
| H102a | NUMERIC | |
| H102sp | STRING(200) - A200 | |
| H102rs | STRING(200) - A200 | |
| H102sdtm | DATE - DDMONYYYY HHMM | |
| H102edtm | DATE - DDMONYYYY HHMM | |
| H103 | NUMERIC | |
| H103a | NUMERIC | |
| H103sp | STRING(200) - A200 | |
| H104 | NUMERIC | |
| H104a | NUMERIC | |
| H104sp | STRING(200) - A200 | |
| H104dt | DATE - DDMONYYYY | |
| H105 | NUMERIC | |
| H105a | NUMERIC | |
| H105sp | STRING(200) - A200 | |
| H105rs | STRING(200) - A200 | |
| H105sdtm | DATE - DDMONYYYY HHMM | |
| H105edtm | DATE - DDMONYYYY HHMM | |

| ctn0032 : Group 2 HIV Informed Consent/Information (HIVG2) | | |
|--|---|---|
| 1. | 1. Staff ID: | A5 (ctn0032cdd:HIVG2.H201 / STAFF ID) |
| 2. | 2. Was initial (Information only, pre results) session of the intervention conducted? | <p>(ctn0032cdd:HIVG2.H202 / Initial session conducted)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVG2.H202a / Reason no init session) [1] <input type="radio"/> Participant's decision/changed mind [2] <input type="radio"/> Judgment of CTP Staff (specify): (ctn0032cdd:HIVG2.H202sp / Specify other) <input type="text" value="A200"/> [3] <input type="radio"/> Failed to return to study [4] <input type="radio"/> Failed to return to treatment program [5] <input type="radio"/> Unable to complete intervention in appointed visit schedule [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVG2.H202rsp / Specify other) <input type="text" value="A200"/></p> <p>[1] <input type="radio"/> Yes-- Complete date and time: Initial Session start date and time: Req <input type="text" value=""/> / Req <input type="text" value=""/> / Req <input type="text" value=""/> (2008-2012) (ctn0032cdd:HIVG2.H202sdm / Init. session start datetime) Req <input type="text" value=""/> : Req <input type="text" value=""/> 24-hour clock Initial Session end date and time: Req <input type="text" value=""/> / Req <input type="text" value=""/> / Req <input type="text" value=""/> (2008-2012) (ctn0032cdd:HIVG2.H202edtm / Init session end datetime) Req <input type="text" value=""/> : Req <input type="text" value=""/> 24-hour clock</p> |
| 3. | 3. Did participant accept offer of rapid HIV testing? | <p>(ctn0032cdd:HIVG2.H203 / Rapid test offer accepted)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVG2.H203a / Reason offer not accepted) [1] <input type="radio"/> Participant stated: not ready [2] <input type="radio"/> Participant stated: will think about it [3] <input type="radio"/> Participant stated: scared of getting test [4] <input type="radio"/> Participant stated: scared of getting results [5] <input type="radio"/> Participant stated: did not have time [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVG2.H203sp / Specify other) <input type="text" value="A200"/> If No: STOP here, form complete</p> <p>[1] <input type="radio"/> Yes</p> |
| 4. | 4. Did participant sign HIV Informed Consent for rapid HIV testing? | <p>(ctn0032cdd:HIVG2.H204 / HIV ICF signed)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVG2.H204a / Reason HIV ICF not signed) [1] <input type="radio"/> Participant stated: changed mind [2] <input type="radio"/> Participant stated: did not have time [3] <input type="radio"/> Participant stated: wants to think about getting tested [5] <input type="radio"/> Participant stated: not ready to be tested [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVG2.H204sp / Specify other) <input type="text" value="A200"/> If No: STOP here, form complete</p> <p>[1] <input type="radio"/> Yes-- Provide date: Req <input type="text" value=""/> / Req <input type="text" value=""/> / Req <input type="text" value=""/> (2008-2012) (ctn0032cdd:HIVG2.H204dt / HIV ICF date)</p> |
| 5. | 5. Was Arm 2 (information only) results session of the intervention conducted? | <p>(ctn0032cdd:HIVG2.H205 / Results session conducted)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVG2.H205a / Reason no result session) [1] <input type="radio"/> Participant's decision/changed mind [2] <input type="radio"/> Judgment of CTP Staff (specify): (ctn0032cdd:HIVG2.HG205sp / Specify other) <input type="text" value="A200"/> [3] <input type="radio"/> Failed to return to study [4] <input type="radio"/> Failed to return to treatment program [5] <input type="radio"/> Unable to complete intervention in appointed visit schedule [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVG2.H205rsp / Specify other) <input type="text" value="A200"/></p> |

[1] Yes-- Complete date and time:
 Results Session start date and time:
 Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVG2.H205sdtm / Res session start datetime)
 Req [v] : Req [v] 24-hour clock
 Results Session end date and time:
 Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVG2.H205edtm / Res session end datetime)
 Req [v] : Req [v] 24-hour clock

* Item is not required

| Column Name | Column Data Type | Design Note |
|-------------|-----------------------|-------------|
| H201 | STRING(5) - A5 | |
| H202 | NUMERIC | |
| H202a | NUMERIC | |
| H202sp | STRING(200) - A200 | |
| H202rsp | STRING(200) - A200 | |
| H202sdtm | DATE - DDMONYYYY HHMM | |
| H202edtm | DATE - DDMONYYYY HHMM | |
| H203 | NUMERIC | |
| H203a | NUMERIC | |
| H203sp | STRING(200) - A200 | |
| H204 | NUMERIC | |
| H204a | NUMERIC | |
| H204sp | STRING(200) - A200 | |
| H204dt | DATE - DDMONYYYY | |
| H205 | NUMERIC | |
| H205a | NUMERIC | |
| HG205sp | STRING(200) - A200 | |
| H205rsp | STRING(200) - A200 | |
| H205sdtm | DATE - DDMONYYYY HHMM | |
| H205edtm | DATE - DDMONYYYY HHMM | |

| ctn0032 : Group 3 HIV Informed Consent/Referral (HIVG3) | |
|---|---|
| 1. Staff ID: | A5 (ctn0032cdd:HIVG3.H301 / STAFF ID) |
| 2. Was Arm 3 (standard referral) intervention conducted? | <p>(ctn0032cdd:HIVG3.H302 / Arm 3 interv. Conducted)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVG3.H302a / Reason no interv conducted) [1] <input type="radio"/> Participant's decision/changed mind [2] <input type="radio"/> Judgement of CTP Staff (specify): (ctn0032cdd:HIVG3.H302sp / Specify other) A200 [3] <input type="radio"/> Failed to return to study [4] <input type="radio"/> Failed to return to treatment program [5] <input type="radio"/> Unable to complete intervention in appointed visit schedule [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVG3.H302rsp / Specify other) A200</p> <p>[1] <input type="radio"/> Yes-- Complete date and time: Session start date and time: Req [] / Req [] / Req [] (2008-2012) (ctn0032cdd:HIVG3.H302sdtm / Init. session start datetime) Req [] : Req [] 24-hour clock Session end date and time: Req [] / Req [] / Req [] (2008-2012) (ctn0032cdd:HIVG3.H302edtm / Init session end datetime) Req [] : Req [] 24-hour clock</p> |
| 3. Did participant accept offer (referral) for HIV testing? | <p>(ctn0032cdd:HIVG3.H303 / Referral offer accepted)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVG3.H303a / Reason offer not accepted) [1] <input type="radio"/> Participant stated: not ready [2] <input type="radio"/> Participant stated: will think about it [3] <input type="radio"/> Participant stated: scared of getting test [4] <input type="radio"/> Participant stated: scared of getting results [5] <input type="radio"/> Participant stated: did not have time [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVG3.H303sp / Specify other) A200</p> <p>[1] <input type="radio"/> Yes</p> |

| Column Name | Column Data Type | Design Note |
|-------------|-----------------------|-------------|
| H301 | STRING(5) - A5 | |
| H302 | NUMERIC | |
| H302a | NUMERIC | |
| H302sp | STRING(200) - A200 | |
| H302rsp | STRING(200) - A200 | |
| H302sdtm | DATE - DDMONYYYY HHMM | |
| H302edtm | DATE - DDMONYYYY HHMM | |
| H303 | NUMERIC | |
| H303a | NUMERIC | |
| H303sp | STRING(200) - A200 | |

| ctn0032 : HIV Oral Rapid Result (HIVRER) | |
|---|--|
| 1. Staff ID: | A5 (ctn0032cdd:HIVRER.RER02 / HIVRER Staff ID) |
| 2. Date form completed: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRER.RER01DT / Date form completed) |
| 3. Was HIV oral rapid test performed? | <p>(ctn0032cdd:HIVRER.RER03 / Initial test performed)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVRER.RER03a / No init. test reason) No-- Provide reason: [1] <input type="radio"/> Participant stated: changed mind [2] <input type="radio"/> Participant stated: did not have time [3] <input type="radio"/> Participant stated: wants to think about getting tested [4] <input type="radio"/> Participant stated: not ready to be tested [5] <input type="radio"/> Insufficient sample</p> <p>If No: STOP here, form complete</p> <p>[1] <input type="radio"/> Yes Oral rapid test kit lot number: A30 (ctn0032cdd:HIVRER.RER03b / Init test kit #) Oral rapid test kit expiration date: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRER.RER03c / Init test exp. Dt)</p> |
| 4. Oral rapid test start date and time: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRER.RER4sdm / Init test proc datetime) Req [v] : Req [v] 24-hour clock |
| 5. Oral rapid test end date and time: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRER.RER4edtm / Init test proc datetime) Req [v] : Req [v] 24-hour clock |
| 6. What were the results of the oral rapid HIV test? | <p>(ctn0032cdd:HIVRER.RER05 / Init test result)</p> <p>[0] <input type="radio"/> Non-reactive-- STOP form complete [1] <input type="radio"/> Invalid [2] <input type="radio"/> Reactive</p> |
| 6. Did participant receive initial oral rapid HIV test result? | <p>(ctn0032cdd:HIVRER.RER06 / Part. rec'd initial result)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVRER.RER06a / Reason no init result) [1] <input type="radio"/> Participant refused [2] <input type="radio"/> Participant left without notifying staff [3] <input type="radio"/> Participant stated: did not have time [4] <input type="radio"/> Other (specify): A200 (ctn0032cdd:HIVRER.RER06sp / Specify other reason)</p> <p>(ctn0032cdd:HIVRER.RER06p / Plan to provide init result) What is the plan to provide initial oral rapid HIV test result? [1] <input type="radio"/> Results visit scheduled Date of scheduled visit: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRER.RER06dt / Init result visit sched dt) [2] <input type="radio"/> Staff will attempt to contact participant to schedule results visit [3] <input type="radio"/> Participant refuses to schedule results visit [4] <input type="radio"/> Other (specify): A200 (ctn0032cdd:HIVRER.RER06ps / Specify other plan)</p> <p>[1] <input type="radio"/> Yes-- Provide Date: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRER.RER06pd / Init result visit dt) If Yes: STOP here, form complete</p> |
| 7. Did participant receive initial oral rapid HIV test results at a later date? | <p>(ctn0032cdd:HIVRER.RER07 / Init results later)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVRER.RER07a / Reason no init result later) No-- Provide reason: [1] <input type="radio"/> Participant continues to refuse [2] <input type="radio"/> Participant lost to follow-up [3] <input type="radio"/> Other (specify): A200 (ctn0032cdd:HIVRER.RER07sp / Specify other)</p> <p>[1] <input type="radio"/> Yes Date participant received oral rapid HIV test results: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRER.RER07dt / Later init result dt)</p> |

* Item is not required

| CDD: ctn0032cdd | Table: HIVRER | Key Type: PATIENTVISIT |
|------------------------|-------------------------|-------------------------------|
| Column Name | Column Data Type | Design Note |
| RER02 | STRING(5) - A5 | |
| RER01DT | DATE - DDMONYYYY | |
| RER03 | NUMERIC | |
| RER03a | NUMERIC | |
| RER03b | STRING(30) - A30 | |
| RER03c | DATE - DDMONYYYY | |
| RER4sdtm | DATE - DDMONYYYY HHMM | |
| RER4edtm | DATE - DDMONYYYY HHMM | |
| RER05 | NUMERIC | |
| RER06 | NUMERIC | |
| RER06a | NUMERIC | |
| RER06sp | STRING(200) - A200 | |
| RER06p | NUMERIC | |
| RER06dt | DATE - DDMONYYYY | |
| RER06ps | STRING(200) - A200 | |
| RER06pd | DATE - DDMONYYYY | |
| RER07 | NUMERIC | |
| RER07a | NUMERIC | |
| RER07sp | STRING(200) - A200 | |
| RER07dt | DATE - DDMONYYYY | |

| ctn0032 : HIV Repeat Oral Rapid Result (HIVREP) | | |
|---|--|---|
| 1. | 1. Staff ID: | A5 (ctn0032cdd:HIVREP.REP02 / Staff ID) |
| 2. | 2. Date form completed: | Req / Req / Req (2008-2012) (ctn0032cdd:HIVREP.REP01DT / HIVREP form date) |
| 3. | 3. Was repeat oral rapid HIV test performed? | (ctn0032cdd:HIVREP.REP03 / Initial 2 test) [0] <input type="radio"/> (ctn0032cdd:HIVREP.REP03a / Reason no init 2 test) No-- Provide reason: [1] <input type="radio"/> Participant stated: changed mind [2] <input type="radio"/> Participant stated: did not have time [3] <input type="radio"/> Participant stated: wants to think about getting tested [4] <input type="radio"/> Participant stated: not ready to be tested [5] <input type="radio"/> Insufficient sample If No: STOP here, form complete [1] <input type="radio"/> Yes Repeat oral rapid test kit lot number: (ctn0032cdd:HIVREP.REP03b / Initial 2 kit lot #) A30 Repeat oral rapid test kit expiration date: Req / Req / Req (2008-2012) (ctn0032cdd:HIVREP.REP03EDT / Initial 2 kit exp date) |
| 4.* | 4a. Repeat oral rapid test start date and time: | Req / Req / Req (2008-2012) (ctn0032cdd:HIVREP.REP4sdtm / Initial 2 proc datetime) Req : Req 24-hour clock |
| 5.* | 4b. Repeat oral rapid test end date and time: | Req / Req / Req (2008-2012) (ctn0032cdd:HIVREP.REP4edtm / Initial 2 process datetime) Req : Req 24-hour clock |
| 6.* | 5. What were the results of the repeat oral rapid HIV test? | (ctn0032cdd:HIVREP.REP05 / RES REP RAP TEST) [0] <input type="radio"/> Non-reactive-- STOP form complete [1] <input type="radio"/> Invalid [2] <input type="radio"/> Reactive |
| 7.* | 6. Did participant receive repeat oral rapid HIV test result? | (ctn0032cdd:HIVREP.REP06 / Initial 2 result) [0] <input type="radio"/> (ctn0032cdd:HIVREP.REP06a / Reason no initial 2 result) No-- Provide reason: [1] <input type="radio"/> Participant refused [2] <input type="radio"/> Participant left without notifying staff [3] <input type="radio"/> Participant stated: did not have time [4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVREP.REP06sp / Specify other) A200 [1] <input type="radio"/> Yes-- Provide date: Req / Req / Req (2008-2012) (ctn0032cdd:HIVREP.REP06dt / Initial 2 result date) If Yes: STOP here, form complete |
| 8.* | 6a. What is the plan to provide repeat oral rapid HIV test result? | (ctn0032cdd:HIVREP.REP06b / Plan initial 2 result) [1] <input type="radio"/> Results visit scheduled Date of scheduled visit: Req / Req / Req (2008-2012) (ctn0032cdd:HIVREP.REP06Sdt / Date initial 2 sched visit) [2] <input type="radio"/> Staff will attempt to contact participant to schedule results visit [3] <input type="radio"/> Participant refuses to schedule results visit [4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVREP.REP06psp / Specify other) A200 |
| 9.* | 7. Did participant receive repeat oral rapid HIV test results at a later date? | (ctn0032cdd:HIVREP.REP07 / Initial 2 later result) [0] <input type="radio"/> (ctn0032cdd:HIVREP.REP07a / Reason no later result) No-- Provide reason: [1] <input type="radio"/> Participant continues to refuse [2] <input type="radio"/> Participant lost to follow-up [3] <input type="radio"/> Other (specify): (ctn0032cdd:HIVREP.REP07sp / Specify other) A200 [1] <input type="radio"/> Yes |

Date participant receive repeat oral rapid HIV test results:

Req / Req / Req (2008-2012) (ctn0032cdd:HIVREP.REP07dt / Initial 2 later result dt)

* Item is not required

| CDD: ctn0032cdd Table: HIVREP Key Type: PATIENTVISIT | | |
|--|-----------------------|-------------|
| Column Name | Column Data Type | Design Note |
| REP02 | STRING(5) - A5 | |
| REP01DT | DATE - DDMONYYYY | |
| REP03 | NUMERIC | |
| REP03a | NUMERIC | |
| REP03b | STRING(30) - A30 | |
| REP03EDT | DATE - DDMONYYYY | |
| REP4sdtm | DATE - DDMONYYYY HHMM | |
| REP4edtm | DATE - DDMONYYYY HHMM | |
| REP05 | NUMERIC | |
| REP06 | NUMERIC | |
| REP06a | NUMERIC | |
| REP06sp | STRING(200) - A200 | |
| REP06dt | DATE - DDMONYYYY | |
| REP06b | NUMERIC | |
| REP06Sdt | DATE - DDMONYYYY | |
| REP06psp | STRING(200) - A200 | |
| REP07 | NUMERIC | |
| REP07a | NUMERIC | |
| REP07sp | STRING(200) - A200 | |
| REP07dt | DATE - DDMONYYYY | |

| ctn0032 : HIV Fingerstick Result (HIVRERF) | |
|--|--|
| 1. Staff ID: | A5 (ctn0032cdd:HIVRERF.RFR02 / HIVRER Staff ID) |
| 2. Date Form Completed: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRERF.RFR01DT / Date form completed) |
| 3. Was HIV fingerstick test performed? | (ctn0032cdd:HIVRERF.RFR03 / fingr test performed) [0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVRERF.RFR03a / No fingr test reason) [1] <input type="radio"/> Participant stated: changed mind [2] <input type="radio"/> Participant stated: did not have time [3] <input type="radio"/> Participant stated: wants to think about getting tested [4] <input type="radio"/> Participant stated: not ready to be tested [5] <input type="radio"/> Insufficient sample If No: STOP here, form complete [1] <input type="radio"/> Yes Fingerstick test kit lot number: A30 (ctn0032cdd:HIVRERF.RFR03b / fingr test kit #) Fingerstick test kit expiration date: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRERF.RFR03c / fingr test exp. Dt) |
| 4. Fingerstick test start date and time: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRERF.RFR4sdtm / Fingr test proc datetime) Req [v] : Req [v] 24-hour clock |
| 5. Fingerstick test end date and time: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRERF.RFR4edtm / Fingr test end datetime) Req [v] : Req [v] 24-hour clock |
| 6. What were the results of the fingerstick HIV test? | (ctn0032cdd:HIVRERF.RFR05 / Fingr test result) [0] <input type="radio"/> Non-reactive [1] <input type="radio"/> Invalid [2] <input type="radio"/> Reactive |
| 7. Did participant receive initial fingerstick HIV test result? | (ctn0032cdd:HIVRERF.RFR06 / Part. rec'd fingr result) [0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVRERF.RFR06a / Reason no fingr result) [1] <input type="radio"/> Participant refused [2] <input type="radio"/> Participant left without notifying staff [3] <input type="radio"/> Participant stated: did not have time [4] <input type="radio"/> Other (specify): A200 (ctn0032cdd:HIVRERF.RFR06sp / Specify other reason) (ctn0032cdd:HIVRERF.RFR06p / Plan to provide fingr result) What is the plan to provide initial fingerstick HIV test result [1] <input type="radio"/> Results visit scheduled Date of scheduled visit: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRERF.RFR06dt / fingr result visit sched dt) [2] <input type="radio"/> Staff will attempt to contact participant to schedule results visit [3] <input type="radio"/> Participant refuses to schedule results visit [4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVRERF.RFR06ps / Specify other plan) A200 [1] <input type="radio"/> Yes-- Provide date: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRERF.RFR06pd / fingr result visit dt) If Yes: STOP here, form complete |
| 8. Did participant receive initial fingerstick HIV test results at a later date? | (ctn0032cdd:HIVRERF.RFR07 / fingr results later) [0] <input type="radio"/> (ctn0032cdd:HIVRERF.RFR07a / Reason no fingr result later) No-- Provide reason: [1] <input type="radio"/> Participant continues to refuse [2] <input type="radio"/> Participant lost to follow-up [3] <input type="radio"/> Other (specify): (ctn0032cdd:HIVRERF.RFR07sp / Specify other) A200 [1] <input type="radio"/> Yes Date participant received fingerstick HIV test results: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRERF.RFR07dt / Later fingr result dt) |
| * Item is not required | |

| CDD: ctn0032cdd Table: HIVRERF Key Type: PATIENTVISIT | | |
|---|-----------------------|-------------|
| Column Name | Column Data Type | Design Note |
| RFR02 | STRING(5) - A5 | |
| RFR01DT | DATE - DDMONYYYY | |
| RFR03 | NUMERIC | |
| RFR03a | NUMERIC | |
| RFR03b | STRING(30) - A30 | |
| RFR03c | DATE - DDMONYYYY | |
| RFR4sdtm | DATE - DDMONYYYY HHMM | |
| RFR4edtm | DATE - DDMONYYYY HHMM | |
| RFR05 | NUMERIC | |
| RFR06 | STRING(42) | |
| RFR06a | NUMERIC | |
| RFR06sp | STRING(200) - A200 | |
| RFR06p | NUMERIC | |
| RFR06dt | DATE - DDMONYYYY | |
| RFR06ps | STRING(200) - A200 | |
| RFR06pd | DATE - DDMONYYYY | |
| RFR07 | NUMERIC | |
| RFR07a | NUMERIC | |
| RFR07sp | STRING(200) - A200 | |
| RFR07dt | DATE - DDMONYYYY | |

| ctn0032 : HIV Repeat Fingerstick Result (HIVREPF) | | |
|---|--|---|
| 1. | 1. Staff ID: | A5 (ctn0032cdd:HIVREPF.REF02 / Staff ID) |
| 2. | 2. Date form completed: | Req / Req / Req (2008-2012) (ctn0032cdd:HIVREPF.REF01DT / HIVREP form date) |
| 3. | 3. Was repeat fingerstick HIV test performed? | <p>(ctn0032cdd:HIVREPF.REF03 / fingr 2 test)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVREPF.REF03a / Reason no fingr 2 test) No-- Provide reason: [1] <input type="radio"/> Participant stated: changed mind [2] <input type="radio"/> Participant stated: did not have time [3] <input type="radio"/> Participant stated: wants to think about getting tested [4] <input type="radio"/> Participant stated: not ready to be tested [5] <input type="radio"/> Insufficient sample If No: Go to question 3a</p> <p>[1] <input type="radio"/> Yes-- Repeat fingerstick test kit lot number: (ctn0032cdd:HIVREPF.REF03b / fingr 2 kit lot #) A30 Repeat fingerstick test kit expiration date: Req / Req / Req (2008-2012) (ctn0032cdd:HIVREPF.REF03EDT / fingr 2 kit exp date) If Yes: Go to question 4a</p> |
| 4.* | 3a. Was participant referred for confirmatory testing using blood specimens? | <p>(ctn0032cdd:HIVREPF.REF03c / Part. Referrred for blood)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVREPF.REF03d / Reason not referred) No-- Provide reason: [1] <input type="radio"/> Incorrect/non-working contact information [2] <input type="radio"/> Staff forgot [3] <input type="radio"/> Participant refuses [4] <input type="radio"/> Participant stated: did not have time [5] <input type="radio"/> Participant left without notifying staff [6] <input type="radio"/> Other <input type="text" value="A200"/> (ctn0032cdd:HIVREPF.REF03dsp / Specify reason) If No STOP here, form complete</p> <p>[1] <input type="radio"/> Yes-- Provide Date: Req / Req / Req (2008-2012) (ctn0032cdd:HIVREPF.REF03ddt / Referral date for blood)</p> |
| 5.* | 4a. Fingerstick test start date and time: | Req / Req / Req (2008-2012) (ctn0032cdd:HIVREPF.REF4sdm / Fingr 2 test proc datetime) Req : Req 24-hour clock |
| 6.* | 4b. Fingerstick test end date and time: | Req / Req / Req (2008-2012) (ctn0032cdd:HIVREPF.REF4edtm / Fingr 2 test end datetime) Req : Req 24-hour clock |
| 7.* | 5. What were the results of the repeat fingerstick HIV test? | <p>(ctn0032cdd:HIVREPF.REF05 / Fingr 2 result)</p> <p>[0] <input type="radio"/> Non-reactive-- Go to question 6 [1] <input type="radio"/> Invalid-- Go to question 5a [2] <input type="radio"/> Reactive-- Go to question 6</p> |
| 8.* | 5a. Was participant referred for confirmatory testing using blood specimens? | <p>(ctn0032cdd:HIVREPF.REF05c / Inv. referred for blood 2)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVREPF.REF05d / Inv. not referred) No-- Provide reason: [1] <input type="radio"/> Incorrect/non-working contact information [2] <input type="radio"/> Staff forgot [3] <input type="radio"/> Participant refuses [4] <input type="radio"/> Participant stated: did not have time [5] <input type="radio"/> Participant left without notifying staff [6] <input type="radio"/> Other (specify): <input type="text" value="A200"/> (ctn0032cdd:HIVREPF.REF05dsp / Specify reason)</p> <p>[1] <input type="radio"/> Yes Provide Date: Req / Req / Req (2008-2012) (ctn0032cdd:HIVREPF.REF05ddt / Inv. refer date for blood)</p> |
| 9.* | 6. Did participant receive repeat fingerstick HIV test result? | <p>(ctn0032cdd:HIVREPF.REF06 / Recv fingr 2 result)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVREPF.REF06a / Reason no Fingr 2 result) [1] <input type="radio"/> Participant refused</p> |

| | | |
|------------------------|---|--|
| | | <p>[2] <input type="radio"/> Participant left without notifying staff</p> <p>[3] <input type="radio"/> Participant stated: did not have time</p> <p>[4] <input type="radio"/> Other (specify): <input type="text" value="A200"/> (ctn0032cdd:HIVREPF.REF06sp / Specify other)</p> <p>(ctn0032cdd:HIVREPF.REF06b / Plan fingr 2 result) What is the plan to provide repeat fingerstick HIV test result?</p> <p>[1] <input type="radio"/> Results visit scheduled Req <input type="text" value=""/> / Req <input type="text" value=""/> / Req <input type="text" value=""/> (2008-2012) (ctn0032cdd:HIVREPF.REF06Sdt / Date fingr 2 sched visit)</p> <p>[2] <input type="radio"/> Staff will attempt to contact participant to schedule results visit</p> <p>[3] <input type="radio"/> Participant refuses to schedule results visit</p> <p>[4] <input type="radio"/> Other (specify): <input type="text" value="A200"/> (ctn0032cdd:HIVREPF.REF06psp / Specify other)</p> <p>[1] <input type="radio"/> Yes-- Provide Date: Req <input type="text" value=""/> / Req <input type="text" value=""/> / Req <input type="text" value=""/> (2008-2012) (ctn0032cdd:HIVREPF.REF06dt / fingr 2 result date)</p> <p>If Yes: STOP here, form complete</p> |
| 10.* | 7. Did participant receive repeat fingerstick HIV test results at a later date? | <p>(ctn0032cdd:HIVREPF.REF07 / fingr 2 later result)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVREPF.REF07a / Reason no later result) No-- Provide reason:</p> <p>[1] <input type="radio"/> Participant continues to refuse</p> <p>[2] <input type="radio"/> Participant lost to follow-up</p> <p>[3] <input type="radio"/> Other (specify): <input type="text" value="A200"/> (ctn0032cdd:HIVREPF.REF07sp / Specify other)</p> <p>[1] <input type="radio"/> Yes Date participant received fingerstick repeat HIV test results: Req <input type="text" value=""/> / Req <input type="text" value=""/> / Req <input type="text" value=""/> (2008-2012) (ctn0032cdd:HIVREPF.REF07dt / fingr 2 later result dt)</p> |
| * Item is not required | | |

| Column Name | Column Data Type | Design Note |
|-------------|-----------------------|-------------|
| REF02 | STRING(5) - A5 | |
| REF01DT | DATE - DDMONYYYY | |
| REF03 | NUMERIC | |
| REF03a | NUMERIC | |
| REF03b | STRING(30) - A30 | |
| REF03EDT | DATE - DDMONYYYY | |
| REF03c | NUMERIC | |
| REF03d | NUMERIC | |
| REF03dsp | STRING(200) - A200 | |
| REF03ddt | DATE - DDMONYYYY | |
| REF4sdtm | DATE - DDMONYYYY HHMM | |
| REF4edtm | DATE - DDMONYYYY HHMM | |
| REF05 | NUMERIC | |
| REF05c | NUMERIC | |
| REF05d | NUMERIC | |
| REF05dsp | STRING(200) - A200 | |
| REF05ddt | DATE - DDMONYYYY | |
| REF06 | STRING(42) | |
| REF06a | NUMERIC | |
| REF06sp | STRING(200) - A200 | |
| REF06b | NUMERIC | |
| REF06Sdt | DATE - DDMONYYYY | |
| REF06psp | STRING(200) - A200 | |

| | | |
|---------|--------------------|--|
| REF06dt | DATE - DDMONYYYY | |
| REF07 | NUMERIC | |
| REF07a | NUMERIC | |
| REF07sp | STRING(200) - A200 | |
| REF07dt | DATE - DDMONYYYY | |

| ctn0032 : HIV Fingerstick Results Counseling (HIVFR) | |
|---|---|
| 1. 1. Staff ID: | A5 (ctn0032cdd:HIVFR.HRF01 / Staff ID) |
| 2. 2. Was participant provided an explanation of fingerstick test result? | <p>(ctn0032cdd:HIVFR.HRF02 / Explanation fngrstk result)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVFR.HRF02a / Reason no explain fngsr res)</p> <p>No-- Provide reason:</p> <p>[1] <input type="radio"/> Staff forgot</p> <p>[2] <input type="radio"/> Participant refused to discuss</p> <p>[3] <input type="radio"/> Participant stated: did not have time</p> <p>[4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVFR.HRF02sp / Specify other)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes</p> |
| 3. 3. Was participant assessed for potential suicidality? | <p>(ctn0032cdd:HIVFR.HRF03 / Suicidality)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVFR.HRF03a / Reason no suicidality)</p> <p>No-- Provide reason:</p> <p>[1] <input type="radio"/> Staff forgot</p> <p>[2] <input type="radio"/> Participant refused to discuss</p> <p>[3] <input type="radio"/> Participant stated: did not have time</p> <p>[4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVFR.HRF03sp / Specify other)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes</p> |
| 4. 4. Was participant encouraged to have specific plans for that day to reach out to another person for support or have specific plans for self care? | <p>(ctn0032cdd:HIVFR.HRF04 / Support plan)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVFR.HRF04a / Reason no support plan)</p> <p>No-- Provide reason:</p> <p>[1] <input type="radio"/> Staff forgot</p> <p>[2] <input type="radio"/> Participant refused to discuss</p> <p>[3] <input type="radio"/> Participant stated: did not have time</p> <p>[4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVFR.HRF04sp / Specify other)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes</p> |
| 5. 5. Was participant informed that appropriate referrals and support will be provided in confirmatory results are reactive? | <p>(ctn0032cdd:HIVFR.HRF05 / Informed support provided)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVFR.HRF05a / Reason not informed)</p> <p>No-- Provide reason:</p> <p>[1] <input type="radio"/> Staff forgot</p> <p>[2] <input type="radio"/> Participant refused to discuss</p> <p>[3] <input type="radio"/> Participant stated: did not have time</p> <p>[4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVFR.HRF05sp / Specify other)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes</p> |
| 6. 6. Was participant provided with appropriate referrals and support? | <p>(ctn0032cdd:HIVFR.HRF06 / Provided with referrals)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVFR.HRF06a / Reason no referrals)</p> <p>No-- Provide reason:</p> <p>[1] <input type="radio"/> Staff forgot</p> <p>[2] <input type="radio"/> Participant refused to discuss</p> <p>[3] <input type="radio"/> Participant stated: did not have time</p> <p>[4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVFR.HRF06sp / Specify other)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes</p> |
| 7. 7. Was Partner Notification Services locator information verified and/or updated? | <p>(ctn0032cdd:HIVFR.HRF07 / PNS verified)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVFR.HRF07a / Reason PNS not verified)</p> <p>No-- Provide reason:</p> <p>[1] <input type="radio"/> Staff forgot</p> <p>[2] <input type="radio"/> Participant refused to discuss</p> <p>[3] <input type="radio"/> Participant stated: did not have time</p> <p>[4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVFR.HRF07sp / Specify other)</p> <p>A200</p> <p>Yes</p> |

[1]

| CDD: ctn0032cdd Table: HIVFR Key Type: PATIENTVISIT | | |
|---|--------------------|-------------|
| Column Name | Column Data Type | Design Note |
| HRF01 | STRING(5) - A5 | |
| HRF02 | NUMERIC | |
| HRF02a | NUMERIC | |
| HRF02sp | STRING(200) - A200 | |
| HRF03 | NUMERIC | |
| HRF03a | NUMERIC | |
| HRF03sp | STRING(200) - A200 | |
| HRF04 | NUMERIC | |
| HRF04a | NUMERIC | |
| HRF04sp | STRING(200) - A200 | |
| HRF05 | NUMERIC | |
| HRF05a | NUMERIC | |
| HRF05sp | STRING(200) - A200 | |
| HRF06 | NUMERIC | |
| HRF06a | NUMERIC | |
| HRF06sp | STRING(200) - A200 | |
| HRF07 | NUMERIC | |
| HRF07a | NUMERIC | |
| HRF07sp | STRING(200) - A200 | |

| ctn0032 : OraSure HIV Confirmatory Collection (HIVCC) | |
|---|---|
| 1. Staff ID: | A5 (ctn0032cdd:HIVCC.ICC01 / STAFF ID) |
| 2. Date form completed: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVCC.ICC02DT / HIVCC date) |
| 3. Was OraSure confirmatory test oral sample collected? | <p>(ctn0032cdd:HIVCC.ICC03 / Conf test 1 collected)</p> <p>[0] <input type="radio"/> No-- Provide reason:</p> <p>(ctn0032cdd:HIVCC.ICC03a / Reason no test 1)</p> <p>[1] <input type="radio"/> Participant refused</p> <p>[2] <input type="radio"/> Participant left without notifying staff</p> <p>[3] <input type="radio"/> Participant stated: did not have time</p> <p>[4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVCC.ICC03asp / Specify no test 1)</p> <p>A200</p> <p>(ctn0032cdd:HIVCC.ICC03b / Plan for test 1)</p> <p>What is the plan to collect OraSure confirmatory test samples</p> <p>[1] <input type="radio"/> Visit scheduled</p> <p>Date of scheduled visit:</p> <p>Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVCC.ICC03bDT / Test 1 visit dt.)</p> <p>[2] <input type="radio"/> Staff will attempt to contact participant to schedule visit</p> <p>[3] <input type="radio"/> Participant continues to refuse</p> <p>[4] <input type="radio"/> Participant lost to follow-up</p> <p>[5] <input type="radio"/> Other (specify): (ctn0032cdd:HIVCC.ICC03bsp / Specify plan test 1)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes</p> <p>Date sample collected:</p> <p>Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVCC.ICC03cDT / Sample 1 coll. date)</p> <p>Date sample sent out for processing:</p> <p>Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVCC.ICC03dDT / Sample 1 process dt)</p> <p>Confirmatory test kit lot number: (ctn0032cdd:HIVCC.ICC03e / Test kit lot 1)</p> <p>A30</p> <p>Confirmatory test kit expiration date:</p> <p>Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVCC.ICC03fDT / test kit lot 1 expiration)</p> |
| 4. Were referrals provided to participant? | <p>(ctn0032cdd:HIVCC.ICC04 / Were referrals provided)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVCC.ICC04a / Referrals plan)</p> <p>No-- What is the plan for providing referrals:</p> <p>[1] <input type="radio"/> Staff will contact participant to provide referrals</p> <p>[2] <input type="radio"/> Participant refuses referrals</p> <p>[4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVCC.ICC04asp / Specify other referral plan)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes</p> <p>(ctn0032cdd:HIVCC.ICC04b / Primary care)</p> <p>Which referrals were provided (check all that apply)?</p> <p>[1] <input type="checkbox"/> HIV primary care</p> <p>(ctn0032cdd:HIVCC.ICC04c / Mental health)</p> <p>[1] <input type="checkbox"/> Mental health</p> <p>(ctn0032cdd:HIVCC.ICC04d / Social support)</p> <p>[1] <input type="checkbox"/> Social support</p> <p>(ctn0032cdd:HIVCC.ICC04e / Other referral)</p> <p>[1] <input type="checkbox"/> Other (specify): (ctn0032cdd:HIVCC.ICC04esp / Specify other referral)</p> <p>A200</p> |
| 5. Was check-in call to participant scheduled? | <p>(ctn0032cdd:HIVCC.ICC05 / Check-in call)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVCC.ICC05a / Reason no check-in call)</p> <p>No-- Provide reason:</p> <p>[1] <input type="radio"/> Participant did not have time; staff will attempt to make check-in call</p> <p>[2] <input type="radio"/> Participant left without notifying staff; staff will attempt to make check-in call</p> <p>[3] <input type="radio"/> Participant refuses check-in call</p> <p>[4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVCC.ICC05sp / Specify no check-in call)</p> |

| | | |
|------------------------|---|--|
| | | <p style="text-align: center;">A200</p> <p>[1] <input type="radio"/> Yes Date of scheduled call: Req <input type="text"/> / Req <input type="text"/> / Req <input type="text"/> (2008-2012) (ctn0032cdd:HIVCC.ICC05dt / Date call scheduled)</p> |
| 6.* | 6. Was date scheduled for participant to return to receive OraSure confirmatory test results? | <p>(ctn0032cdd:HIVCC.ICC06 / Result 1 scheduled)</p> <p>[0] <input type="radio"/> No-- Provide reason: (ctn0032cdd:HIVCC.ICC06a / Reason not return results) [1] <input type="radio"/> Participant refused [2] <input type="radio"/> Participant left without notifying staff [3] <input type="radio"/> Participant stated: did not have time [4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVCC.ICC06dsp / Specify other reason) A200</p> <p>(ctn0032cdd:HIVCC.ICC06e / Plan for result 1 visit) What is the plan for scheduling confirmatory results appointment</p> <p>[1] <input type="radio"/> Visit scheduled Date of scheduled visit: Req <input type="text"/> / Req <input type="text"/> / Req <input type="text"/> (2008-2012) (ctn0032cdd:HIVCC.ICC06edt / Result 1 visit date) [2] <input type="radio"/> Staff will attempt to contact participant to schedule visit [3] <input type="radio"/> Participant continues to refuse [5] <input type="radio"/> Other (specify): (ctn0032cdd:HIVCC.ICC06esp / Specify other result 1 plan) A200</p> <p>[1] <input type="radio"/> Yes Date of scheduled confirmatory results appointment: Req <input type="text"/> / Req <input type="text"/> / Req <input type="text"/> (2008-2012) (ctn0032cdd:HIVCC.ICC06fdt / Result 1 appt. date)</p> |
| * Item is not required | | |

CDD: ctn0032cdd Table: HIVCC Key Type: PATIENTVISIT

| Column Name | Column Data Type | Design Note |
|-------------|--------------------|-------------|
| ICC01 | STRING(5) - A5 | |
| ICC02DT | DATE - DDMONYYYY | |
| ICC03 | NUMERIC | |
| ICC03a | NUMERIC | |
| ICC03asp | STRING(200) - A200 | |
| ICC03b | NUMERIC | |
| ICC03bDT | DATE - DDMONYYYY | |
| ICC03bsp | STRING(200) - A200 | |
| ICC03cDT | DATE - DDMONYYYY | |
| ICC03dDT | DATE - DDMONYYYY | |
| ICC03e | STRING(30) - A30 | |
| ICC03fdt | DATE - DDMONYYYY | |
| ICC04 | NUMERIC | |
| ICC04a | NUMERIC | |
| ICC04asp | STRING(200) - A200 | |
| ICC04b | NUMERIC | |
| ICC04c | NUMERIC | |
| ICC04d | NUMERIC | |
| ICC04e | NUMERIC | |
| ICC04esp | STRING(200) - A200 | |
| ICC05 | NUMERIC | |
| ICC05a | NUMERIC | |
| ICC05sp | STRING(200) - A200 | |
| ICC05dt | DATE - DDMONYYYY | |
| ICC06 | NUMERIC | |

| | | |
|----------|--------------------|--|
| ICC06a | NUMERIC | |
| ICC06dsp | STRING(200) - A200 | |
| ICC06e | NUMERIC | |
| ICC06edt | DATE - DDMONYYYY | |
| ICC06esp | STRING(200) - A200 | |
| ICC06fdt | DATE - DDMONYYYY | |

| ctn0032 : OraSure HIV Confirmatory Results (HIVCO) | | |
|--|--|---|
| 1. | 1. Staff ID: | A5 (ctn0032cdd:HIVCO.IC001 / STAFF ID) |
| 2. | 2. Date form completed: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVCO.IC002 / HIVCO Date) |
| 3. | 3. Was check-in call to the participant completed? | <p>(ctn0032cdd:HIVCO.IC003 / Was check-in call completed)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVCO.IC003a / Reason call not completed) No-- Provide reason: [1] <input type="radio"/> Incorrect/non-working contact information [2] <input type="radio"/> Staff forgot [3] <input type="radio"/> Not scheduled [4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVCO.IC003sp / Specify reason) <input type="text" value="A200"/></p> <p>[1] <input type="radio"/> Yes Date of check-in call: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVCO.IC003dt / Check-in call date)</p> |
| 4. | 4. Did participant make contact with referrals? | <p>(ctn0032cdd:HIVCO.IC004 / Contact w/referrals made)</p> <p>[96] <input type="radio"/> NA (referrals not originally provided)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVCO.IC004a / Contact referral plan) No-- What is the plan for contacting referrals? [1] <input type="radio"/> Participant contacted referral during session [2] <input type="radio"/> Participant to contact referral(s) this week [3] <input type="radio"/> Participant refuses to contact referral agency [4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVCO.IC004asp / Specify other plan) <input type="text" value="A200"/></p> <p>[1] <input type="radio"/> Yes-- Which referrals Contacted (check all that apply)? (ctn0032cdd:HIVCO.IC004b / Primary care contact) [1] <input type="checkbox"/> HIV primary care (ctn0032cdd:HIVCO.IC004c / Medical contact) [1] <input type="checkbox"/> Medical (ctn0032cdd:HIVCO.IC004d / Mental health contact) [1] <input type="checkbox"/> Mental health (ctn0032cdd:HIVCO.IC004e / Social support contact) [1] <input type="checkbox"/> Social support (ctn0032cdd:HIVCO.IC004f / Other referral contact) [1] <input type="checkbox"/> Other (specify): (ctn0032cdd:HIVCO.IC004fsp / Specify other contact) <input type="text" value="A200"/></p> |
| 5. | 5. Did CTP receive OraSure confirmatory HIV test result? | <p>(ctn0032cdd:HIVCO.IC005 / CTP received result 1)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVCO.IC005a / Reason CTP no result 1) No-- Provide reason: [1] <input type="radio"/> Lab lost sample [2] <input type="radio"/> Sample lost in mail [3] <input type="radio"/> Other (specify): <input type="text" value="A200"/> (ctn0032cdd:HIVCO.IC005sp / Specify reason)</p> <p>If No: STOP here, form complete</p> <p>[1] <input type="radio"/> Yes Date CTP received results: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVCO.IC005dt / CTP result1 date)</p> |
| 6.* | 6a. What is result of OraSure confirmatory HIV test? | <p>(ctn0032cdd:HIVCO.IC006 / Test 1 result)</p> <p>[2] <input type="radio"/> Indeterminate-- Go to Question 6b</p> <p>[1] <input type="radio"/> Positive (ctn0032cdd:HIVCO.IC006r / Finger stick reactive) Was fingerstick reactive? [1] <input type="radio"/> Yes-- Go to Question 7a [0] <input type="radio"/> No-- Go to Question 6b</p> |

| | | |
|------|---|---|
| | | <p>[0] <input type="radio"/> Negative (ctn0032cdd:HIVCO.IC006nr / Finger stick non-reactive) Was fingerstick non-reactive? [1] <input type="radio"/> Yes-- Go to Question 7a [0] <input type="radio"/> No-- Go to Question 6b</p> |
| 7.* | 6b. Was participant referred for confirmatory testing using blood specimens? | <p>(ctn0032cdd:HIVCO.IC006a / Part. Referred for test 2) [0] <input type="radio"/> (ctn0032cdd:HIVCO.IC006b / Reason not referred) No-- Provide reason: [1] <input type="radio"/> Incorrect/non-working contact information [2] <input type="radio"/> Staff forgot [3] <input type="radio"/> Participant refuses [4] <input type="radio"/> Participant stated: did not have time [5] <input type="radio"/> Participant left without notifying staff [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVCO.IC006bsp / Specify reason) <input type="text" value="A200"/> [1] <input type="radio"/> Yes Provide date: Req / Req / Req (2008-2012) (ctn0032cdd:HIVCO.IC006dt / Referral date for test 2)</p> |
| 8.* | 7a. Did participant receive the OraSure confirmatory HIV test result? | <p>(ctn0032cdd:HIVCO.IC007 / Part. Receive test 1 result) [0] <input type="radio"/> (ctn0032cdd:HIVCO.IC007a / Reason no test 1 result) No-- Provide reason: [1] <input type="radio"/> Participant failed to return to study [2] <input type="radio"/> Participant failed to return to treatment program [3] <input type="radio"/> Participant refused confirmatory result [4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVCO.IC007asp / Specify other reason) <input type="text" value="A200"/> [1] <input type="radio"/> Yes-- Date participant received confirmatory results: Req / Req / Req (2008-2012) (ctn0032cdd:HIVCO.IC007adt / Date result 1 rec'd) If Yes: STOP here, form complete</p> |
| 9.* | 7b. If participant did not receive OraSure HIV test result, what is the plan to provide confirmatory HIV test result? | <p>(ctn0032cdd:HIVCO.IC007b / Plan to provide result 1) [1] <input type="radio"/> Visit scheduled: Date of scheduled visit: Req / Req / Req (2008-2012) (ctn0032cdd:HIVCO.IC007bdt / Date result 1 visit) [2] <input type="radio"/> Staff will attempt to contact participant to schedule results visit [3] <input type="radio"/> Other (specify): (ctn0032cdd:HIVCO.IC007bsp / Specify plan) <input type="text" value="A200"/></p> |
| 10.* | 8. Did participant receive OraSure confirmatory HIV test result at a later date? | <p>(ctn0032cdd:HIVCO.IC008 / Result 1 at later date) [0] <input type="radio"/> (ctn0032cdd:HIVCO.IC008a / Reason no result 1 later) No-- Provide reason: [1] <input type="radio"/> Participant continues to refuse [2] <input type="radio"/> Participant lost to follow-up [3] <input type="radio"/> Other (specify): (ctn0032cdd:HIVCO.IC008sp / Specify other) <input type="text" value="A200"/> [1] <input type="radio"/> Yes Date participant received results: Req / Req / Req (2008-2012) (ctn0032cdd:HIVCO.IC008dt / Date result 1 rec'd later)</p> |

* Item is not required

| Column Name | Column Data Type | Design Note |
|-------------|------------------|-------------|
| ICO01 | STRING(5) - A5 | |
| ICO02 | DATE - DDMONYYYY | |

| | | |
|----------|--------------------|--|
| ICO03 | NUMERIC | |
| ICO03a | NUMERIC | |
| ICO03sp | STRING(200) - A200 | |
| ICO03dt | DATE - DDMONYYYY | |
| ICO04 | NUMERIC | |
| ICO04a | NUMERIC | |
| ICO04asp | STRING(200) - A200 | |
| ICO04b | NUMERIC | |
| ICO04c | NUMERIC | |
| ICO04d | NUMERIC | |
| ICO04e | NUMERIC | |
| ICO04f | NUMERIC | |
| ICO04fsp | STRING(200) - A200 | |
| ICO05 | NUMERIC | |
| ICO05a | NUMERIC | |
| ICO05sp | STRING(200) - A200 | |
| ICO05dt | DATE - DDMONYYYY | |
| ICO06 | NUMERIC | |
| ICO06r | NUMERIC | |
| ICO06nr | NUMERIC | |
| ICO06a | NUMERIC | |
| ICO06b | NUMERIC | |
| ICO06bsp | STRING(200) - A200 | |
| ICO06dt | DATE - DDMONYYYY | |
| ICO07 | NUMERIC | |
| ICO07a | NUMERIC | |
| ICO07asp | STRING(200) - A200 | |
| ICO07adt | DATE - DDMONYYYY | |
| ICO07b | NUMERIC | |
| ICO07bdt | DATE - DDMONYYYY | |
| ICO07bsp | STRING(200) - A200 | |
| ICO08 | NUMERIC | |
| ICO08a | NUMERIC | |
| ICO08sp | STRING(200) - A200 | |
| ICO08dt | DATE - DDMONYYYY | |

| ctn0032 : OraSure HIV Confirmatory Re-Collection (HIVRC) | |
|--|---|
| 1. Staff ID | A5 (ctn0032cdd:HIVRC.RC01 / Staff ID) |
| 2. Date Form Completed: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRC.RC02DT / HIVRC form Date) |
| 3. Was OraSure confirmatory test sample re-collected? | <p>(ctn0032cdd:HIVRC.RC03 / Sample 2 collected)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVRC.RC03a / Reason no sample 2 collect) No-- Provide reason: [1] <input type="radio"/> Participant refused [2] <input type="radio"/> Participant left without notifying staff [3] <input type="radio"/> Participant stated: did not have time [4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVRC.RC03sp / Specify other) <input type="text" value="A200"/></p> <p>If No: Go to question 4</p> <p>[1] <input type="radio"/> Yes Date OraSure sample re-collected: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRC.RC03SDT / Sample 2 collection dt) Date OraSure re-collected sample sent out for processing: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRC.RC03PDT / Sample 2 process dt) Re-collection OraSure confirmatory test kit lot number: A30 (ctn0032cdd:HIVRC.RC03b / Sample 2 kit lot #) Re-collection OraSure confirmatory test kit expiration date: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRC.RC03KDT / Sample 2 test kit exp. Dt)</p> <p>If Yes: Go to question 6</p> |
| 4. What is the plan to obtain re-collection of OraSure confirmatory test sample? | <p>(ctn0032cdd:HIVRC.RC04 / Plan sample 2)</p> <p>[1] <input type="radio"/> Visit scheduled Date of scheduled visit: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRC.RC04DT / Sched sample 2 date) [2] <input type="radio"/> Staff will attempt to contact participant to schedule visit [3] <input type="radio"/> Participant continues to refuse [4] <input type="radio"/> Participant lost to follow-up [5] <input type="radio"/> Other (specify): (ctn0032cdd:HIVRC.RC04sp / Specify other) <input type="text" value="A200"/></p> |
| 5. OraSure confirmatory test sample re-collected (complete upon collection of sample): | Date OraSure sample re-collected: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRC.RC05SDT / Sample 2 plan collection dt) Date OraSure re-collected sample sent out for processing: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRC.RC05PDT / Sample 2 plan process dt) Re-collection OraSure confirmatory test kit lot number: A30 (ctn0032cdd:HIVRC.RC05b / Sample 2 plan kit lot #) Re-collection OraSure confirmatory test kit expiration date: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRC.RC05KDT / Sample 2 test kit exp Dt) |
| 6. Was a date scheduled for participant to return to receive re-collection OraSure confirmatory results? | <p>(ctn0032cdd:HIVRC.RC06 / Result 2 date scheduled)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVRC.RC06a / Reason no result 2 sched) No-- Provide reason: [1] <input type="radio"/> Participant refused [2] <input type="radio"/> Participant left without notifying staff [3] <input type="radio"/> Participant stated: did not have time [4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVRC.RC06sp / Specify other) <input type="text" value="A200"/></p> <p>[1] <input type="radio"/> Yes Date scheduled re-collection OraSure confirmatory results appointment: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRC.RC06CDT / Result 2 date)</p> <p>If Yes: STOP here, form complete</p> |
| 7. What is the plan for scheduling re-collection OraSure confirmatory results appointment? | <p>(ctn0032cdd:HIVRC.RC07 / Plan result 2)</p> <p>[1] <input type="radio"/> Visit scheduled Date of scheduled visit: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRC.RC07VDT / Sched result 2 date) [2] <input type="radio"/> Staff will attempt to contact participant to schedule visit [3] <input type="radio"/> Participant continues to refuse [4] <input type="radio"/> Participant lost to follow-up [5] <input type="radio"/> Other (specify): (ctn0032cdd:HIVRC.RC07sp / Specify other plan) <input type="text"/></p> |

A200

* Item is not required

| CDD: ctn0032cdd Table: HIVRC Key Type: PATIENTVISIT | | |
|---|--------------------|-------------|
| Column Name | Column Data Type | Design Note |
| RC01 | STRING(5) - A5 | |
| RC02DT | DATE - DDMONYYYY | |
| RC03 | STRING(42) | |
| RC03a | NUMERIC | |
| RC03sp | STRING(200) - A200 | |
| RC03SDT | DATE - DDMONYYYY | |
| RC03PDT | DATE - DDMONYYYY | |
| RC03b | STRING(30) - A30 | |
| RC03KDT | DATE - DDMONYYYY | |
| RC04 | NUMERIC | |
| RC04DT | DATE - DDMONYYYY | |
| RC04sp | STRING(200) - A200 | |
| RC05SDT | DATE - DDMONYYYY | |
| RC05PDT | DATE - DDMONYYYY | |
| RC05b | STRING(30) - A30 | |
| RC05KDT | DATE - DDMONYYYY | |
| RC06 | NUMERIC | |
| RC06a | NUMERIC | |
| RC06sp | STRING(200) - A200 | |
| RC06CDT | DATE - DDMONYYYY | |
| RC07 | NUMERIC | |
| RC07VDT | DATE - DDMONYYYY | |
| RC07sp | STRING(200) - A200 | |

| ctn0032 : OraSure HIV Confirmatory Re-Collection Results (HIVRCO) | |
|---|---|
| 1. Staff ID | A5 (ctn0032cdd:HIVRCO.RCO01 / STAFF ID) |
| 2. Date form completed: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRCO.RCO02DT / HIVRCO form date) |
| 3. Did CTP receive re-collection OraSure confirmatory HIV test result? | <p>(ctn0032cdd:HIVRCO.RCO03 / CTP result 2)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVRCO.RCO03a / Reason CTP no result 2) No-- Provide reason: [1] <input type="radio"/> Lab lost sample [2] <input type="radio"/> Sample lost in mail [3] <input type="radio"/> Other (specify): (ctn0032cdd:HIVRCO.RCO03sp / Specify other) <input type="text" value="A200"/></p> <p>If No: Go to question 3b.</p> <p>[1] <input type="radio"/> Yes-- Provide Date: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRCO.RCO03DT / Referral dt of rep confirm) If Yes: Go to question 4.</p> |
| 4. 3b. Was participant referred for confirmatory testing using blood specimen? | <p>(ctn0032cdd:HIVRCO.RCO03bl / Part. referred for sample 3)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVRCO.RCO03b / Reason no sample 3 referral) No-- Provide reason: [1] <input type="radio"/> Incorrect/non-working contact information [2] <input type="radio"/> Staff forgot [3] <input type="radio"/> Participant refuses [4] <input type="radio"/> Participant stated: did not have time [5] <input type="radio"/> Participant left without notifying staff [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVRCO.RCO03bsp / Specify other) <input type="text" value="A200"/></p> <p>[1] <input type="radio"/> Yes Date CTP received recollection confirmatory results: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRCO.RCO3DT / Date CTP rec'd result 2)</p> <p>STOP form here</p> |
| 5. 4. What is result of re-collection OraSure confirmatory HIV test? | <p>(ctn0032cdd:HIVRCO.RCO04 / Result of sample 2)</p> <p>[2] <input type="radio"/> Indeterminate-- Complete Question 4a</p> <p>[1] <input type="radio"/> (ctn0032cdd:HIVRCO.RCO04fr / Finger stick reactive) Positive Was fingerstick reactive? [1] <input type="radio"/> Yes-- Go to question 5 [0] <input type="radio"/> No-- Go to Question 4a</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVRCO.RCO04nr / Finger stick non-reactive) Negative Was fingerstick non-reactive? [1] <input type="radio"/> Yes-- Go to question 5 [0] <input type="radio"/> No-- Go to Question 4a</p> |
| 6. 4a. Was participant referred for confirmatory testing using blood specimen? | <p>(ctn0032cdd:HIVRCO.RCO04IA / Rep confirmatory referral)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVRCO.RCO04IB / Reason no rep confirm ref) No-- Provide reason: [1] <input type="radio"/> Incorrect/non-working contact information [2] <input type="radio"/> Staff forgot [3] <input type="radio"/> Participant refuses [4] <input type="radio"/> Participant stated: did not have time [5] <input type="radio"/> Participant left without notifying staff [6] <input type="radio"/> Other (specify): (ctn0032cdd:HIVRCO.RCO04ISP / Specify other) <input type="text" value="A200"/></p> <p>[1] <input type="radio"/> Yes Provide Date: Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:HIVRCO.RCO04IDT / Rep. confirm referral date)</p> |
| 7. 5. Did the participant receive the re-collection OraSure confirmatory HIV test result? | <p>(ctn0032cdd:HIVRCO.RCO05 / Part. receive test 2 result)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVRCO.RCO05a / Reason no test 2 result) No-- Provide reason:</p> |

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|------------------------|--|---|
| | | <p>[1] <input type="radio"/> Participant failed to return to study [2] <input type="radio"/> Participant failed to return to treatment program [3] <input type="radio"/> Participant refused confirmatory test result [4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVRCO.RCO05sp / Specify other reason) <input type="text" value="A200"/></p> <p>[1] <input type="radio"/> Yes Date participant received re-collection OraSure confirmatory results: <input type="text" value="Req"/> / <input type="text" value="Req"/> / <input type="text" value="Req"/> (2008-2012) (ctn0032cdd:HIVRCO.RCO05dt / Date result 2 rec'd)</p> <p>If Yes: STOP here, form complete</p> |
| 8.* | 5a. What is the plan to provide re-collection OraSure confirmatory reactive HIV result? | <p>(ctn0032cdd:HIVRCO.RCO05p / Plan to provide result 2) [1] <input type="radio"/> Visit scheduled: Date of scheduled visit: <input type="text" value="Req"/> / <input type="text" value="Req"/> / <input type="text" value="Req"/> (2008-2012) (ctn0032cdd:HIVRCO.RCO05pdt / Date result 2 visit) [2] <input type="radio"/> Staff will attempt to contact participant to schedule results visit [3] <input type="radio"/> Other (specify): (ctn0032cdd:HIVRCO.RCO05ps / Specify plan) <input type="text" value="A200"/></p> |
| 9.* | 6. Did participant receive re-collection OraSure confirmatory HIV test result at a later date? | <p>(ctn0032cdd:HIVRCO.RCO06 / Result 2 at later date) [0] <input type="radio"/> (ctn0032cdd:HIVRCO.RCO06a / Reason no result 2) No-- Provide reason: [1] <input type="radio"/> Participant continues to refuse [2] <input type="radio"/> Participant lost to follow-up [3] <input type="radio"/> Other (specify): (ctn0032cdd:HIVRCO.RCO06sp / Specify other) <input type="text" value="A200"/></p> <p>[1] <input type="radio"/> Yes Date participant received re-collection OraSure confirmatory results: <input type="text" value="Req"/> / <input type="text" value="Req"/> / <input type="text" value="Req"/> (2008-2012) (ctn0032cdd:HIVRCO.RCO06dt / Date result 2 rec'd later)</p> |
| * Item is not required | | |

CDD: ctn0032cdd Table: HIVRCO Key Type: PATIENTVISIT

| Column Name | Column Data Type | Design Note |
|-------------|--------------------|-------------|
| RCO01 | STRING(5) - A5 | |
| RCO02DT | DATE - DDMONYYYY | |
| RCO03 | NUMERIC | |
| RCO03a | NUMERIC | |
| RCO03sp | STRING(200) - A200 | |
| RCO03DT | DATE - DDMONYYYY | |
| RCO03bl | NUMERIC | |
| RCO03b | NUMERIC | |
| RCO03bsp | STRING(200) - A200 | |
| RCO3DT | DATE - DDMONYYYY | |
| RCO04 | NUMERIC | |
| RCO04fr | NUMERIC | |
| RCO04nr | NUMERIC | |
| RCO04IA | NUMERIC | |
| RCO04IB | NUMERIC | |
| RCO04ISP | STRING(200) - A200 | |
| RCO04IDT | DATE - DDMONYYYY | |
| RCO05 | NUMERIC | |
| RCO05a | NUMERIC | |
| RCO05sp | STRING(200) - A200 | |
| RCO05dt | DATE - DDMONYYYY | |

| | | |
|----------|--------------------|--|
| RCO05p | NUMERIC | |
| RCO05pdt | DATE - DDMONYYYY | |
| RCO05ps | STRING(200) - A200 | |
| RCO06 | NUMERIC | |
| RCO06a | NUMERIC | |
| RCO06sp | STRING(200) - A200 | |
| RCO06dt | DATE - DDMONYYYY | |

| ctn0032 : Confirmatory Positive of HIV Results (HIVPOS) | |
|--|---|
| 1. 1. Staff ID: | A5 (ctn0032cdd:HIVPOS.POS01 / Staff ID) |
| 2. 2. Was participant assessed for potential suicidality? | <p>(ctn0032cdd:HIVPOS.POS02 / Suicidality)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVPOS.POS02a / Reason no suicidality)</p> <p>No-- Provide reason:</p> <p>[1] <input type="radio"/> Staff forgot</p> <p>[2] <input type="radio"/> Participant refused to discuss</p> <p>[3] <input type="radio"/> Participant stated: did not have time</p> <p>[4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVPOS.POS02sp / Specify other)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes</p> |
| 3. 3. Were referrals provided? | <p>(ctn0032cdd:HIVPOS.POS03 / Referrals provided)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVPOS.POS03a / Reason no referrals)</p> <p>No-- Provide reason:</p> <p>[1] <input type="radio"/> Staff will contact participant to provide referrals</p> <p>[2] <input type="radio"/> Participant stated: refuses referrals</p> <p>[3] <input type="radio"/> Other (specify): (ctn0032cdd:HIVPOS.POS03sp / Specify other)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes-- Specify referrals provided (check all that apply):</p> <p>(ctn0032cdd:HIVPOS.POS03b / HIV primary care)</p> <p>[1] <input type="checkbox"/> HIV primary care</p> <p>(ctn0032cdd:HIVPOS.POS03c / Social support)</p> <p>[1] <input type="checkbox"/> Social support</p> <p>(ctn0032cdd:HIVPOS.POS03d / Mental health)</p> <p>[1] <input type="checkbox"/> Mental health</p> <p>(ctn0032cdd:HIVPOS.POS03e / Other referral)</p> <p>[1] <input type="checkbox"/> Other (specify): (ctn0032cdd:HIVPOS.POS03rs / Specify other)</p> <p>A200</p> |
| 4. 4. Was participant encouraged or assisted in scheduling agency appointment? | <p>(ctn0032cdd:HIVPOS.POS04 / Agency appt. assistance)</p> <p>[0] <input type="radio"/> No</p> <p>[1] <input type="radio"/> Yes</p> |
| 5. 5. Was HIV information sheet provided to participant? | <p>(ctn0032cdd:HIVPOS.POS05 / HIV info sheet provided)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVPOS.POS05a / Reason no info sheet)</p> <p>No-- Provide reason:</p> <p>[1] <input type="radio"/> Staff forgot</p> <p>[2] <input type="radio"/> Participant refused</p> <p>[3] <input type="radio"/> Other (specify): (ctn0032cdd:HIVPOS.tcPOS05ac)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes</p> |
| 6. 6. Was check-in call/visit scheduled? | <p>(ctn0032cdd:HIVPOS.POS06 / Check-in call scheduled)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVPOS.POS06a / Reason no check-in call)</p> <p>No-- Provide reason:</p> <p>[1] <input type="radio"/> Participant stated: did not have time; staff will attempt to make check-in call</p> <p>[2] <input type="radio"/> Participant left without notifying staff; staff will attempt to make check-in call</p> <p>[3] <input type="radio"/> Participant refuses check-in call</p> <p>[4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVPOS.POS06sp / Specify other)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes</p> |
| 7. 7. Was risk reduction counseling provided? | <p>(ctn0032cdd:HIVPOS.POS07 / Risk reduction counseling)</p> <p>(ctn0032cdd:HIVPOS.POS07a / Reason no counseling)</p> |

| | | |
|----|--|---|
| | | <p>[0] <input type="radio"/> No-- Provide reason:</p> <p>[1] <input type="radio"/> Participant refused to discuss</p> <p>[2] <input type="radio"/> Participant left without notifying staff</p> <p>[3] <input type="radio"/> Participant stated: did not have time</p> <p>[4] <input type="radio"/> Other (specify): (ctn0032cdd:HIVPOS.POS07sp / Specify other)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes</p> |
| 8. | 8. Was Partner Notification Service provided or referral made? | <p>(ctn0032cdd:HIVPOS.POS08)</p> <p>[0] <input type="radio"/> (ctn0032cdd:HIVPOS.POS08a / Reason no PNS referral)</p> <p>No-- Provide reason:</p> <p>[1] <input type="radio"/> Staff will contact participant to provide referrals</p> <p>[2] <input type="radio"/> Participant refuses referrals</p> <p>[3] <input type="radio"/> Not locally available</p> <p>[4] <input type="radio"/> Not legally required</p> <p>[5] <input type="radio"/> Other (specify): (ctn0032cdd:HIVPOS.POS08sp / Specify other)</p> <p>A200</p> <p>[1] <input type="radio"/> Yes</p> |

CDD: ctn0032cdd Table: HIVPOS Key Type: PATIENTVISIT

| Column Name | Column Data Type | Design Note |
|-------------|--------------------|-------------|
| POS01 | STRING(5) - A5 | |
| POS02 | NUMERIC | |
| POS02a | NUMERIC | |
| POS02sp | STRING(200) - A200 | |
| POS03 | NUMERIC | |
| POS03a | NUMERIC | |
| POS03sp | STRING(200) - A200 | |
| POS03b | NUMERIC | |
| POS03c | NUMERIC | |
| POS03d | NUMERIC | |
| POS03e | NUMERIC | |
| POS03rs | STRING(200) - A200 | |
| POS04 | NUMERIC | |
| POS05 | NUMERIC | |
| POS05a | NUMERIC | |
| tcPOS05ac | STRING(200) - A200 | |
| POS06 | NUMERIC | |
| POS06a | NUMERIC | |
| POS06sp | STRING(200) - A200 | |
| POS07 | NUMERIC | |
| POS07a | NUMERIC | |
| POS07sp | STRING(200) - A200 | |
| POS08 | NUMERIC | |
| POS08a | NUMERIC | |
| POS08sp | STRING(200) - A200 | |

| ctn0032 : Follow-up Visit (VIS) | | |
|---------------------------------|---|---|
| 1. | 1. Staff ID: | A5 (ctn0032cdd:VIS.VIS01 / VISIT STAFF ID) |
| 2. | 2. Visit completed? | (ctn0032cdd:VIS.VIS02 / VIS02) [0] <input type="radio"/> No [1] <input type="radio"/> Yes Date of visit: Req / Req / Req (2008-2012) (ctn0032cdd:VIS.VIS02DT / VISIT DATE) |
| 3. | 3. Was ACASI completed? | (ctn0032cdd:VIS.VIS03 / ACASI completed) [0] <input type="radio"/> (ctn0032cdd:VIS.VIS03a / Reason ACASI not completed) No-- Provide primary reason: [1] <input type="radio"/> ACASI never started [2] <input type="radio"/> Participant's decision/changed mind [3] <input type="radio"/> Judgement of CTP Staff (specify): A200 (ctn0032cdd:VIS.VIS03sp / Specify other) [4] <input type="radio"/> Failed to return to study [5] <input type="radio"/> Failed to return to treatment program [6] <input type="radio"/> Unable to complete ACASI in appointed visit schedule [7] <input type="radio"/> Other (specify): A200 (ctn0032cdd:VIS.VIS03rs / Specify other) [1] <input type="radio"/> Yes |
| 4. | 4. Has a protocol violation regarding this participant been identified since the participant's last visit? | (ctn0032cdd:VIS.VIS04 / Protocol violation) [0] <input type="radio"/> No [1] <input type="radio"/> Yes-- Complete a Protocol Violation Log |
| 5. | 5. Does staff HIV testing log indicate that participant completed rapid HIV test on-site since randomization? | (ctn0032cdd:VIS.VIS05 / Log indicates test complete) [0] <input type="radio"/> No [1] <input type="radio"/> Yes Date test completed: Req / Req / Req (2008-2012) (ctn0032cdd:VIS.VIS05DT / MR date test completed) (ctn0032cdd:VIS.VIS05a / Log indicates result rec'd) Does the staff HIV testing log indicate that the participant received the result of this test? [0] <input type="radio"/> No [1] <input type="radio"/> Yes-- Date results received Req / Req / Req (2008-2012) (ctn0032cdd:VIS.VIS05adt / MR Date results rec'd) If Yes: STOP here, form complete |
| 6.* | 6. Did participant indicate that he/she had an HIV test performed off-site since randomization? | (ctn0032cdd:VIS.VIS06 / Off-site test performed) [0] <input type="radio"/> No-- STOP here, form complete [1] <input type="radio"/> Yes-- What method did the HIV test use? (ctn0032cdd:VIS.VIS06a / HIV testing method) [1] <input type="radio"/> Not indicated [2] <input type="radio"/> Rapid test using oral fluid [3] <input type="radio"/> Rapid test using fingerstick [4] <input type="radio"/> Rapid test using venipuncture [5] <input type="radio"/> Standard test using venipuncture (ctn0032cdd:VIS.VIS06b / HIV risk reduction counsel) Was HIV risk reduction counseling provided? [0] <input type="radio"/> No [1] <input type="radio"/> Yes [2] <input type="radio"/> Not Indicated |
| 7.* | 7. Has participant signed study medical records release form? | (ctn0032cdd:VIS.VIS07 / Med. Release form signed) [0] <input type="radio"/> (ctn0032cdd:VIS.VIS07a / Reason no med. Release) No-- Provide reason: [1] <input type="radio"/> Participant refused to sign medical release forms [2] <input type="radio"/> Other (specify): A200 (ctn0032cdd:VIS.VIS07SP / Specify other) [1] <input type="radio"/> Yes Date signed medical records release form: Req / Req / Req (2008-2012) (ctn0032cdd:VIS.VIS07DT / Med. records release date) |

* Item is not required

| CDD: ctn0032cdd Table: VIS Key Type: PATIENTVISIT | | |
|---|--------------------|-------------|
| Column Name | Column Data Type | Design Note |
| VIS01 | STRING(5) - A5 | |
| VIS02 | NUMERIC | |
| VIS02DT | DATE - DDMONYYYY | |
| VIS03 | NUMERIC | |
| VIS03a | NUMERIC | |
| VIS03sp | STRING(200) - A200 | |
| VIS03rs | STRING(200) - A200 | |
| VIS04 | NUMERIC | |
| VIS05 | NUMERIC | |
| VIS05DT | DATE - DDMONYYYY | |
| VIS05a | NUMERIC | |
| VIS05adt | DATE - DDMONYYYY | |
| VIS06 | NUMERIC | |
| VIS06a | NUMERIC | |
| VIS06b | NUMERIC | |
| VIS07 | NUMERIC | |
| VIS07a | NUMERIC | |
| VIS07SP | STRING(200) - A200 | |
| VIS07DT | DATE - DDMONYYYY | |

| ctn0032 : Expected Events (EE) | | |
|--------------------------------|--|---|
| 1. | 1. Staff ID: | A5 (ctn0032cdd:EE.EEID / Staff ID) |
| 2. | 2. Anxiety: | <p>(ctn0032cdd:EE.EE01 / Anxiety)</p> <p>[0] <input type="radio"/> No</p> <p>[1] <input type="radio"/> Yes-- Complete Frequency and Severity: (ctn0032cdd:EE.EE02 / Freq. of anxiety) Frequency [1] <input type="radio"/> Once or more/day [2] <input type="radio"/> 2-6 times/week [3] <input type="radio"/> Once/week [4] <input type="radio"/> 1-3 times/month [5] <input type="radio"/> Less than once a month (ctn0032cdd:EE.EE03 / Severity of anxiety) Severity [1] <input type="radio"/> Mild [2] <input type="radio"/> Moderate [3] <input type="radio"/> Severe [4] <input type="radio"/> Life Threatening-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EE.EE03a / Anxiety explain life threat) [5] <input type="radio"/> Death-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EE.EE03b / Anxiety explain death)</p> |
| 3. | 3. Depression: | <p>(ctn0032cdd:EE.EE04 / Depression)</p> <p>[0] <input type="radio"/> No</p> <p>[1] <input type="radio"/> Yes-- Complete Frequency and Severity: (ctn0032cdd:EE.EE05 / Freq. of depression) Frequency [1] <input type="radio"/> Once or more/day [2] <input type="radio"/> 2-6 times/week [3] <input type="radio"/> Once/week [4] <input type="radio"/> 1-3 times/month [5] <input type="radio"/> Less than once a month (ctn0032cdd:EE.EE06 / Severity of depression) Severity [1] <input type="radio"/> Mild [2] <input type="radio"/> Moderate [3] <input type="radio"/> Severe [4] <input type="radio"/> Life Threatening-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EE.EE06a / Depress explain life threat) [5] <input type="radio"/> Death-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EE.EE06b / Depress explain death)</p> |
| 4. | 4. Friends treating participant differently: | <p>(ctn0032cdd:EE.EE07 / Friends treat differ.)</p> <p>[0] <input type="radio"/> No</p> <p>[1] <input type="radio"/> Yes-- Complete Frequency and Severity: (ctn0032cdd:EE.EE08 / Freq. friends treat differ) Frequency [1] <input type="radio"/> Once or more/day [2] <input type="radio"/> 2-6 times/week [3] <input type="radio"/> Once/week [4] <input type="radio"/> 1-3 times/month (ctn0032cdd:EE.EE09 / Severity friends differ.) Severity [1] <input type="radio"/> Mild [2] <input type="radio"/> Moderate [3] <input type="radio"/> Severe [4] <input type="radio"/> Life Threatening-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EE.EE09a / Friends explain life threat) [5] <input type="radio"/> Death-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EE.EE09b / Friends explain death)</p> |
| 5. | 5. Worry about confidentiality: | (ctn0032cdd:EE.EE10 / Confidentiality) [0] <input type="radio"/> No |

| | | |
|-----|--|---|
| | | <p>[1] <input type="radio"/> Yes-- Complete Frequency and Severity: (ctn0032cdd:EE.EE11 / Freq. of confidentiality) Frequency [1] <input type="radio"/> Once or more/day [2] <input type="radio"/> 2-6 times/week [3] <input type="radio"/> Once/week [4] <input type="radio"/> 1-3 times/month (ctn0032cdd:EE.EE12 / Severity of confid.) Severity [1] <input type="radio"/> Mild [2] <input type="radio"/> Moderate [3] <input type="radio"/> Severe [4] <input type="radio"/> Life Threatening-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EE.EE12a / Explain life threat) [5] <input type="radio"/> Death-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EE.EE12b / Confident explain death)</p> |
| 6. | 6. Partner abuse/domestic violence: | <p>(ctn0032cdd:EE.EE13 / Domestic violence) [0] <input type="radio"/> No [1] <input type="radio"/> Yes-- Complete Frequency and Severity: (ctn0032cdd:EE.EE14 / Freq. of violence) Frequency [1] <input type="radio"/> Once or more/day [2] <input type="radio"/> 2-6 times/week [3] <input type="radio"/> Once/week [4] <input type="radio"/> 1-3 times/month (ctn0032cdd:EE.EE15 / Severity of violence) Severity [1] <input type="radio"/> Mild [2] <input type="radio"/> Moderate [3] <input type="radio"/> Severe [4] <input type="radio"/> Life Threatening-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EE.EE15a / Viol explain life threat) [5] <input type="radio"/> Death-- Complete SAE form Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EE.EE15b / Viol explain death)</p> |
| 7. | 7. New unstable housing environments: | <p>(ctn0032cdd:EE.EE16 / Unstable housing) [0] <input type="radio"/> No [1] <input type="radio"/> Yes Please Explain: <input type="text" value="A200"/> (ctn0032cdd:EE.EE16a / Unstable house explanation)</p> |
| 8. | 8. Increase in substance use\abuse: | <p>(ctn0032cdd:EE.EE17 / Sub Abuse) [0] <input type="radio"/> No [1] <input type="radio"/> Yes-- Complete Frequency: (ctn0032cdd:EE.EE18 / Frequency of sub. Abuse) Frequency [1] <input type="radio"/> Once or more/day [2] <input type="radio"/> 2-6 times/week [3] <input type="radio"/> Once/week [4] <input type="radio"/> 1-3 times/month</p> |
| 9.* | Type of Substance Used: (check all that apply) | <p>(ctn0032cdd:EE.EE19a / Alcohol) [1] <input type="checkbox"/> Alcohol (ctn0032cdd:EE.EE19b / Ecstasy) [1] <input type="checkbox"/> Ecstasy (E, X, MDMA) (ctn0032cdd:EE.EE19c / GHB) [1] <input type="checkbox"/> GHB (gamma hydroxybuturic acid, G, GBL) (ctn0032cdd:EE.EE19d / Heroin) [1] <input type="checkbox"/> Heroin (ctn0032cdd:EE.EE19e / Marijuana) [1] <input type="checkbox"/> Marijuana (ctn0032cdd:EE.EE19f / Methamphetamine) [1] <input type="checkbox"/> Methamphetamines, other amphetamine (Crystal Meth, Speed, Tina) (ctn0032cdd:EE.EE19g / Hallucinogens) [1] <input type="checkbox"/> Other hallucinogens (LSD, mushrooms, peyote, mescaline) (ctn0032cdd:EE.EE19h / PCP) [1] <input type="checkbox"/> PCP (Angel Dust, wet, wicky sticks)</p> |

| | | |
|------------------------|----------------------|---|
| | | <p>(ctn0032cdd:EE.EE19i / Poppers) [1] <input type="checkbox"/> Poppers (amyl nitrate) (ctn0032cdd:EE.EE19j / Cocaine) [1] <input type="checkbox"/> Powdered cocaine (ctn0032cdd:EE.EE19ja / Rock cocaine) [1] <input type="checkbox"/> Rock or crack cocaine (ctn0032cdd:EE.EE19k / Ketamine) [1] <input type="checkbox"/> Ketamine (Special K, K) (ctn0032cdd:EE.EE19l / Rec Drugs) [1] <input type="checkbox"/> Recreational use of prescription drugs or pain killers to get high (Codeine, Vicodin or Hydrocodone, Percocet, Darvon, Oxycontin or Oxycodone, Demerol, Dilaudid) (ctn0032cdd:EE.EE19m / Tranquilizers) [1] <input type="checkbox"/> Tranquilizers or barbituates (Valium, Librium, Seconal, Xanax, Ambien, Lorazepam, Rohypnol/Roofies) (ctn0032cdd:EE.EE19n / Viagra) [1] <input type="checkbox"/> Viagra or similar drugs (Levitra, Cialis)</p> |
| 10.* | 9. General Comments: | <div style="border: 1px solid black; padding: 2px;">A200</div> (ctn0032cdd:EE.EE20 / General Comments) |
| * Item is not required | | |

| CDD: ctn0032cdd Table: EE Key Type: PATIENTVISIT | | |
|--|--------------------|-------------|
| Column Name | Column Data Type | Design Note |
| EEID | STRING(5) - A5 | |
| EE01 | NUMERIC | |
| EE02 | NUMERIC | |
| EE03 | NUMERIC | |
| EE03a | STRING(200) - A200 | |
| EE03b | STRING(200) - A200 | |
| EE04 | NUMERIC | |
| EE05 | NUMERIC | |
| EE06 | NUMERIC | |
| EE06a | STRING(200) - A200 | |
| EE06b | STRING(200) - A200 | |
| EE07 | NUMERIC | |
| EE08 | NUMERIC | |
| EE09 | NUMERIC | |
| EE09a | STRING(200) - A200 | |
| EE09b | STRING(200) - A200 | |
| EE10 | NUMERIC | |
| EE11 | NUMERIC | |
| EE12 | NUMERIC | |
| EE12a | STRING(200) - A200 | |
| EE12b | STRING(200) - A200 | |
| EE13 | NUMERIC | |
| EE14 | NUMERIC | |
| EE15 | NUMERIC | |
| EE15a | STRING(200) - A200 | |
| EE15b | STRING(200) - A200 | |
| EE16 | NUMERIC | |
| EE16a | STRING(200) - A200 | |
| EE17 | NUMERIC | |
| EE18 | NUMERIC | |
| EE19a | NUMERIC | |
| EE19b | NUMERIC | |
| EE19c | NUMERIC | |
| EE19d | NUMERIC | |

| | | |
|--------|--------------------|--|
| EE19e | NUMERIC | |
| EE19f | NUMERIC | |
| EE19g | NUMERIC | |
| EE19h | NUMERIC | |
| EE19i | NUMERIC | |
| EE19j | NUMERIC | |
| EE19ja | NUMERIC | |
| EE19k | NUMERIC | |
| EE19l | NUMERIC | |
| EE19m | NUMERIC | |
| EE19n | NUMERIC | |
| EE20 | STRING(200) - A200 | |

| ctn0032 : HIV Off-Site Expenses (HIVEXP) | |
|--|--|
| 1. Staff ID: | A5 (ctn0032cdd:HIVEXP.EXP01 / Staff ID) |
| 2. Estimated distance from home to off-site HIV Testing Location: | (ctn0032cdd:HIVEXP.EXP02 / Location distance) [1] <input type="radio"/> Less than 1 mile [2] <input type="radio"/> Between 1 and 5 miles [3] <input type="radio"/> Between 5 and 10 miles [4] <input type="radio"/> Between 10 and 25 miles [5] <input type="radio"/> Greater than 25 miles |
| 3. Mode of travel to off-site HIV testing location: | (ctn0032cdd:HIVEXP.EXP03 / Mode of travel) [1] <input type="radio"/> By Public Transportation, One way fare: \$ xxx.x (ctn0032cdd:HIVEXP.EXP03a / Public transportation fare) [2] <input type="radio"/> By Private Car [3] <input type="radio"/> By Taxi, One way fare: \$ xxx.x (ctn0032cdd:HIVEXP.EXP03b / Taxi fare) [4] <input type="radio"/> By Walking [5] <input type="radio"/> Other (specify): <input type="text" value="A200"/> (ctn0032cdd:HIVEXP.EXP03sp / Other travel mode) |
| 4. Duration of one-way travel time to off-site HIV testing location: | xxx minutes (ctn0032cdd:HIVEXP.EXP04MN / Travel time) |
| 5. Estimated waiting time at off-site HIV testing location: | (ctn0032cdd:HIVEXP.EXP05a / Waiting time) [1] <input type="radio"/> Tested and received results in same day Total wait time for single day (minutes): xxx (ctn0032cdd:HIVEXP.EXP05aMN / Waiting time same day) [2] <input type="radio"/> Tested and received results in two separate days: Day 1 Total wait time (minutes): xxx (ctn0032cdd:HIVEXP.EXP05bMN / Waiting time Day 1) Day 2 Total wait time (minutes): xxx (ctn0032cdd:HIVEXP.EXP05cMN / Waiting time Day 2) |

| Column Name | Column Data Type | Design Note |
|-------------|--------------------|-------------|
| EXP01 | STRING(5) - A5 | |
| EXP02 | NUMERIC | |
| EXP03 | NUMERIC | |
| EXP03a | FLOAT - F7.2 | |
| EXP03b | FLOAT - F7.2 | |
| EXP03sp | STRING(200) - A200 | |
| EXP04MN | NUMERIC - N3 | |
| EXP05a | NUMERIC | |
| EXP05aMN | NUMERIC - N3 | |
| EXP05bMN | NUMERIC - N3 | |
| EXP05cMN | NUMERIC - N3 | |

| ctn0032 : Testing Record Verification (HTVR) | | |
|--|---|---|
| 1. | 1. Staff ID: | A5 (ctn0032cdd:HTVR.TVR01 / Staff ID) |
| 2. | 2. Were medical records from off-site location reviewed to verify information regarding HIV testing status? | (ctn0032cdd:HTVR.TVR02 / Reviewed medical record) [0] <input type="radio"/> (ctn0032cdd:HTVR.TVR02a / Reason no med. rec. review) No-- Provide Primary reason: [1] <input type="radio"/> Staff forgot [2] <input type="radio"/> HIV testing site would not release records [3] <input type="radio"/> No records found [4] <input type="radio"/> Anonymous testing site [5] <input type="radio"/> Other (specify): A200 (ctn0032cdd:HTVR.TVR02sp / No med. rec. review specify) If No: STOP here, form complete [1] <input type="radio"/> Yes |
| 3.* | 3. Do medical records indicate participant completed HIV test at anytime since randomization into study? | (ctn0032cdd:HTVR.TVR03 / Med rec. HIV test) [0] <input type="radio"/> No-- STOP here, form complete [1] <input type="radio"/> Yes-- Date test completed: Req/Unk <input type="text"/> / Req/Unk <input type="text"/> / Req/Unk <input type="text"/> (2008-2012) (ctn0032cdd:HTVR.TVR03DT / HIV Date) [2] <input type="radio"/> Insufficient data Explain: A200 (ctn0032cdd:HTVR.TVR03sp / Specify no HIV test) |
| 4.* | 4. Do medical records indicate what type of test was used? | (ctn0032cdd:HTVR.TVR04 / Test Performed) [0] <input type="radio"/> No [1] <input type="radio"/> (ctn0032cdd:HTVR.TVR04a / Type of Test) Yes-- Indicate test [1] <input type="radio"/> Rapid test with oral fluid [2] <input type="radio"/> Rapid test with fingerstick whole blood [3] <input type="radio"/> Rapid test with venipuncture whole blood and plasma specimens [4] <input type="radio"/> Non-rapid with venipuncture [5] <input type="radio"/> Other (Specify) A200 (ctn0032cdd:HTVR.TVR04sp / Specify Test Type) |
| 5.* | 5. Do medical records indicate that participant received HIV test results? | (ctn0032cdd:HTVR.TVR05 / Med rec part. rec'd result) [0] <input type="radio"/> No [1] <input type="radio"/> Yes-- Date received: Req/Unk <input type="text"/> / Req/Unk <input type="text"/> / Req/Unk <input type="text"/> (2008-2012) (ctn0032cdd:HTVR.TVR05DT / HIV results Date) [2] <input type="radio"/> Insufficient data Explain: A200 (ctn0032cdd:HTVR.TVR05sp / Specify no HIV result) |
| 6.* | 6. According to medical records, what was final HIV result? | (ctn0032cdd:HTVR.TVR06 / Med. rec. final HIV Res) [2] <input type="radio"/> Positive [1] <input type="radio"/> Indeterminate [0] <input type="radio"/> Negative [3] <input type="radio"/> Insufficient medical record data |

* Item is not required

| Column Name | Column Data Type | Design Note |
|-------------|--------------------|-------------|
| TVR01 | STRING(5) - A5 | |
| TVR02 | NUMERIC | |
| TVR02a | NUMERIC | |
| TVR02sp | STRING(200) - A200 | |
| TVR03 | NUMERIC | |
| TVR03DT | DATE - DDMMYYYY | |
| TVR03sp | STRING(200) - A200 | |
| TVR04 | NUMERIC | |

| | | |
|---------|--------------------|--|
| TVR04a | NUMERIC | |
| TVR04sp | STRING(200) - A200 | |
| TVR05 | NUMERIC | |
| TVR05DT | DATE - DDMONYYYY | |
| TVR05sp | STRING(200) - A200 | |
| TVR06 | NUMERIC | |

| ctn0032 : HIV Primary Care Medical (MRVPC) | | | | | | | |
|--|---|--|---|--|---|------------------------|----------------|
| 1. | 1. Staff ID: | A5 (ctn0032cdd:MRVPC.MRV01 / STAFF ID) | | | | | |
| 2. | 2. Date of abstraction: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:MRVPC.MRV02DT / Abstraction date) | | | | | |
| 3. | 3. Medical Record Source: | (ctn0032cdd:MRVPC.MRV03 / Med. Records source) [1] <input type="radio"/> Electronic [2] <input type="radio"/> Physical [3] <input type="radio"/> Both | | | | | |
| 4. | 4. Has participant had any primary care visits since randomization? | (ctn0032cdd:MRVPC.MRV04 / Primary care visits) [0] <input type="radio"/> No [1] <input type="radio"/> Yes -- Enter visit information | | | | | |
| 5. | 5. Visit Date | 6. Was Visit with an MD, DO, NP or PA who is an HIV Primary Care Provider? | 7. Did physician prescribe HIV related medicine | 8. Did the laboratory order include a CD4 and/or viral load? | 9. Date of specimen collection for CD4 count and/or viral load: | 10. Absolute CD4 Count | 11. Viral Load |

| Primary Care Visits Entry | | |
|---------------------------|--|--|
| 5.a | 5. Visit Date: | Req [v] / Req [v] / Req [v] (2008-2012) (ctn0032cdd:MRVPC2.MRV05DT / PC visit date) |
| 5.b | 6. Was Visit with an MD, DO, NP or PA who is an HIV Primary Care Provider? | (ctn0032cdd:MRVPC2.MRV06 / PC provider) [0] <input type="radio"/> No [1] <input type="radio"/> Yes [97] <input type="radio"/> Not Noted |
| 5.c | 7. Did physician prescribe HIV related medicine? | (ctn0032cdd:MRVPC2.MRV07 / HIV meds prescribed) [0] <input type="radio"/> No [1] <input type="radio"/> Yes [97] <input type="radio"/> Not Noted |
| 5.d | 8. Did the laboratory order include a CD4 and/or viral load? | (ctn0032cdd:MRVPC2.MRV08 / Lab order) [97] <input type="radio"/> Not Noted [1] <input type="radio"/> Yes |
| 5.e* | 9. Date of specimen collection for CD4 count and/or viral load: | Req/Unk [v] / Req/Unk [v] / Req [v] (2008-2012) (ctn0032cdd:MRVPC2.MRV09DT / Specimen collection date) |
| 5.f* | 10. Absolute CD4 Count: | (ctn0032cdd:MRVPC2.MRV10 / CD4 Count obtained) [1] <input type="radio"/> Count (ctn0032cdd:MRV10CNT / CD4 count value) xxxx (0 =< n <= 2000) [97] <input type="radio"/> Not Noted |
| 5.g* | 11. Viral Load: | (ctn0032cdd:MRVPC2.MRV11 / Viral load obtained) [1] <input type="radio"/> Load (ctn0032cdd:MRV11LD / Viral load value) xxxxxxxx (0 =< n <= 8000000) [99] <input type="radio"/> Not detectable [97] <input type="radio"/> Not Noted |

* Item is not required

| CDD: ctn0032cdd Table: MRVPC Key Type: PATIENTVISIT | | |
|---|------------------|-------------|
| Column Name | Column Data Type | Design Note |
| MRV01 | STRING(5) - A5 | |
| MRV02DT | DATE - DDMONYYYY | |
| MRV03 | NUMERIC | |
| MRV04 | NUMERIC | |

| CDD: ctn0032cdd Table: MRVPC2 Key Type: PATIENTVISIT | | |
|--|------------------|-------------|
| Column Name | Column Data Type | Design Note |
| MRV05DT | DATE - DDMONYYYY | |

| | | |
|----------|------------------|--|
| MRV06 | NUMERIC | |
| MRV07 | NUMERIC | |
| MRV08 | NUMERIC | |
| MRV09DT | DATE - DDMONYYYY | |
| MRV10 | NUMERIC | |
| MRV10CNT | NUMERIC - N4 | |
| MRV11 | NUMERIC | |
| MRV11LD | NUMERIC - N7 | |

CRB Electronic Signature Affidavit

By my dated signature below, I, **[First Name] [Last Name]**, verify that all case report form pages accurately display the results of the examinations, tests, evaluations and treatments performed on this patient.

Pursuant to Section 11.100 of Title 21 of the Code of Federal Regulations, this is to certify that I intend that this electronic signature is to be the legally binding equivalent of my handwritten signature.

To this I do attest by supplying my user name and password and clicking the button marked **Submit** below.

CRF Electronic Signature Affidavit

By my dated signature below, I, **[First Name] [Last Name]**, verify that this case report form accurately displays the results of the examinations, tests, evaluations and treatments noted within.

Pursuant to Section 11.100 of Title 21 of the Code of Federal Regulations, this is to certify that I intend that this electronic signature is to be the legally binding equivalent of my handwritten signature.

To this I do attest by supplying my user name and password and clicking the button marked **Submit** below.

**Audio Computer-Assisted Self-Interview (ACASI) Data
Dictionary**

(Database entitled “weeklyftp”)

| Field Name | Field Label | Question Wording ² | Control Type ³ | Max Response Length ⁴ | Data Type | Codelist Name |
|------------|--------------------------------|--|---------------------------|----------------------------------|-----------|---------------|
| BEGIN | Start Assessment | BEGIN Administration | | | | |
| ADM01 | Pt ID | Enter participant's ID | text | 15 | numeric | |
| ADM02 | Confirm ID | Re-enter participant's ID | text | 15 | numeric | |
| ADM02EDIT | | READ: The participant's ID numbers you entered are not the same. Please correct the participant's ID. | | | | |
| ADM03 | CTP Site | Community Treatment Program Site. (Choose one) | multiple choice | 2 | numeric | CTPSIT E |
| ADM04 | Host Initials | Enter interviewer's initials | text | 3 | text | |
| ADM05 | Visit | Assessment point | multiple choice | 2 | numeric | VISIT |
| ADM05READ | | READ: You have indicated that this is not a baseline assessment point, but you are currently using the baseline instrument. If this is a baseline interview, please select BASELINE assessment. | | | | |
| ADM06 | Assessment Date | Date of Assessment - Beginning - Default - Today's date from NKI server | date | 10 | date | |
| ADM07 | Language | Language (choose one) | multiple choice | 2 | numeric | LANGUA GE |
| ADM07READ | | READ: You have indicated that this is not an English version, but you are currently using the English instrument. If this is an English interview, please select ENGLISH version. | | | | |
| ADM08 | DOB | Participant's date of birth | date | 10 | date | |
| ADMFV1 | Age | FLOATER VARIABLE: Age calculated: (ADM06 - ADM08)/365.25 | numeric | 3 | numeric | |
| ADM09 | Randomization date | Please enter the date that this participant was randomized (from INFORM) | date | 10 | date | |
| ADM09A | Re-entry of randomization date | Re-enter date that this participant was randomized | date | 10 | date | |
| ADM010EDIT | | READ: The participant's randomization dates you entered are not the same. Please correct the participant's randomization date. | | | | |
| ADM10 | Month 1 assessment date | Date of 1-month Assessment | date | 10 | date | 15 |
| BEGIN | Start Assessment | BEGIN Practice | | | | |

| | | | | | | |
|-------------|------------------------|--|-----------------|---|---------|---------|
| DEM01READ | | READ: The interview is about to begin. We want to remind you that everything you tell us is completely confidential. This means we will not give information about you to anyone, including staff of this Community Treatment Program. You can now <i>select</i> the 'Next Question' button to begin. | | | | |
| BEGIN | Start Assessment | BEGIN Demographics | | | | |
| DEM01READ1 | | READ: The first of several questions are about your personal characteristics. | | | | |
| DEM01 | Gender | What is your sex or gender? (Choose one) | multiple choice | 2 | numeric | SEX1 |
| DEM02 | Birth | Were you born male or female ? | multiple choice | 2 | numeric | SEX2 |
| DEM03 | Genital Surgery | Have you had surgery to remove or change your genitals? | yes/no | 2 | numeric | |
| DEM03READ | | READ: "For the purpose of this survey, please answer the questions as a MALE." | | | | |
| DEM03READ1 | | READ: "For the purpose of this survey, please answer the questions as a FEMALE." | | | | |
| DEMSEX | Derived gender | FLOATER VARIABLE: Sex | | | | |
| DEM04 | Education | How much formal education have you completed? | multiple choice | 2 | numeric | EDUCATE |
| DEM05 | Current Employment | Are you currently employed? | yes/no | 2 | numeric | |
| DEM06 | Employment description | Which best describes your employment? | multiple choice | 2 | numeric | EMPLOY |
| DEM07 | Marital Status | What is your current, legal marital status? | multiple choice | 2 | numeric | MARITAL |
| DEM08 | Children | How many children under the age of 18 years live with you? | numeric | 2 | numeric | None |
| DEM09 | Sleep last 6 mos | During the past six months, where did you live or sleep most of the time? (Choose one) | multiple choice | 2 | numeric | SLEEP |
| DEM10 | Income | What was your total personal income in the last year from all sources? (Choose one) | multiple choice | 2 | numeric | INCOME |
| DEM11 | Insurance | What type(s) of health insurance do you have? (check all that apply) | all that apply | 2 | numeric | |
| DEM11multi0 | No insurance | None | | 2 | numeric | |
| DEM11multi1 | Medicare | Medicare | | 2 | numeric | |
| DEM11multi2 | Medicaid | Medicaid | | 2 | numeric | |
| DEM11multi3 | Veterans Affairs | Veterans Affairs | | 2 | numeric | |
| DEM11multi4 | Private Insurance | Private Insurance | | 2 | numeric | |
| DEM11multi5 | Other Insurance | Other | | 2 | numeric | |

| | | | | | | |
|-----------|-------------------------|--|-----------------|----|---------|--------|
| DEM11sp | Insurance, Specify | Specify other insurance: | text | 50 | text | |
| DEM12 | SUT Program | Was admission to this substance use treatment program prompted by the criminal justice system? (such as judge, probation/parole officer, etc.) | yes/no | 2 | numeric | |
| DEM13 | Parole/Probat | Are you on parole or probation? | multiple choice | 2 | numeric | PAROLE |
| DEM14 | Jail ever | Have you ever been in jail, prison, or a correctional facility? | yes/no | 2 | numeric | |
| DEM15 | Jail last 6 mos | In the last 6 months, have you ever been in jail, prison, or a correctional facility? | yes/no | 2 | numeric | |
| DEM16 | Time in jail last 6 mos | In the last 6 months, how much time have you spent in jail, prison, or a correctional facility? | multiple choice | 2 | numeric | JAIL6 |
| DEM17 | Awaiting charges | Are you presently awaiting charges, trial, or sentencing? | yes/no | 2 | numeric | |
| BEGIN | Start Assessment | BEGIN HIV Testing History | | | | |
| HXT01READ | HIV Questions | READ: "The next several questions are about HIV testing." | | | | |
| HXT01 | Tested for HIV | Have you ever been tested for HIV? | yes/no | 2 | numeric | |
| HXTFV1 | Eligible | FLOATER VARIABLE: Eligible | | | | |
| HXT01a | Times tested | Since you entered this study on [insert ADM09], how many times have you been tested for HIV? Note: Please count ANY test, including any test that was a part of this study. | numeric | 2 | DR | |
| HXT01b | Times received results | Of the [insert HXT01a] times you were tested for HIV since you entered this study on [insert ADM09], how many times did you get the results of those tests? | numeric | 2 | numeric | |

| | | | | | | |
|--------------|-----------------------------------|---|----------------|----|---------|--|
| HXT02 | Never tested for HIV | Why have you never been tested for HIV? (check up to three) | all that apply | 2 | numeric | |
| HXT02multi0 | Not at risk for HIV | I am not at risk for HIV | | 2 | numeric | |
| HXT02multi1 | No transportation | I don't have transportation to a testing site. | | 2 | numeric | |
| HXT02multi2 | Unknown site | I don't know where to go for testing. | | 2 | numeric | |
| HXT02multi3 | No time | I don't have enough time. | | 2 | numeric | |
| HXT02multi4 | No child care | I don't have child care. | | 2 | numeric | |
| HXT02multi5 | Site too far away | The testing site is too far away. | | 2 | numeric | |
| HXT02multi6 | Testing site personnel | I don't like people at the testing site. | | 2 | numeric | |
| HXT02multi7 | confidentiality breach | I am worried about confidentiality. | | 2 | numeric | |
| HXT02multi8 | Might be recognized | I might be recognized at the testing site. | | 2 | numeric | |
| HXT02multi9 | No cure | There is no cure so why get tested? | | 2 | numeric | |
| HXT02multi10 | can't afford test | I can't afford the HIV test | | 2 | numeric | |
| HXT02multi11 | can't afford treatment | I can't afford treatment, so why get tested? | | 2 | numeric | |
| HXT02multi12 | Fear of results | I don't want to know results. | | 2 | numeric | |
| HXT02multi13 | Losing insurance | I am afraid of losing my health insurance. | | 2 | numeric | |
| HXT02multi14 | Losing job | I am afraid of losing my job. | | 2 | numeric | |
| HXT02multi15 | Losing partner | I am afraid of losing my partner. | | 2 | numeric | |
| HXT02multi16 | Other reason for not being tested | Other | | 2 | numeric | |
| HXT02sp | Never tested for HIV specify | Please specify other reason you have never been tested for HIV. | text | 50 | text | |
| HXT03 | Times tested for HIV lifetime | How many times have you been tested for HIV in your lifetime? | numeric | 3 | numeric | |
| HXTRA3 | | Please call study staff person for clarification. | yes/no | 2 | numeric | |

| | | | | | | |
|--------|---|--|-----------------|---|---------|--------------|
| | | About how many times of these [Response to HXT03] times that you tested for HIV in your lifetime did you receive your HIV test results? | | | | |
| HXT04 | Times received HIV results lifetime | ACASI screen reads the same as the above, however, the ACASI voice states this (and will remain as this): --About how many of these [Response to HXT03] times that you tested for HIV in your lifetime did you receive your HIV test results? | numeric | 3 | numeric | |
| HXTRA4 | | Please call study staff person for clarification. | yes/no | 2 | numeric | |
| HXTFV4 | Unreceived results lifetime | FLOATER Variable: Unreceived(HXTFV4) = HXT03-HXT04 | | | | |
| HXTFL2 | | FLOATER LOGIC: | | | | |
| HXT05 | Main reason no HIV result | Think about the last time you didn't get your HIV test result. What was the main reason you didn't get your result? | multiple choice | 2 | numeric | HIVNO |
| HXTFL3 | | FLOATER LOGIC: | | | | |
| HXT06 | First HIV test date | When did you have your first HIV test? | month/year | 7 | date | |
| HXT07 | Most recent HIV test date | When did you have your most recent HIV test? | month/year | 7 | date | |
| HXTRA7 | | Did you have your most recent HIV test in the last year? | yes/no | 2 | numeric | |
| HXTRA8 | | Please call study staff person for clarification. | yes/no | 2 | numeric | |
| HXTFV2 | Days from HIV test to baseline assessment | FLOATER Variable: TESTDY | | | | |
| HXTFL7 | | Floater Logic | | | | |
| HXT08 | Where HIV test done | Where did you get your most recent test? | multiple choice | 3 | numeric | HIVWHE RE |
| HXT09 | HIV test: exposure | At your most recent test, did you get tested for the following reason: Because you thought or were worried you might have been exposed to HIV before the test? | yes/no | 2 | numeric | |
| HXT10 | HIV test: regular testing | At your most recent test, did you get tested for the following reason: Because you got tested on a regular basis and it was time for you to get tested again? | yes/no | 2 | numeric | |
| HXT11 | HIV test: ensure negative | At your most recent test, did you get tested for the following reason: Because you were just checking to make sure you were HIV-negative? | yes/no | 2 | numeric | |

| | | | | | | |
|-----------|----------------------------------|---|-----------------|----|---------|---------|
| HXT12 | HIV test: required | At your most recent test, did you get tested for any of the following reasons: Because you were required to get tested by either insurance, the military, a court order, or by some other agency? | yes/no | 2 | numeric | |
| HXT13 | HIV test: enrolled in study | At your most recent test, did you get tested for the following reason: Because you enrolled in a study; HIV testing was part of the study? | yes/no | 2 | numeric | |
| HXT14 | HIV test: pregnant | At your most recent test, did you get tested for the following reason: Because you were pregnant? | yes/no | | numeric | |
| HXT15 | HIV test: other | At your most recent test, did you get tested for the following reason: Because there was some other reason you wanted to get tested? | yes/no | 50 | numeric | |
| HXT15sp | HIV test: specify other | Specify other reason for your most recent test. | text | 50 | text | |
| HXT16 | Anonymous HIV test | Was your most recent test anonymous? An anonymous HIV test means you were not required to give your name to get tested. You may have been given an identification number or code to get your test results. | yes/no | 2 | numeric | |
| HXT17 | Method HIV test | Which of the following methods did your most recent test use: | multiple choice | 2 | numeric | HIVSITE |
| HXT17sp | Method HIV test: Specify | Specify other method your most recent test used. | text | 50 | text | |
| HXT18 | Rapid HIV recent test | Was your most recent test a rapid test where you could get your results within a couple of hours? | yes/no | 2 | numeric | |
| HXT19 | Receive recent HIV results | Did you receive the results of your most recent test? | yes/no | 2 | numeric | |
| HXTRA19 | | Please call study staff person for clarification. | yes/no | 2 | numeric | |
| HXT19a | Main reason no HIV result | What was the main reason you didn't get your result? | multiple choice | 2 | numeric | HIVNO |
| HXT20 | Result recent HIV test | What was the result of your most recent HIV test? | multiple choice | 2 | numeric | HIVREC |
| HXTRA20 | | Please call study staff person for clarification. | yes/no | 2 | numeric | |
| HXT21 | confirm recent positive HIV test | You indicated that your HIV test result was positive. Is this correct? (Choose one) | multiple choice | 2 | numeric | AFFIRM |
| HXT21READ | | READ: You indicated that you would like to change your answer. Please re-answer the question about your most recent HIV test results. | | | | |
| HXTFL4 | | FLOATER LOGIC: | | | | |
| HXTFL5 | | FLOATER LOGIC: | | | | |

| | | | | | | |
|--------------|--|--|-----------------|---|---------|--------|
| HXT22 | Tested within past year | The date you gave for your most recent HIV test was in the last year. Were you tested at any other time in the past year? | yes/no | 2 | numeric | |
| HXT23 | Receive past year HIV results | Did you receive the results of any of these HIV tests completed in the last year? | yes/no | 2 | numeric | |
| HXTRA23 | | Please call study staff person for clarification. | yes/no | 2 | numeric | |
| HXT24 | Confirm past year HIV results | You indicated that you received the results of an HIV test that was performed in the last year. Is this correct? (Choose one) | multiple choice | 2 | numeric | AFFIRM |
| HXT24READ | | READ: You indicated that you would like to change your answer. Please re-answer the question about HIV testing. | | | | |
| HXTFV3 | ENDFLAG | FLOATER variable: ENDFLAG | | | | FLAG |
| HXTFL6 | | FLOATER LOGIC: | | | | |
| BEGIN | Start Assessment | BEGIN READINESS FOR HIV TESTING | | | | |
| HXT25 | Readiness for HIV testing | Which of the following best describes your current feelings about HIV testing: (Choose one) | multiple choice | 2 | numeric | HIVRDY |
| ATRSK01READ1 | | READ: "Please indicate how strongly you agree or disagree with the following statement." | | | | |
| ATRSK01 | HIV Risk | I am at risk for getting HIV. | scale | 2 | numeric | AGREE |
| BEGIN | Start Assessment | BEGIN HIV Care | | | | |
| CARFL1 | | FLOATER LOGIC | | | | |
| CAR01READ | | "The next several questions are about HIV care." | | | | |
| CAR01 | Current feelings about HIV pos results | Since testing positive for HIV, which of the following best describes your current feelings: (Choose one) | multiple choice | 2 | numeric | CAR01 |
| CAR02 | # times received medical care since HIV pos. result | Since testing positive for HIV, how many times have you received medical care relating to your HIV/AIDS? | numeric | 2 | numeric | |
| CAR03 | Place received care | Since testing positive for HIV, at which of the following places have you received medical care relating to your HIV/AIDS? (Check all that apply.) | all that apply | 2 | numeric | |
| CAR03MULTI0 | Received care at private doctor's office or private clinic | Private doctor's office or private clinic | | 2 | | |

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|-----------------|---|--|----------------|---|---------|--|
| CAR03MULTI 1 | Received care at public health, or county health clinic | Public health, or county health clinic | | 2 | | |
| CAR03MULTI 2 | Received care at emergency room | Emergency room | | 2 | | |
| CAR03MULTI 3 | Received care at VA hospital or clinic | VA hospital or clinic | | 2 | | |
| CAR03MULTI 4 | Received care at HMO | Health Maintenance Organization (HMO) | | 2 | | |
| CAR03MULTI 5 | Received care at company or a school health clinic | Company or a school health clinic | | 2 | | |
| CAR04 | Have a case manager | Do you currently have a case manager? | yes/no | 2 | numeric | |
| CAR05 | Anyone helping you to get HIV care | Since testing positive for HIV, has anyone been helping you get into HIV care? | yes/no | 2 | numeric | |
| CAR06 | HIV Care help | Who was the person who helped you get into HIV care? (Check all that apply) | all that apply | 2 | numeric | |
| CAR06MULTI 0 | Professional helping you with care | A counselor, social worker, case manager or other professional. | | 2 | | |
| CAR06MULTI 1 | Family member | A family member or friend. | | 2 | | |
| CAR07 | Professional help | How has this counselor, social worker, case manager or other professional been helping you? (Check all that apply) | all that apply | 2 | numeric | |
| CAR07MULTI 0 | Professional explained disease/meds | Explained HIV disease and HIV medicines. | | 2 | | |
| CAR07MULTI 1 | Professional made appointments for HIV care | Make appointments for HIV care. | | 2 | | |
| CAR07MULTI 2 | Professional explained where to go for HIV care | Explained where to go for HIV care. | | 2 | | |

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|-------------|---|---|-----------------|---|---------|-------|
| CAR07MULTI3 | Professional helped with transportation to HIV clinic | Helped with transportation to HIV clinic. | | 2 | | |
| CAR07MULTI4 | Professional offered to go to HIV clinic with you | Offered to go to HIV clinic with you. | | 2 | | |
| CAR07MULTI5 | Professional helped with paperwork for HIV clinic | Helped with paperwork for HIV clinic. | | 2 | | |
| CAR08 | professional helpful regarding care | How helpful has this counselor, social worker, case manager or other professional been in getting you into HIV medical care? (choose one) | multiple choice | 2 | numeric | CAR08 |
| CAR09 | HIV information understandable | When you visited any health provider relating to your HIV care, did you understand the information that was given to you about your HIV infection and treatment options? (Choose one) | multiple choice | 2 | numeric | CAR09 |
| CAR10 | taking HIV medications | Since testing positive for HIV, have you been taking medications for your HIV? | yes/no | 2 | numeric | |
| CAR11 | No HIV Rx | What are the reasons that you are not taking HIV medications? (Check all that apply) | all that apply | 2 | numeric | |
| CAR11MULTI0 | No HIV meds because no prescription | My doctor has not prescribed medications | | 2 | | |
| CAR11MULTI1 | No HIV meds due to affordability | I cannot afford medications | | 2 | | |
| CAR11MULTI2 | No desire to take HIV meds | I do not want to take medications | | 2 | | |
| CAR11MULTI3 | Prefers natural or alternative treatments | I prefer to use natural or alternative treatments | | 2 | | |
| CAR11MULTI4 | Tried HIV meds and do not work | I have tried these medications and they do not work for me | | 2 | | |
| CAR11MULTI5 | Tried HIV meds and too many side effects | I have tried these medications and there are too many side effects | | 2 | | |
| CAR11MULTI6 | No HIV meds: other reason | Other | | 2 | | |
| CAR12 | CD4 checked? | Have you had your T-cell count (CD4) checked? | yes/no | 2 | numeric | |

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| CAR13 | Most recent CD4 test date | When was your most recent T-cell (CD4) count? | date | 10 | date | |
| CAR14 | CD4 count (range) | What was your most recent T-cell (CD4) count? (Choose one) | multiple choice | 2 | numeric | CAR14 |
| CAR15 | Viral load checked? | Have you had your viral load checked? | yes/no | 2 | 2 | |
| CAR16 | Most recent viral load test date | When was your most recent viral load test? | date | 2 | date | |
| CAR17 | Viral load value | What was your viral load? (Choose one) | multiple choice | 2 | numeric | CAR17 |
| CAR18 | Problems getting appointments | Since testing positive, have you had problems making appointments for HIV care? (Choose one) | multiple choice | 2 | numeric | CAR18 |
| CAR19 | Problems keeping appointments | Since testing positive, have you had problems keeping appointments for HIV care? (Choose one) | multiple choice | 2 | numeric | CAR18 |
| CAR20 | Reasons no appt | Are the following items reasons that you have not made or kept an appointment for HIV care? (Check all that apply.) | all that apply | 2 | numeric | |
| CAR20MULTI 0 | No appt:felt well | Felt well/no symptoms | | 2 | | |
| CAR20MULTI 1 | No appt:put it off | Putting it off | | 2 | | |
| CAR20MULTI 2 | No appt:cannot deal | Didn't want to deal with it | | 2 | | |
| CAR20MULTI 3 | No appt:clinic hours inconvenient | The clinic hours were not convenient | | 2 | | |
| CAR20MULTI 4 | No appt:long wait to get one | Wait was too long to get an appointment | | 2 | | |
| CAR20MULTI 5 | No appt:long clinic wait | Wait was too long in clinic waiting room | | 2 | | |
| CAR20MULTI 6 | No appt:could not get an appt. | Could not get an appointment | | 2 | | |
| CAR20MULTI 7 | No appt:no child care | Child care was not available | | 2 | | |
| CAR20MULTI 8 | No appt:no time off | Couldn't take time off work | | 2 | | |
| CAR20MULTI 9 | No appt:no transportation | Transportation problem/no way to get to | | 2 | | |
| CAR20MULTI 10 | No appt:too far | Too far to go | | 2 | | |

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| CAR20MULTI 11 | No appt:no insurance | Care costs too much/no insurance | | 2 | | |
| CAR20MULTI 12 | No appt:no cure | There is no cure/treatment doesn't help | | 2 | | |
| CAR20MULTI 13 | No appt:painful tx | Treatment would be unpleasant/painful | | 2 | | |
| CAR20MULTI 14 | NO appt:unsure of location | Didn't know where to go | | 2 | | |
| CAR20MULTI 15 | NO appt:unsure of doctor | Didn't know what kind of doctor to see | | 2 | | |
| CAR20MULTI 16 | NO appt:dislike clinics | Don't like doctors/clinics | | 2 | | |
| CAR20MULTI 17 | no appt:scared of disease | Scared about HIV disease | | 2 | | |
| CAR20MULTI 18 | No appt:fear of rude/unkind tx | Fear of being treated rudely/unkindly | | 2 | | |
| CAR20MULTI 19 | No appt:fear of exposure | Worried someone would find out I'm HIV-positive | | 2 | | |
| BEGIN | Start Assessment | BEGIN Hepatitis Questions | | | | |
| HEP01READ | | READ: The next several questions are about hepatitis B and C. | | | | |
| HEP01 | Hep B DX | Have you ever been diagnosed with hepatitis B? | yes/no | 2 | numeric | |
| HEP02 | Date Hep B Dx | When were you diagnosed with hepatitis B? | month/ye ar | 7 | date | |
| HEP03 | Test Hep B | Have you ever been tested for hepatitis B? | yes/no | 2 | numeric | |
| HEP04 | Date last test Hep B | When was the last time that you were tested for hepatitis B? | month/ye ar | 7 | date | |
| HEP05 | Location HEP B test | When you were last tested for hepatitis B, where did you get tested? | multiple choice | 2 | numeric | HIVWHE RE |
| HEP06 | Hep C Dx | Have you ever been diagnosed with hepatitis C? | yes/no | 2 | numeric | |
| HEP07 | Date Hep C Dx | When were you diagnosed with hepatitis C? | month/ye ar | 7 | date | |
| HEP08 | Test Hep C | Have you ever been tested for hepatitis C? | yes/no | 2 | numeric | |
| HEP09 | Date last test Hep C | When was the last time that you were tested for hepatitis C? | month/ye ar | 7 | date | |
| HEP10 | Location HEP C test | When you were last tested for Hepatitis C, where did you get tested? | multiple choice | 2 | numeric | HIVWHE RE |
| BEGIN | Start Assessment | BEGIN Global Substance Use: Alcohol Questions | | | | |

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| ALC01READ | | Read: "Many of the upcoming questions will be asking about the past 6 months. Some people have trouble thinking about the last 6 months all at once. Here are some ways to make it easier. Count six months backwards from today [This would be INSERT SYSDATE-180 days] . Are there any special occasions that happened around this time? Any holidays, or birthdays or something important? Any major events in the news? O.K., keep this time period in mind when answering these questions." | | | | |
| ALC01READ1 | | READ: "The next several questions are about alcohol use." | | | | |
| ALC01 | Number of alcoholic drinks in specified time period | During the last 6 months, how often did you usually have any kind of drink containing alcohol? By a drink we mean half an ounce of actual alcohol (For example, a 12 ounce can or glass of beer or cooler, a 5 ounce glass of wine, or a drink containing 1 shot of liquor). | multiple choice | 2 | numeric | FREQ8 |
| ALC02 | Number of alcoholic drinks lifetime | During your lifetime, what is the maximum number of drinks containing alcohol that you drank within a 24-hour period? Again, by a drink we mean half an ounce of actual alcohol (e.g. a 12 ounce can or glass of beer or cooler, a 5 ounce glass of wine, or a drink containing 1 shot of liquor). (asked here only of those who did not drink any alcohol during the past 6 months). (DONE WITH ALCOHOL QUESTIONS) | multiple choice | 2 | numeric | FREQ1 |
| ALC03 | Number of drinks in lifetime | So you have never had a drink containing alcohol in your entire life. Is this correct? (DONE WITH ALCOHOL QUESTIONS); | multiple choice | 2 | numeric | NOALC |
| ALC04 | Drinks per day in specified time period | During the last 6 months, how many alcoholic drinks did you have on a typical day when you drank alcohol? Again, by a drink we mean half an ounce of actual alcohol (for example , a 12 ounce can or glass of beer or cooler, a 5 ounce glass of wine, or a drink containing 1 shot of liquor). | multiple choice | 2 | numeric | FREQ2 |
| ALC04FL | | FLOATER LOGIC: | | | | |
| ALC05 | How often >= 5 drinks/2 hour period | During the last 6 months, how often did you have 5 or more drinks containing any kind of alcohol within a two-hour period? (That would be the equivalent of at least 5 12-ounce cans or bottles of beer, 5 five ounce glasses of wine, 5 drinks each containing one shot of liquor or spirits.) Choose only one. | multiple choice | 2 | numeric | FREQ3 |
| ALC06 | How often >= 4 drinks/2 hour period | During the last 6 months, how often did you have 4 or more drinks containing any kind of alcohol within a two-hour period? (That would be the equivalent of at least 4 12-ounce cans or bottles of beer, 4 5-ounce glasses of wine, 4 drinks each containing one shot of liquor or spirits.) Choose only one. | multiple choice | 2 | numeric | FREQ3 |
| ALC07 | How often drunk | In the last 6 months, how often have you been drunk or buzzed on alcohol? (Choose one) | multiple choice | 2 | numeric | FREQ5 |
| BEGIN | Start Assessment | BEGIN Global Substance Use: Drug Use Questions | | 10 | | |

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| DRG01READ | | READ: "Next are questions about drug use. Again, please remember that everything you tell us is strictly confidential." | | | | |
| DRG01 | Drug use | In the last 6 months, which of the following drugs did you use? Do not include drugs that you have injected. (Check all that apply): | all that apply | 2 | | |
| DRG01multi0 | Ecstasy use | Ecstasy (also known as E, X, or MDMA) | | 2 | numeric | |
| DRG01multi1 | GHB use | GHB (also known as gamma hydroxybutyric acid, G, or GBL) | | 2 | numeric | |
| DRG01multi2 | Heroin use | Heroin | | 2 | numeric | |
| DRG01multi3 | Marijuana use | Marijuana | | 2 | numeric | |
| DRG01multi4 | Methamphetamine use | Methamphetamines or other amphetamines (also known as Crystal Meth, Speed, or Tina) | | 2 | numeric | |
| DRG01multi5 | Hallucinogen use | Other hallucinogens (such as LSD, mushrooms, Peyote, or Mescaline) | | 2 | numeric | |
| DRG01multi6 | PCP use | PCP (also known as Angel Dust, wet, or wicky sticks) | | 2 | numeric | |
| DRG01multi7 | Poppers use | Poppers (also known as Amyl Nitrate) | | 2 | numeric | |
| DRG01multi8 | Powdered cocaine use | Powdered Cocaine | | 2 | numeric | |
| DRG01multi9 | Crack use | Rock or Crack Cocaine | | 2 | numeric | |
| DRG01multi10 | Ketamine use | Ketamine (also known as Special K, or K) | | 2 | numeric | |
| DRG01multi11 | Prescription drugs use | Recreational use of prescription drugs or pain killers to get high (such as Codeine, Vicodin or Hydrocodone, Percocet, Darvon, Oxycontin or Oxycodone, Demerol, or Dilaudid) | | 2 | numeric | |
| DRG01multi12 | Tranquilizers use | Tranquilizers or Barbiturates (such as Valium, Librium, Seconal, Xanax, Ambien, Lorazepam, or Rohypnol -- also known as Roofies) | | 2 | numeric | |
| DRG01multi13 | Viagra use | Viagra or similar drugs (such as Levitra or Cialis) | | 2 | numeric | |
| DRG01multi14 | Other drugs use | Other | | 2 | numeric | |
| DRG01multi15 | No drug use | Have not used drugs in the last 6 months | | 2 | numeric | |
| DRG02 | How often: Ecstasy | In the last 6 months, how often have you used Ecstasy? (Choose one) | scale | 2 | numeric | response set_freq_drg |
| DRG03 | How often: GHB | In the last 6 months, how often have you used GHB? (Choose one) | scale | 2 | numeric | response set_freq_drg |

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| DRG04 | How often: HEROIN | In the last 6 months, how often have you used Heroin? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG05 | How often: Marijuana | In the last 6 months, how often have you used Marijuana? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG06 | How often: CRYSTAL METH | In the last 6 months, how often have you used Methamphetamines or other amphetamines (also known as Crystal Meth, Speed, or Tina)? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG07 | How often: Hallucinogens | In the last 6 months, how often have you used other hallucinogens? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG08 | How often: PCP | In the last 6 months, how often have you used PCP? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG09 | How often: POPPERS | In the last 6 months, how often have you used Poppers? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG10 | How often: POWDER COCAINE | In the last 6 months, how often have you used powdered cocaine? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG11 | How often: CRACK COCAINE | In the last 6 months, how often have you used Rock or Crack Cocaine? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG12 | How often: KETAMINE | In the last 6 months, how often have you used Ketamine (also known as Special K, or K)? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG13 | How often: PAIN KILLERS | In the last 6 months, how often have you used prescription drugs or pain killers such as Codeine, Vicodin or Hydrocodone, Percocet, Darvon, Oxycontin or Oxycodone, Demerol, or Dilaudid recreationally to get high? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG14 | How often: Tranquillizers | In the last 6 months, how often have you used tranquilizers or barbiturates such as Valium, Librium, Seconal, Xanax, Ambien, Lorazepam, or Rohypnol (also called Roofies) recreationally to get high? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG15 | How often: VIAGRA | In the last 6 months, how often have you used Viagra or similar drugs? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG16 | How often: OTHER DRUG | In the last 6 months, how often have you used any other drugs? (Choose one) | scale | 2 | numeric | response set_freq_ drg |
| DRG17 | Injected non-rx drug | In the last 6 months, have you injected any non-prescribed drugs? | yes/no | 2 | numeric | |
| DRG18 | NO RX Injected | Which non-prescribed drugs have you injected in the last 6 months? (Check all that apply): | all that apply | 2 | | |
| DRG18multi0 | Injected barbiturates | Barbiturates | | 2 | | |
| DRG18multi1 | Injected Cocaine, powder | Cocaine, powder | | 2 | | |

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| DRG18multi2 | Injected crack | Cocaine, rock | | 2 | | |
| DRG18multi3 | Injected Dilaudid | Dilaudid | | 2 | | |
| DRG18multi4 | Injected Heroin | Heroin | | 2 | | |
| DRG18multi5 | Injected heroin and powder cocaine | Heroin and powder cocaine | | 2 | | |
| DRG18multi6 | Injected heroin and crack | Heroin and crack (crack is also known as rock) | | 2 | | |
| DRG18multi7 | Injected heroin and speed | Heroin and speed | | 2 | | |
| DRG18multi8 | Injected methadone | Methadone | | 2 | | |
| DRG18multi9 | Injected Methamphetamine | Methamphetamines or other amphetamines (such as Crystal Meth, Speed, or Tina) | | 2 | | |
| DRG18multi10 | Injected steroids | Steroids | | 2 | | |
| DRG18multi11 | Injected other non-rx | Other | | 2 | | |
| DRG19 | RX DRUG | In the last 6 months, have you injected any prescribed drugs? | yes/no | 2 | numeric | |
| DRG20 | RX DRUG PAIN | Which prescribed drugs have you injected in the last 6 months? (Check all that apply): | all that apply | 2 | | |
| DRG20multi0 | Injected pain killers | Pain killers (such as Codeine, Vicodin or Hydrocodone, Percocet, Darvon, Oxycontin or Oxycodone, Demerol, or Dilaudid) | | 2 | | |
| DRG20multi1 | Injected tranquilizers | Tranquilizers or Barbiturates (such as Valium, Librium, Seconal, or Xanax) | | 2 | | |
| DRG20multi2 | Injected other rx | Other | | 2 | | |
| DRG21 | Inpatient or outpatient drug treatment | In the last 6 months, have you received any residential or outpatient drug treatment? This does not include self-help programs such as Narcotics Anonymous. (Choose one) | multiple choice | 2 | numeric | AFFIRM 1 |
| DRG22 | Self-help Drug Treatment | In the last 6 months, have you ever attended a self-help program for drug problems, such as Narcotics Anonymous? (Choose one) | multiple choice | 2 | numeric | AFFIRM 1 |
| DRG23READ | | READ: "Please answer these next items about the drugs we were just talking about. Remember that the questions do not include alcohol or tobacco or Viagra. Please answer every question. If you have difficulty with a statement, then choose the response that is mostly right. These questions refer to the past 6 months." | | | | |

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| DRG23 | MORE THAN ONE DRG | Have you used more than one drug at a time? | yes/no | 2 | numeric | |
| DRG24 | STOP USING DRUGS | Have you always been able to stop using drugs when you want to? | yes/no | 2 | numeric | |
| DRG25 | Blackout due to drugs | Have you had "blackouts" or "flashbacks" as a result of drug use? | yes/no | 2 | numeric | |
| DRG26 | Guilty about drug use | Have you felt bad or guilty about your drug use? | yes/no | 2 | numeric | |
| DRG27 | Partner complained about drugs | Has your partner ever complained about your involvement with drugs? | yes/no | 2 | numeric | |
| DRG28 | Neglect friends due to drugs | Have you neglected your friends or family because of your use of drugs? | yes/no | 2 | numeric | |
| DRG29 | Engage in illegal activities to get drugs | Have you engaged in illegal activities in order to obtain drugs? | yes/no | 2 | numeric | |
| DRG30 | Experience withdrawal symptoms | Have you ever experienced withdrawal symptoms (such as feeling sick) when you stopped taking drugs? | yes/no | 2 | numeric | |
| DRG31 | Medical problems due to drugs | Have you had medical problems as a result of your drug use (such as memory loss, hepatitis, convulsions, bleeding, or some other symptom)? | yes/no | 2 | numeric | |
| BEGIN | Start Assessment | Begin Drug Treatment | | | | |
| TRT01 | ENROLL DRUG TX | Are you attending drug treatment right now? By attending drug treatment we mean that you have gone to at least one individual or group treatment session since enrolling at this drug treatment facility. If you have enrolled in this facility, but have not been to a drug treatment session (whether individual or group) yet, then answer NO to this question. | yes/no | 2 | numeric | |
| TRT02 | WHAT DRUG TX IN? | What drug treatment are you in? (Check all that apply) | all that apply | 2 | numeric | |
| TRT02MULTI0 | DRUG TX DETOX | detoxification (also called detox); | | | | |
| TRT02MULTI1 | DRUG TX HALFWAY | halfway house; | | | | |
| TRT02MULTI2 | DRUG TX INPATIENT | inpatient counseling and residential treatment; | | | | |
| TRT02MULTI3 | DRUG TX OUTPATIENT | outpatient counseling; | | | | |
| TRT02MULTI4 | DRUG TX AA | Alcoholics Anonymous (also called AA) (Select only if 3+ or more meetings were attended within a one month period); | | | | |
| TRT02MULTI5 | DRUG TX NA | Narcotics Anonymous (also called NA) (Select only if 3+ or more meetings were attended within a one month period). | | | | |

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| TRT03 | DAYS IN DRUG TX? | How many days have you been in this drug treatment? | numeric | 5 | numeric | |
| BEGIN | Start Assessment | BEGIN Injection Risk Behavior | | | | |
| INJ01 | Injected drugs in lifetime | Have you ever in your life injected any drug? By injected we mean shot up. | yes/no | 2 | numeric | |
| INJ01WARN | | READ: You indicated previously that you have injected non-prescribed drugs in the past 6 months, but now say that you have never in your life injected any drugs. Please think about your responses and consider re-answering this question. | | | | |
| INJ01WARN1 | | READ: You indicated previously that you have injected prescribed drugs in the past 6 months, but now say that you have never in your life injected any drugs. Please think about your responses and consider re-answering this question. | | | | |
| INJ02 | Age when first shot up | How old were you when you first injected or shot up any drug? | numeric | 2 | numeric | |
| INJ03 | Injected drugs use | In the past 6 months, have you injected ANY_drugs? | yes/no | 2 | numeric | |
| INJ03WARN | | READ: You indicated previously that you injected non-prescribed drugs in the past 6 months, but now say that you have not injected any drugs in the past 6 months. Please think about your responses and consider re-answering this question. | | | | |
| INJ03WARN1 | | READ: You indicated previously that you injected prescribed drugs in the past 6 months, but now say that you have not injected any drugs in the past 6 months. Please think about your responses and consider re-answering this question. | | | | |
| INJ03WARN2 | | READ: You indicated previously that you have not injected any non-prescribed or prescribed drugs in the past 6 months, but now say that you have injected drugs in the past 6 months. Please think about your responses and consider re-answering this question. | | | | |
| INJ03WARN3 | | READ: You indicated previously that you have injected both prescribed and non-prescribed drugs in the past 6 months, but now say that you have not injected any drugs in the past 6 months. Please think about your responses and consider re-answering this question. | | | | |
| INJ04 | How often drugs injected | In the past 6 months, how often have you injected any drugs? | scale | 2 | numeric | response set_freq_drug |
| INJ05 | Where were needles obtained | Where did you get your needles during the past 6 months? (choose all that apply): | all that apply | 2 | | |
| INJ05multi0 | Needles: Diabetic | From a diabetic | | 2 | | |
| INJ05multi1 | Needles: street | On the street | | 2 | | |

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| INJ05multi2 | Needles: MS/Hepatitis | From a person with multiple sclerosis or hepatitis | | 2 | | |
| INJ05multi3 | Needles: drug store | Drugstore | | 2 | | |
| INJ05multi4 | Needles: shooting gallery | Shooting gallery or other place where users go to shoot up | | 2 | | |
| INJ05multi5 | Needles: Needle exchange program | Needle Exchange Program | | 2 | | |
| INJ05multi6 | Needles: Other | Other | | 2 | | |
| INJ05sp | Needles: specify | Specify the other needle source during the past 6 months. | text | 50 | text | |
| INJ06 | CLEAN NEEDLE | Which statement best describes the way you cleaned your needles during the past 6 months? (Choose one) | multiple choice | 2 | numeric | NEEDLE |
| INJ07 | CLEAN NEEDLE SPEC | If you have cleaned your needles and works in the past 6 months, how did you clean them? (Choose all that apply): | all that apply | 2 | | |
| INJ07multi0 | Clean with soap and water | Soap and water or water only | | 2 | | |
| INJ07multi1 | Clean with alcohol | Alcohol | | 2 | | |
| INJ07multi2 | Clean with bleach | Bleach | | 2 | | |
| INJ07multi3 | Clean with boiling water | Boiling water | | 2 | | |
| INJ07multi4 | Did not clean in past 6 mths | I did not clean my needles in the last 6 months | | 2 | | |
| INJ07multi5 | Other cleaning method | Other | | 2 | | |
| INJ07sp | Specify other cleaning method | Specify other method you used to clean your needles and works in the last 6 months | text | 50 | text | |
| INJ08 | Shared needle/works | In the past 6 months, have you shared needles or works with another person? | yes/no | 2 | numeric | |

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| INJ09 | Number of people shared needle | With how many different people did you share needles in the past 6 months? (enter number of different people) | numeric | 3 | numeric | |
| INJ10 | How often used needle after someone | In the past 6 months, how often have you used a needle after someone (with or without cleaning)? | scale | 2 | numeric | FREQ5 |
| INJ11 | How often someone used needle after you | In the past 6 months, how often have others used a needle after you (with or without cleaning)? | scale | 2 | numeric | FREQ5 |
| INJ12 | How often shared rinse water | In the past 6 months, how often have you shared rinse water? | scale | 2 | numeric | FREQ5 |
| INJ13 | How often times shared cooker | In the past 6 months, how often have you shared a cooker? | scale | 2 | numeric | FREQ5 |
| INJ14 | How often shared cotton | In the past 6 months, how often have you shared cotton? | scale | 2 | numeric | FREQ5 |
| INJ15 | How often shared syringe | In the past 6 months, how often have you divided or shared drugs with others by using one syringe (yours or someone else's) to squirt or load the drugs into the other syringe or syringes? | scale | 2 | numeric | FREQ5 |
| BEGIN | Start Assessment | BEGIN Condom Use Self-Efficacy Scale | | | | |
| CUS01READ | | READ: "Please indicate how strongly you agree or disagree with the following statements." | | | | |
| CUS01 | Use Condom | I feel confident in my ability to put a condom on myself or my partner. | scale | 2 | numeric | AGREE |
| CUS02 | Discuss Condom | I feel confident in my ability to discuss condom usage with any partner I might have. | scale | 2 | numeric | AGREE |
| CUS03 | Suggest condom with new partner | I feel confident in my ability to suggest using condoms with a new partner. | scale | 2 | numeric | AGREE |
| CUS04 | Suggest condom without partner feeling diseased | I feel confident I could suggest using a condom without my partner feeling "diseased". | scale | 2 | numeric | AGREE |
| CUS05 | Partner rejection/afraid to use | If I were to suggest using a condom to a partner, I would feel afraid that he or she would reject me. | scale | 2 | numeric | AGREE |

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| CUS06 | Unsure of partner's feelings | If I were unsure of my partner's feelings about using condoms, I would not suggest using one. | scale | 2 | numeric | AGREE |
| CUS07 | Confident of removal | I feel confident I could gracefully remove and dispose of a condom when we have intercourse. | scale | 2 | numeric | AGREE |
| CUS08 | Afraid of homosexual label | I would not feel confident suggesting using condoms with a new partner because I would be afraid he or she would think I've had a homosexual experience. | scale | 2 | numeric | AGREE |
| CUS09 | Unsure due to own STD | I would not feel confident suggesting using condoms with a new partner because I would be afraid he or she would think I have a sexually transmitted disease. | scale | 2 | numeric | AGREE |
| CUS10 | Unsure due to partner STD | I would not feel confident suggesting using condoms with a new partner because I would be afraid he or she would think I thought they had a sexually transmitted disease. | scale | 2 | numeric | AGREE |
| CUS11 | Use condom quickly | I feel confident in my ability to put a condom on myself or my partner quickly. | scale | 2 | numeric | AGREE |
| CUS12 | Use condom after drinking | I feel confident that I would remember to use a condom even after I have been drinking. | scale | 2 | numeric | AGREE |
| CUS13 | Use condom if high | I feel confident that I would remember to use a condom even if I were high. | scale | 2 | numeric | AGREE |
| CUS14 | Use condom successfully | I feel confident that I could use a condom successfully. | scale | 2 | numeric | AGREE |
| CUS15 | Use condom in heat of passion | I feel confident I could stop to put a condom on myself or my partner even in the heat of passion. | scale | 2 | numeric | AGREE |
| BEGIN | Start Assessment | BEGIN Readiness to Use Condoms/Stages of Change for Condom Use | | | | |
| SOC01READ | | READ: "The next few questions will ask you about your recent and/or future condom use." | | | | |
| SOC01 | Condoms past 30 days | How often did you use condoms in the past 30 days? | multiple choice | 2 | numeric | SOCCU |
| SOC02 | Condoms every time | For how long have you been using condoms every time? | multiple choice | 2 | numeric | SOCCU1 |
| SOC03 | Start use of condoms next 6 mos | Are you considering starting to use condoms every time within the next 6 months? | yes/no | 2 | numeric | |
| SOC04 | Start use of condoms next 30 days | Are you planning to start using condoms every time within the next 30 days? | yes/no | 2 | numeric | |
| BEGIN | Start Assessment | BEGIN Attitude Toward Safer Sex | | | | |
| ATS01READ | | READ: "Please indicate how strongly you agree or disagree with the following statements." | | | | |
| ATS01 | Hassle to use condoms | It is a hassle to use condoms. | scale | 2 | numeric | AGREE |
| ATS02 | Same pleasure from safe sex | People can get the same pleasure from "safer" sex as from unprotected sex. | scale | 2 | numeric | AGREE |

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| ATS03 | condom interrupts sex play | Using condoms interrupts sex play. | scale | 2 | numeric | AGREE |
| ATS04 | Condoms can enhance sexual pleasure | The proper use of a condom could enhance sexual pleasure. | scale | 2 | numeric | AGREE |
| ATS05 | condoms are irritating | Condoms are irritating. | scale | 2 | numeric | AGREE |
| ATS06 | Safe sex boring | I think "safer" sex would get boring fast. | scale | 2 | numeric | AGREE |
| ATS07 | safe sex reduces mental pleasure | "Safer" sex reduces the mental pleasure of sex. | scale | 2 | numeric | AGREE |
| ATS08 | condoms are unappealing | The idea of using a condom doesn't appeal to me. | scale | 2 | numeric | AGREE |
| ATS09 | condoms ruin sex | Condoms ruin the natural sex act. | scale | 2 | numeric | AGREE |
| ATS10 | favor condom use | Generally, I am in favor of using condoms. | scale | 2 | numeric | AGREE |
| ATS11 | condoms interfere with romance | Condoms interfere with romance. | scale | 2 | numeric | AGREE |
| ATS12 | condom sensory unpleasant | The sensory aspects (for example, smell, touch) of condoms make them unpleasant. | scale | 2 | numeric | AGREE |
| ATS13 | Can't give self over to partner | With condoms, you can't really "give yourself over" to your partner. | scale | 2 | numeric | AGREE |
| BEGIN | Start Assessment | BEGIN Global Sex Behavior (by partner HIV status) | | | | |
| GSB01READ | | READ: The next questions will ask about your sexual behavior. | | | | |
| GSB01READ1 | | READ: "For the purpose of this questionnaire, we will categorize your transgender or transsexual partners as male or female based on their genitals at the time that you had sex with them. For example, if a transgendered or transsexual partner had a penis when you had sex, then consider the partner as MALE. If the transgendered or transsexual partner had a vagina when you had sex, then consider the partner as FEMALE. We will ask you to use these male and female categories for these partners for the rest of the questionnaire." | | | | |
| GSB01 | Partner's gender | In the past 6 months, have you had anal or vaginal sex with: (Choose one) | multiple choice | 2 | numeric | SEX3 |
| BEGIN | Start Assessment | BEGIN Global Sex Behavior Female Sexual Behavior with Females (FSF) | | | | |
| FSF01 | Female sex with female | In the past 6 months, with how many women have you had sex? | numeric | 3 | numeric | |
| BEGIN | Start Assessment | BEGIN Global Sex Behavior Female Sexual Behavior with Males (FSM) | | | | |

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| FSM01READ | | READ: "This part of the interview asks about sexual partners and activities. Some questions ask about all your partners, and others ask only about certain partners. We want to remind you that everything you tell us is completely confidential. This means we will not give information about you to anyone who is not part of this research study. None of the information that you give to us during the study will be part of the clinical or Community Treatment Program record. Instead, it will only be part of the research record. | | | | |
| BEGIN | | BEGIN Orientation to Sexual Terminology Female Sexual Behavior with Males (FSM) | | | | |
| FSM01READ1 | | READ: Before we begin talking about your sexual experiences, we'd like to go over some terms for talking about sex. People have different words for sex. We want to make sure the words in our questions are clear to you. | | | | |
| FSM01READ2 | | READ: <u>Vaginal sex</u> is when your partner puts his penis in your vagina. <u>Anal sex</u> is when your partner puts his penis in your butt or anus or rectum. In our interview, we'll be using formal terms - like '<u>vaginal sex</u>' and '<u>anal sex</u>'. | | | | |
| FSM01READ3 | | READ: When we ask about vaginal or anal sex, we want you to think about times when you used or didn't use a condom, and whether or not you had an orgasm or your partner ejaculated. When we refer to the "times" that you have had sex, we would like for you to count each sex act separately. For example, if on one occasion you had both vaginal and anal sex, this would count as 2 times. As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of vaginal sex) with the same partner or with different partners, this would count as 3 times. Please ask the RA Study Staff for help if what we mean by "times" is not clear. | | | | |
| BEGIN | | BEGIN Re-orientation to 6-month Time Frame Female Sexual Behavior with Males (FSM) | | | | |

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| FSM01READ4 | | <p>READ: Again, many of our questions will be asking about the past 6 months. Some people have trouble thinking about the last 6 months all at once. Here are some ways to make it easier. Count six months backward from today [Insert SYSDATE-180 days].</p> <p>Are there any special occasions that happened around this time? Any holidays, or birthdays or something important? Any major events in the news? O.K., keep this time period in mind when answering these questions. Some people find it easier to think about the past 6 months specifically by month, by week, or by day. Six months is 26 weeks or 183 days. For example, some people have sex maybe a couple of times per month; for them, it's easiest to think of sexual experiences by month. Some people have sex a few times a week; for them, it's easiest to think of a week. Some people have sex a few times a day; for them, it's easiest to think of a day. Use whichever way is easiest for you to think about the past 6 months.</p> | | | | |
| FSM01READ5 | | <p>READ: First, we want to ask you about all of the men with whom you've had any vaginal or anal sex in the past 6 months.</p> | | | | |
| FSM01 | F/M: # men: vaginal/anal sex acts | With how many men did you have vaginal or anal sex in the last 6 months? (Please give us your best estimate or guess). | numeric | 3 | numeric | |
| FSM02 | F/M: Confirm no vaginal/anal sex acts | You indicated you did not have vaginal or anal sex with any male sex partners in the past 6 months, is this correct? (choose one) | multiple choice | 2 | numeric | AFFIRM |
| FSM02WARN | | <p>READ: You previously indicated that you had anal or vaginal sex with a male partner in the past 6 months, but now state that you have not. If this is wrong, please re-enter. Otherwise continue to the next question.</p> | | | | |
| FSM02READ | | <p>READ: "You indicated that you would like to change your answer. Please re-enter information about your male sex partners."</p> | | | | |
| FSM03 | F/M: Is only partner primary? | Do you consider this partner to be a primary partner? By "primary" partner we mean a man with whom you have felt a special emotional commitment, someone you have dated or would call your boyfriend, spouse, significant other, or life partner. | yes/no | 2 | numeric | |
| FSM04 | F/M: Only partner HIV status | What is his HIV status? (Choose one) | multiple choice | 2 | numeric | HIVSTAT |
| FSM05 | F/M: confirm only non-primary partner HIV status | Did he actually tell you that he was HIV (#FSM04#) and you had no reason to doubt it? | yes/no | 2 | numeric | |

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| FSM06 | F/M: # men: vaginal sex acts | With how many men did you have any vaginal sex in the last 6 months? | numeric | 3 | numeric | |
| FSM06EDIT | | READ: "The number of male vaginal sex partners in the past six months (<i>FSM06</i>) cannot be more than the number of male vaginal or anal sex partners (<i>FSM01</i>) you reported earlier. Please correct." | | | | |
| FSM07 | F/M : Confirm no male vaginal sex | You indicated you did not have vaginal sex with any male sex partners in the past 6 months, is this correct? | multiple choice | 2 | numeric | AFFIRM |
| FSM07READ | | READ: You indicated that you would like to change your answer. Please re-enter information about your sex partners. | | | | |
| FSM08 | F/M: # men: anal sex acts | With how many men did you have any anal sex in the past 6 months? | numeric | 3 | numeric | |
| FSM08EDIT | | READ: "The number of male vaginal sex partners (<i>response to FSM06</i>) plus the number of male anal sex partners (<i>response to FSM08</i>) in the past six months must be greater than or equal to the total number of male sex partners you reported earlier (<i>response to FSM01</i>). Please correct." | | | | |
| FSM08EDITX | | READ: "The number of male anal sex partners in the past six months (<i>FSM08</i>) cannot be more than the number of male vaginal or anal sex partners (<i>FSM01</i>) you reported earlier. Please correct" | | | | |
| FSM09 | F/M : Confirm no male anal sex | You indicated you did not have anal sex with any male sex partners in the past 6 months, is this correct? | multiple choice | 2 | numeric | AFFIRM |
| FSM09READ | | READ: You indicated that you would like to change your answer. Please re-enter information about your sex partners. | | | | |
| FSM10READ | | READ: Now we want to ask you if you have had a primary male partner over the last 6 months. That is since approximately [INSERT SYSDATE-6MONTHS]. By 'primary' partner we mean a man with whom you have felt a special emotional commitment, someone you have dated or would call your boyfriend, spouse, significant other, or life partner. | | | | |
| FSM10 | F/M: Primary male partner | Have you had a primary male partner in the last 6 months? | yes/no | 2 | numeric | |
| BEGIN | Start Assessment | BEGIN Global Sex Behavior Most Recent Primary Partner (FMP) | | 10 | | |
| FMP01READ | | READ: Now we are going to ask you some questions about your sex behaviors with your most recent male primary partner. | | | | |
| FMP01 | F/M primary: HIV status | What is his HIV status? | multiple choice | 2 | numeric | HIVSTA T |
| FMPFL5 | | FLOATER LOGIC: | | | | |

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| FMP02 | F/M primary: # times vaginal sex | In the last 6 months, how many times did you have vaginal sex with your most recent primary partner? | numeric | 3 | numeric | |
| FMP03 | F/M primary: # times high or drunk during vaginal sex | How many of these [Response to FMP02] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FMP03EDIT | | READ: You cannot enter a number that is greater than [Response to FMP02], the number of times you had vaginal sex with your most recent primary partner. Please re-answer this question. | | | | |
| FMP04 | F/M primary: # times used condoms during vaginal sex | How many of these [Response to FMP02] times was a condom used from start to finish? | numeric | 3 | numeric | |
| FMP04EDIT | | READ: You cannot enter a number that is greater than [FMP02], the number of times you've had vaginal sex with your most recent primary partner. Please re-answer the question. | | | | |
| FMPFV1 | F/M primary: # unprotected times had vaginal sex | FLOATER VARIABLE: FUNPRO=FMP02-FMP04 If FMP04 < 0, then FUNPRO=FMP02 | | | | |
| FMPFL1 | | FLOATER LOGIC: | | | | |
| FMP05 | F/M primary: # times high or drunk during unprotected vaginal sex | Think of the [FUNPRO] times you had vaginal sex and did not use a condom from start to finish with your most recent primary partner. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FMP05EDIT | | READ: "You cannot enter a number that is greater than [FUNPRO], the number of times you had vaginal sex and did not use a condom with your most recent primary partner. Please re-answer this question." | | | | |
| FMPFL2 | | FLOATER LOGIC: | | | | |
| FMP06 | F/M primary: # times anal sex | In the last 6 months, how many times did you have anal sex (that is, his penis was in your anus) with your most recent primary partner? | numeric | 3 | numeric | |
| FMP07 | F/M primary: # times high or drunk during anal sex | How many of these [Response to FMP06] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FMP07EDIT | | READ: You cannot enter a number that is greater than [Response to FMP06], the number of times you had anal sex with your most recent primary partner. Please re-answer this question. | | | | |

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| FMP08 | F/M primary: # times used condoms during anal sex | How many of these [Response to FMP06] times was a condom used from start to finish? | numeric | 3 | numeric | |
| FMP08EDIT | | READ: "You cannot enter a number that is greater than [Response to FMP06], the number of times you had anal sex with your most recent primary partner. Please re-answer this question." | | | | |
| FMPFV2 | F/M primary: # unprotected times had anal sex | FLOATER VARIABLE: FUNPRO1=FMP06-FMP08 If FMP08<0, then FUNPRO1=FMP06 | | | | |
| FMPFL3 | | FLOATER LOGIC: | | | | |
| FMP09 | F/M primary: # times high or drunk during unprotected anal sex | Think of the [FUNPRO1] times you had anal sex and did not use a condom from start to finish with your most recent primary partner. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FMP09EDIT | | READ: "You cannot enter a number that is greater than [FUNPRO1], the number of times you had anal sex and did not use a condom with your most recent primary partner. Please re-answer this question." | | | | |
| FMPFL4 | | FLOATER LOGIC: | | | | |
| FMP10READ | | READ: Now we want to ask you about all the men, OTHER than your most recent primary partner, with whom you've had any vaginal or anal sex in the past 6 months. If you've already told us that you have NOT had a primary partner in the last 6 months, then just think about ALL of the male partners that you've had sex with over the last 6 months. | | | | |
| FMP10 | F/M other: # men vaginal/anal sex | With how many men did you have any vaginal or anal sex in the last 6 months other than your most recent primary partner? This includes times when you used or didn't use a condom and whether or not there was ejaculation. | numeric | 3 | numeric | |
| FMP10EDIT | | READ: You cannot enter a number that is greater than [FSM01], the number of men with whom you've had vaginal or anal sex in the last 6 months. Please re-answer the question. | | | | |
| FMP11 | F/M other: confirm no male vaginal/anal sex acts | You indicated you did not have anal or vaginal sex with anyone other than your most recent primary partner in the past 6 months. Is this correct? (Choose one) | multiple choice | 2 | numeric | AFFIRM |

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| FMP11READ | | READ: You indicated that you would like to change your answer. Please re-enter information about your non-primary sex partners. | | | | |
| BEGIN | Start Assessment | BEGIN Global Sex Behavior Sexual Behavior with all OTHER Male Partners (FMN) | | | | |
| FMN01READ | | READ: “The next questions will be about all of your [Response to FMP10] male partners, OTHER than your most recent primary partner, with whom you’ve had any vaginal or anal sex in the last 6 months. We want to ask you about the HIV status of these male partners.” | | | | |
| FMN01READ1 | | READ: We will ask you to tell us how many of these [Responses to FMP10] male partners were HIV-positive, how many were HIV-negative, and how many of these partners had an HIV status that you did not know. The numbers that you provide for all three categories (that is, HIV-positive, HIV-negative, and HIV status unknown) must equal (that is, add up to) [Response FMP10] – the total number of male partners, OTHER than your most recent primary partner with who you reported having had any vaginal or anal sex in the last 6 months. | | | | |
| FMN01 | F/M Other: # men HIV positive | Of these [Response to FMP10] men, how many did you believe were HIV-positive and had no reason to doubt it? | numeric | 3 | numeric | |
| FMN01EDIT | | READ: “You cannot enter a number that is greater than [Response to FMP10], the number of men, other than your most recent primary partner, with whom you’ve had vaginal or anal sex. Please re-answer this question.” | | | | |
| FMNFV1 | F/M Other: # non-positive HIV male partners | FLOATER VARIABLE: FTOT_P = FMP10 - FMN01 If FMN01<0, then FTOT_P = FMP10 | | | | |
| FMNFL2 | | FLOATER LOGIC: | | | | |
| FMN02 | F/M Other: # men HIV negative | Of these remaining [Response to FTOT_P] men, how many did you believe were HIV-negative and had no reason to doubt it? | numeric | 3 | numeric | |
| FMN02EDIT | | READ “You cannot enter a number that is greater than [Response to FTOT_P], the number of men with whom you’ve had vaginal or anal sex and believe were NOT HIV-positive . Please re-answer this question.” | | | | |
| FMNFV2 | F/M Other: # male partners unknown/unsure of HIV status | FLOATER VARIABLE: FTOT_PN = FTOT_P -FMN02 If FMN02<0, then FTOT_PN = FTOT_P | | | | |

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| FMN03 | F/M Other: Confirm # men unknown or unsure of HIV status | So you had this number of male partners - [variable] - whose HIV status you did not know or were unsure of? | multiple choice | 3 | numeric | AFFIRM |
| FMN03READ | | READ: You indicated that you would like to change your answer. Please re-enter information about the HIV status of your partners. | | | | |
| FMNFL4 | | FLOATER LOGIC: | | | | |
| FMN04 | F/M Other: HIV pos. men told you HIV pos. | Of the [Response to FMN01] HIV-positive men, how many actually TOLD you they were HIV-positive and you had no reason to doubt it? | numeric | 3 | numeric | |
| FMN04EDIT | | READ: "You cannot enter a number that is greater than [Response to FMN01], the number of partners you believe to be HIV-positive. Please re-answer this question." | | | | |
| FMNFL5 | | FLOATER LOGIC: | | | | |
| FMN05 | F/M Other: HIV neg. men told you HIV neg. | Of the [Response to FMN02] HIV-negative men, how many actually TOLD you they were HIV-negative and you had no reason to doubt it? | numeric | 3 | numeric | |
| FMN05EDIT | | READ: "You cannot enter a number that is greater than [Response to FMN02], the number of partners you believe to be HIV-negative. Please re-answer this question." | | | | |
| BEGIN | Start Assessment | BEGIN FSM – Sexual Behavior with HIV-Positive Partners (FSH) | | | | |
| FSHFL1 | | FLOATER LOGIC: | | | | |
| FSH01READ | | READ: "These next questions ask about your [Response to FMN01] HIV-positive partners who were NOT your most recent primary partner. So, please think about all of the men, other than your most recent primary partner, with whom you've had vaginal or anal sex in the last 6 months who were HIV-positive." | | | | |
| FSH01 | F/M Other HIV pos: # men unprotected vaginal/anal sex | With how many of your [Response to FMN01] HIV-positive partners who were NOT your most recent primary partner did you have ANY unprotected vaginal or anal sex ? Note: If you started with a condom and then the condom came off during penetration, or if penetration started without a condom and then you used a condom, count this as unprotected sex. | numeric | 3 | numeric | |
| FSH01EDIT | | READ: "You cannot enter a number that is greater than [Response to FMN01], the number of partners you believe to be HIV-positive. Please re-answer this question." | | | | |

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| FSH02 | F/M Other HIV pos: # men unprotected vaginal/anal sex while high or drunk | Of these [Response to FSH01] men, with how many did you have any unprotected vaginal or anal sex while you were high on ANY drugs (including prescription drugs) or were drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSH02EDIT | | READ: "You cannot enter a number that is greater than [Response to FSH01], the number of HIV-positive partners with whom you've had unprotected vaginal or anal sex. Please re-answer this question." | | | | |
| FSHFL2 | | FLOATER LOGIC: | | | | |
| FSH03READ | | READ: "Now we are going to ask you some more questions about the [Response to FMN01] HIV-positive men, other than your most recent primary partner, with whom you had vaginal or anal sex in the last 6 months. For these remaining questions, we are going to ask you about the number of <u>times</u> you had vaginal or anal sex with these men." Again, when we refer to the "times" that you have had sex, we would like for you to count each sex act separately. For example, if on one occasion you had both vaginal and anal sex, this would count as 2 times. As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of vaginal sex) with the same partner or with different partners, this would count as 3 times. Please ask the Study Staff for help if what we mean by "times" is not clear. | | | | |
| FSH03 | F/M Other HIV pos: # times vaginal sex | In the last 6 months, how many times did you have vaginal sex with your [Response to FMN01] HIV-positive male partners? | numeric | 3 | numeric | |
| FSH04 | F/M Other HIV pos: # times vaginal sex high or drunk | How many of these [Response to FSH03] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSH04EDIT | | READ: You cannot enter a number that is greater than [Response to FSH03] which is the number of times you had vaginal sex with your HIV-positive male partners. Please re-answer this question. | | | | |
| FSH05 | F/M Other HIV pos: # times condom used for vaginal sex | How many of these [Response to FSH03] times was a condom used from start to finish? | numeric | 3 | numeric | |

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| FSH05EDIT | | READ: "You cannot enter a number that is greater than [Response to FSH03], the number of times you had vaginal sex with your HIV-positive male partners. Please re-answer this question." | | | | |
| FSHFV1 | F/M Other HIV pos: # unprotected times had vaginal sex | FLOATER VARIABLE: FUNPRO2 =FSH03-FSH05 If FSH05<0, then FUNPRO2 = FSH03 | | | | |
| FSHFL3 | | FLOATER LOGIC: | | | | |
| FSH06 | F/M Other HIV pos: # times high or drunk during unprotected vaginal sex | Think of the [FUNPRO2] times you had vaginal sex and did not use a condom from start to finish with your [Response to FMN01] HIV-positive male partners. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSH06EDIT | | READ: "You cannot enter a number that is greater than [FUNPRO2], the number of times you had vaginal sex and did not use condoms with your HIV-positive male partners other than your most recent primary partner. Please re-answer this question." | | | | |
| FSHFL4 | | FLOATER LOGIC: | | | | |
| FSH07 | F/M Other HIV pos: # times anal sex | In the last 6 months, how many times did you have anal sex with your [Response to FMN01] HIV-positive male partners? | numeric | 3 | numeric | |
| FSH08 | F/M Other HIV pos: # times anal sex high or drunk | How many of these [Response to FSH07] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSH08EDIT | | READ: You cannot enter a number that is greater than [Response to FSH07], the number of times you had anal sex with your HIV-positive male partners. Please re-answer this question. | | | | |
| FSH09 | F/M Other HIV pos: # times condom used for anal sex | How many of these [Response to FSH07] times was a condom used from start to finish? | numeric | 3 | numeric | |
| FSH09EDIT | | READ: "You cannot enter a number that is greater than [Response to FSH07], the number of times you had anal sex with your HIV-positive male partners. Please re-answer this question." | | | | |

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| FSHFV2 | F/M Other HIV pos: # unprotected times had anal sex | FLOATER VARIABLE: FUNPRO3 = FSH07-FSH09 If FSH09<0, then FUNPRO3 = FSH07 | | | | |
| FSHFL5 | | FLOATER LOGIC: | | | | |
| FSH10 | F/M Other HIV pos: # times high or drunk during unprotected anal sex | Think of the [FUNPRO3] times you had anal sex and did not use a condom from start to finish with your [Response to FMN01] HIV-positive male partners. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSH10EDIT | | READ: "You cannot enter a number that is greater than [FUNPRO3], the number of times you had anal sex and did not use condoms with your HIV-positive male partners. Please re-answer this question." | | | | |
| BEGIN | Start Assessment | BEGIN FSM – Sexual Behavior with HIV-Negative Partners (FSN) | | | | |
| FSNFL1 | | FLOATER LOGIC: | | | | |
| FSN01READ | | READ: "These next questions ask about your [Response to FMN02] HIV-negative partners who were NOT your most recent primary partner. So, please think about all of the men OTHER than your most recent primary partner with whom you've had vaginal or anal sex in the last 6 months who were HIV-negative." | | | | |
| FSN01READ1 | | READ: "REMEMBER...when we ask about the times you had vaginal sex, we mean a man's penis was in your vagina. When we ask about the times you had anal sex, we mean a man's penis was in your anus. Some questions refer to condom use. Include the times you used a male condom or a female condom (such as the Reality condom). Sex with a condom means that the condom was put on before you began having vaginal or anal sex and the condom was not taken off until you were done." | | | | |
| FSN01 | F/M Other HIV neg: # men unprotected vaginal/anal sex | With how many of your [Response to FMN02] HIV-negative partners who were NOT your most recent primary partner did you have ANY unprotected vaginal or anal sex ? Note: If you started with a condom and then the condom came off during penetration, or if penetration started without a condom and then you used a condom, count this as unprotected sex. | numeric | 3 | numeric | |
| FSN01EDIT | | READ: "You cannot enter a number that is greater than [Response to FMN02], the number of partners believed to be HIV-negative. Please re-answer this question." | | | | |

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| FSN02 | F/M Other HIV neg: # men unprotected vaginal/anal sex while high or drunk | Of these [Response to FSN01] men, with how many did you have any unprotected vaginal or anal sex while you were high on ANY drugs (including prescription drugs), or were drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSN02EDIT | | READ: "You cannot enter a number that is greater than [Response to FSN01], the number of HIV-negative partners OTHER than your most recent primary partner with whom you've had unprotected vaginal or anal sex. Please re-answer this question." | | | | |
| FSN03READ | | READ: "Now we are going to ask you some more questions about the [Response to FMN02] HIV-negative men, other than your most recent primary partner, with whom you had vaginal or anal sex in the last 6 months. For these remaining questions, we are going to ask you about the number of times you had vaginal or anal sex with these men." Again, when we refer to the "times" that you have had sex, we would like for you to count each sex act separately. For example, if on one occasion you had both vaginal and anal sex, this would count as 2 times. As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of vaginal sex) with the same partner or with different partners, this would count as 3 times. Please ask the study staff for help if what we mean by "times" is not clear. | | | | |
| FSNFL2 | | FLOATER LOGIC: | | | | |
| FSN03 | F/M Other HIV neg: # times vaginal sex | In the last 6 months, how many times did you have vaginal sex with your [Response to FMN02] HIV-negative male partners? | numeric | 3 | numeric | |
| FSN04 | F/M Other HIV neg: # times vaginal sex high or drunk | How many of these [Response to FSN03] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSN04EDIT | | READ: You cannot enter a number that is greater than [Response to FSN03], the number of times you had vaginal sex with your HIV-negative male partners. Please re-answer this question. | | | | |

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| FSN05 | F/M Other HIV neg: # times condom used for vaginal sex | How many of these [Response to FSN03] times was a condom used from start to finish? | numeric | 3 | numeric | |
| FSN05EDIT | | READ : "You cannot enter a number that is greater than [Response to FSN03] , the number of times you had vaginal sex with your HIV-negative male partners. Please re-answer this question." | | | | |
| FSNFV1 | F/M Other HIV neg: # times had unprotected vaginal sex | FLOATER VARIABLE: FUNPRO4 = FSN03-- FSN05 If FSN05<0, then FUNPRO4 = FSN03 | | | | |
| FSNFL3 | | FLOATER LOGIC: | | | | |
| FSN06 | F/M Other HIV neg: # times high or drunk during unprotected vaginal sex | Think of the [FUNPRO4] times you had vaginal sex and did not use a condom from start to finish with your [Response to FMN02] HIV-negative male partners. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSN06EDIT | | READ: "You cannot enter a number that is greater than [Response to FUNPRO4] , the number of times you had vaginal sex and did not use a condom with your HIV-negative partners. Please re-answer this question." | | | | |
| FSNFL4 | | FLOATER LOGIC: | | | | |
| FSN07 | F/M Other HIV neg: # times anal sex | In the last 6 months, how many times did you have anal sex with your [Response to FMN02] HIV-negative male partners? | numeric | 3 | numeric | |
| FSN08 | F/M Other HIV neg: # times anal sex high or drunk | How many of these [Response to FSN07] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSN08EDIT | | READ: You cannot enter a number that is greater than [Response to FSN07] , the number of times you had anal sex with your HIV-negative male partners. Please re-answer this question. | | | | |
| FSN09 | F/M Other HIV neg: # times condom used for anal sex | How many of these [Response to FSN07] times was a condom used from start to finish? | numeric | 3 | numeric | |

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| FSN09EDIT | | READ: "You cannot enter a number that is greater than [Response to FSN07], the number of times you had anal sex with your HIV-negative male partners. Please re-answer this question." | | | | |
| FSNFV2 | F/M Other HIV neg: # times had unprotected anal sex | FLOATER VARIABLE: FUNPRO5 = FSN07 - FSN09 If FSN09<0, then FUNPRO5 = FSN07 | | | | |
| FSNFL5 | | FLOATER LOGIC: | | | | |
| FSN10 | F/M Other HIV neg: # times high or drunk during unprotected anal sex | Think of the [FUNPRO5] times you had anal sex and did not use a condom from start to finish with your [Response toFMN02] HIV-negative male partners. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSN10EDIT | | READ: "You cannot enter a number that is greater than [FUNPRO5], the number of times you had anal sex and did not use a condom with your HIV-negative male partners. Please re-answer this question." | | | | |
| BEGIN | Start Assessment | BEGIN FSM – Sexual Behavior with Partners of Unknown Status (FSU) | | | | |
| FSUFL1 | | FLOATER LOGIC: | | | | |
| FSU01READ | | READ: "These next questions ask about your [FTOT_PN] partners whose HIV status you did not know and who were NOT your most recent primary partner. So, please think about all of the men, other than your most recent primary partner, with whom you've had vaginal or anal sex in the last 6 months whose HIV status you did not know." | | | | |
| FSU01 | F/M Other HIV unk: # men unprotected vaginal/anal sex | With how many of your [FTOT_PN] partners who were NOT your primary partner and whose HIV status you did not know did you have ANY unprotected vaginal or anal sex? Note: If you started with a condom and then the condom came off during penetration, or if penetration started without a condom and then you used a condom, count this as unprotected sex. | numeric | 3 | numeric | |
| FSU01EDIT | | READ: "You cannot enter a number that is greater than [Response to FTOT_PN], the number of partners other than your most recent primary partner whose HIV status you did not know. Please re-answer this question." | | | | |
| FSU02 | F/M Other HIV unk: # men unprotected vaginal/anal sex while high or drunk | Of these [Response to FSU01] men, with how many did you have any unprotected vaginal or anal sex while you were high on ANY drugs (including prescription drugs) or were drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |

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| FSU02READ | | READ: "You cannot enter a number that is greater than [Response to FSU01], the number of men with whom you had unprotected vaginal or anal sex. Please re-answer this question." | | | | |
| FSU03READ | | READ: "Now we are going to ask you some more questions about the [FTOT_PN] partners, other than your most recent primary partner, in the last 6 months whose HIV status you did not know. For these remaining questions, we are going to ask you about the number of times you had vaginal or anal sex with these men." Again, when we refer to the "times" that you have had sex, we would like for you to count each sex act separately. For example, if on one occasion you had both vaginal and anal sex, this would count as 2 times. As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of vaginal sex) with the same partner or with different partners, this would count as 3 times. Please ask the Study Staff for help if what we mean by "times" is not clear. | | | | |
| FSU03READ1 | | READ: "REMEMBER..when we ask about the times you had vaginal sex, we mean a man's penis was in your vagina. When we ask about the times you had anal sex, we mean a man's penis was in your anus. Some questions refer to condom use. Include the times you used a male condom or a female condom (such as the Reality condom). Sex with a condom means that the condom was put on before you began having sex and the condom was not taken off until you were done." | | | | |
| FSUFL2 | | FLOATER LOGIC: | | | | |
| FSU03 | F/M Other HIV unk: # times vaginal sex | In the last 6 months, how many times did you have vaginal sex with your [FTOT_PN] partners whose HIV status you did not know ? | numeric | 3 | numeric | |
| FSU04 | F/M Other HIV unk: # times vaginal sex high or drunk | How many of these [Response to FSU03] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSU04EDIT | | READ: You cannot enter a number that is greater than [Response to FSU03], the number of times you had vaginal sex with male partners other than your most recent primary partner whose HIV status you did not know. Please re-answer this question. | | | | |

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| FSU05 | F/M Other HIV unk: # times condom used for vaginal sex | How many of these [Response to FSU03] times was a condom used from start to finish? | numeric | 3 | numeric | |
| FSU05EDIT | | READ: "You cannot enter a number that is greater than [Response to FSU03], the number of times you had vaginal sex with male partners other than your most recent primary partner whose HIV status you did not know. Please re-answer this question." | | | | |
| FSUFV1 | F/M Other HIV unk: # times had unprotected vaginal sex | FLOATER VARIABLE: FUNPRO6 = FSU03-FSU05 If FSU05<0, then FUNPRO6 = FSU03 | | | | |
| FSUFL3 | | FLOATER LOGIC: | | | | |
| FSU06 | F/M Other HIV unk: # times high or drunk during unprotected vaginal sex | Think of the [FUNPRO6] times you had vaginal sex and did not use a condom from start to finish with your [FTOT_PN] male partners whose HIV status you did not know . How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSU06EDIT | | READ: "You cannot enter a number that is greater than [FUNPRO6], the number of times you had vaginal sex and did not use a condom with your unknown HIV status male partners. Please re-answer this question." | | | | |
| FSUFL4 | | FLOATER LOGIC: | | | | |
| FSU07 | F/M Other HIV unk: # times anal sex | In the last 6 months, how many times did you have anal sex with your [FTOT_PN] partners whose HIV status you did not know ? This would be with or without a condom and whether or not you had an orgasm or ejaculated. | numeric | 3 | numeric | |
| FSU08 | F/M Other HIV unk: # times anal sex high or drunk | How many of these [Response to FSU07] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSU08EDIT | | READ: You cannot enter a number that is greater than [Response to FSU07], the number of times you had anal sex with your partners whose HIV status you did not know. Please re-answer this question. | | | | |
| FSU09 | F/M Other HIV unk: # times condom used for anal sex | How many of these [Response to FSU07] times was a condom used from start to finish? | numeric | 3 | numeric | |

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| FSUFV2 | F/M Other HIV unk: # times had unprotected anal sex | FLOATER VARIABLE: FUNPRO7 = FSU07-FSU09 If FSU09<0, then FUNPRO7 = FSU07 | | | | |
| FSUFL5 | | FLOATER LOGIC: | | | | |
| FSU09EDIT | | READ: "You cannot enter a number that is greater than [Response to FSU07], the number of times you had anal sex with your partners whose HIV status you did not know. Please re-answer this question." | | | | |
| FSU10 | F/M Other HIV unk: # times high or drunk during unprotected anal sex | Think of the [FUNPRO7] times you had anal sex and did not use a condom from start to finish with your [FTOT_PN] male partners whose HIV status you did not know . How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| FSU10EDIT | | READ: "You cannot enter a number that is greater than [FUNPRO7], which is the number of times you had anal sex and did not use a condom with your unknown HIV status male partners. Please re-answer this question." | | | | |
| BEGIN | Start Assessment | BEGIN Global Sex Behavior Male Sexual Behavior with Female (MSF) | | | | |
| MSFFL2 | | FLOATER LOGIC: | | | | |
| MSF01READ | | READ: "This part of the interview asks about sexual partners and activities. Some questions ask about all your partners, and others ask only about certain partners. We want to remind you that everything you tell us is completely confidential. This means we will not give information about you to anyone, including staff of this Community Treatment Program." | | | | |
| BEGIN | | BEGIN Orientation to Sexual Terminology: Male Sexual Behavior with Female (MSF) | | | | |
| MSF01READ1 | | READ: "Before we begin talking about your sexual experiences, we'd like to go over some terms for talking about sex. People have different words for sex. We want to make sure the words in our questions are clear to you." | | | | |
| MSF01READ2 | | READ: " <u>Vaginal sex</u> is when you put your penis in your partner's vagina. <u>Anal sex</u> is when you put your penis in your partner's butt or anus or rectum. "In our interview, we'll be using formal terms -- like ' <u>vaginal sex</u> ' and ' <u>anal sex</u> '." | | | | |

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| MSF01READ3 | | <p>READ: "When we ask about vaginal or anal sex, we want you to <u>think about</u> times when you used or didn't use a condom, and whether or not you ejaculated or your partner had an orgasm. When we refer to the "times" that you have had sex, we would like for you to count each sex act separately. For example, if on one occasion you had both vaginal and anal sex, this would count as 2 times.</p> <p>As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of vaginal sex) with the same partner or with different partners, this would count as 3 times.</p> <p>Please ask the Study Staff for help if what we mean by "times" is not clear.</p> | | | | |
| BEGIN | | BEGIN Re-orientation to 6-month Time Frame Male Sexual Behavior with Female (MSF) | | | | |
| MSF01READ4 | | <p>READ: "Again, many of our questions will be asking about the past 6 months. Some people have trouble thinking about the last 6 months all at once. Here are some ways to make it easier. Count six months backwards from today [INSERT SYSDATE-180 days].</p> <p>Are there any special occasions that happened around this time? Any holidays, or birthdays or something important? Any major events in the news? O.K., keep this time period in mind when answering these questions. Some people find it easier to think about the past 6 months specifically by month, by week, or by day. Six months is 26 weeks or 183 days. For example, some people have sex maybe a couple of times per month; for them, it's easiest to think of sexual experiences by month. Some people have sex a few times a week; for them, it's easiest to think of a week. Some people have sex a few times a day; for them it's easiest to think of a day. Use whichever way is easiest for you to think about the past 6 months.</p> | | | | |
| MSF01READ5 | | READ: "First, we want to ask you about all of the women with whom you've had any vaginal or anal sex in the past 6 months." | | | | |
| MSF01 | M/F: # female: vaginal/anal sex acts | With how many women did you have vaginal or anal sex in the last 6 months? | numeric | 3 | numeric | |
| MSF02 | M/F: Confirm no vaginal/anal sex acts | You indicated you did not have vaginal or anal sex with any female sex partners in the past 6 months, is this correct? (Choose one) | multiple choice | 2 | numeric | AFFIRM |

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| MSF02WARN | | READ: You previously indicated that you had anal or vaginal sex with a female partner in the past 6 months, but now state that you have not. If this is wrong, please re-enter. Otherwise continue to the next question. | | | | |
| MSF02READ | | READ: "You indicated that you would like to change your answer. Please re-enter information about your female sex partners." | | | | |
| MSF02READ1 | | READ: Now we want to ask you about all the men with whom you've had any anal sex in the past 6 months. As a reminder... | | | | |
| MSF03 | M/F: Is only partner primary? | Do you consider this partner to be a primary partner? By "primary" partner we mean a woman with whom you have felt a special emotional commitment, someone you have dated or would call your girlfriend, spouse, significant other, or life partner. | yes/no | 2 | numeric | |
| MSF04 | M/F: Only partner HIV status | What is her HIV status? (Choose one) | multiple choice | 2 | numeric | HIVSTAT |
| MSF05 | M/F: Confirm only non-primary partner HIV status | Did she actually tell you her HIV status- (#MSF04#) and you had no reason to doubt it? | yes/no | 2 | numeric | |
| MSF06 | M/F: # female: vaginal sex acts | With how many women did you have any vaginal sex in the last 6 months? | numeric | 3 | numeric | |
| MSF06EDIT | | READ: "The number of female vaginal sex partners in the past six months ([response to MSF06]) cannot be more than the number of female vaginal or anal sex partners ([response to MSF01]) you reported earlier. Please correct." | | | | |
| MSF07 | M/F: Confirm no female vaginal sex | You indicated you did not have vaginal sex with any female sex partners in the past 6 months, is this correct? (Choose one) | multiple choice | 2 | numeric | AFFIRM |
| MSF07READ | | READ: "You indicated that you would like to change your answer. Please re-enter information about your sex partners." | | | | |
| MSF08 | M/F: # female: anal sex acts | With how many women did you have any anal sex in the last 6 months? | numeric | 3 | numeric | |
| MSF08EDIT | | READ: "The number of female vaginal sex partners ([response to MSF06]) plus the number of female anal sex partners ([response to MSF08]) in the past six months must be greater than or equal to the total number of female sex partners you reported earlier ([response to MSF01]). Please correct." | | | | |
| MSF08EDITX | | READ: "The number of female anal sex partners in the past six months ([MSF08]) cannot be more than the number of female vaginal or anal sex partners ([MSF01]) you reported earlier. Please correct" | | | | |

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| MSF09 | M/F: Confirm no female anal sex | You indicated you did not have anal sex with any female sex partners in the past 6 months, is this correct? (Choose one) | multiple choice | 2 | numeric | AFFIRM |
| MSF09READ | | READ: "You indicated that you would like to change your answer. Please re-enter information about your sex partners." | | | | |
| MSF10READ | | READ: "Now we want to ask you if you have had a primary female partner over the last 6 months. That is since approximately [PAST180D]. By 'Primary' partner we mean a woman with whom you have felt a special emotional commitment, someone you have dated or would call your girlfriend, spouse, significant other, or life partner." | | | | |
| MSF10 | M/F: Primary female partner? | Have you had a primary female partner in the last 6 months? | yes/no | 2 | numeric | |
| BEGIN | | BEGIN Global Sex Behavior MOST RECENT PRIMARY PARTNER (MFP) | | | | |
| MFP01READ | | READ: "Now we are going to ask you some questions about your sex behavior with your most recent female primary partner." | | | | |
| MFP01 | M/F primary: HIV status | What is her HIV status? (Choose one) | multiple choice | 2 | numeric | HIVSTAT |
| MFPFL5 | | FLOATER LOGIC: | | | | |
| MFP02 | M/F primary: # times vaginal sex | In the last 6 months, how many times did you have vaginal sex with your most recent primary partner? | numeric | 3 | numeric | |
| MFP03 | M/F primary: # times high or drunk during vaginal sex | How many of these [Response to MFP02] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MFP03EDIT | | READ: You cannot enter a number that is greater than [Response to MFP02], the number of times you had vaginal sex with your most recent primary partner. Please re-answer this question. | | | numeric | |
| MFP04 | M/F primary: # times used condoms during vaginal sex | How many of these [Response to MFP02] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MFP04EDIT | | READ: "You cannot enter a number that is greater than [Response to MFP02], the number of times you had vaginal sex with your most recent primary partner. Please re-answer this question." | | | | |
| MFPFV1 | M/F primary: # times had unprotected vaginal sex | FLOATER VARIABLE: MUNPRO = MFP02 - MFP04 If MFP04<0, then MUNPRO = MFP02 | | | | |

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| MFPFL1 | | FLOATER LOGIC: | | | | |
| MFP05 | M/F primary: # times high or drunk during unprotected vaginal sex | Think of the [MUNPRO] times you had vaginal sex and did not use a condom from start to finish with your most recent primary partner. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MFP05EDIT | | READ: "You cannot enter a number that is greater than [MUNPRO], the number of times you had vaginal sex and did not use a condom with your most recent primary partner. Please re-answer this question." | | | | |
| MFPFL2 | | FLOATER LOGIC: | | | | |
| MFP06 | M/F primary: # times anal sex | In the last 6 months, how many times did you have anal sex with your most recent primary partner? | numeric | 3 | numeric | |
| MFP07 | M/F primary: # times high or drunk during anal sex | How many of these [Response to MFP06] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MFP07EDIT | | READ: You cannot enter a number that is greater than [Response to MFP06], which is the number of times you had anal sex with your most recent primary partner. Please re-answer this question. | | | | |
| MFP08 | M/F primary: # times used condoms anal sex | How many of these [Response to MFP06] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MFP08EDIT | | "You cannot enter a number that is greater than [Response to MFP06], which is the number of times you had anal sex with your most recent primary partner. Please re-answer this question." | | | | |
| MFPFV2 | M/F primary: # times had unprotected anal sex | FLOATER VARIABLE: MUNPRO1 = MFP06-MFP08 If MFP08<0, then MUNPRO1 = MFP06 | | | | |
| MFPFL3 | | FLOATER LOGIC: | | | | |
| MFP09 | M/F primary: # times high or drunk during unprotected anal sex | Think of the [MUNPRO1] times you had anal sex and did not use a condom from start to finish with your most recent primary partner. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MFP09EDIT | | "You cannot enter a number that is greater than [MUNPRO1], the number of times you had anal sex and did not use a condom with your most recent primary partner. Please re-answer this question." | | | | |

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| MFPFL4 | | FLOATER LOGIC: | | | | |
| MFP10READ | | <i>READ: "Now we want to ask you about all of the women, OTHER than your most recent primary partner, with whom you've had any vaginal or anal sex in the past 6 months." If you've already told us that you have NOT had a primary partner in the last 6 months, then just think about ALL of the female partners that you've had sex with over the last 6 months.</i> | | | | |
| MFP10 | M/F other: # female vaginal/anal sex | With how many women did you have any vaginal or anal sex in the last 6 months other than your most recent primary partner? This includes times when you used or didn't use a condom, and whether or not there was ejaculation. | numeric | 3 | numeric | |
| MFP10EDIT | | <i>READ: "You cannot enter a number that is greater than [Response to MSF01], the number of women with whom you've had vaginal or anal sex in the last 6 months. Please re-answer this question."</i> | | | | |
| MFP11 | M/F other: confirm no female vaginal/anal sex acts | You indicated you did not have vaginal or anal sex with any woman other than your most recent primary partner in the past 6 months, is this correct? (Choose one) | multiple choice | 2 | numeric | AFFIRM |
| MFP11READ | | <i>READ: "You indicated you would like to change your answers. Please re-enter information about your non-primary sex partners."</i> | | | | |
| BEGIN | | BEGIN Global Sex Behavior SEXUAL BEHAVIOR WITH ALL OTHER FEMALE PARTNERS (MFN) | | | | |
| MFN01READ | | <i>READ: "The next questions will be about all of your [Response to MFP10] female partners, OTHER than your most recent primary partner, with whom you've had any vaginal or anal sex in the last 6 months. We want to ask you about the HIV status of these female partners."</i> | | | | |
| MFN01READ1 | | <i>READ: We will ask you to tell us how many of these [Responses to MFP10] female partners were HIV-positive, how many were HIV-negative, and how many of these partners had an HIV status that you did not know. The numbers that you provide for all three categories (that is, HIV-positive, HIV-negative, and HIV status unknown) must equal (that is, add up to) [Response MFP10], the total number of female partners, OTHER than your most recent primary partner , with whom you reported having had any vaginal or anal sex in the last 6 months.</i> | | | | |
| MFN01 | M/F other: # female HIV positive | Of these [Response to MFP10] women, how many did you believe were HIV-positive and had no reason to doubt it? | numeric | 3 | numeric | |

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| MFN01EDIT | | READ: "You cannot enter a number that is greater than [Response to MFP10], the number of women, other than your most recent primary partner, with whom you've had vaginal or anal sex. Please re-answer this question." | | | | |
| MFNFV1 | M/F other: # non-HIV positive female partners | FLOATER VARIABLE: MTOT_P = MFP10 - MFN01 If MFN01<0, then MTOT_P = MFP10 | | | | |
| MFNFL2 | | FLOATER LOGIC: | | | | |
| MFN02 | M/F other: # female HIV negative | Of the remaining [Response to MTOT_P] women, how many did you believe were HIV-negative and had no reason to doubt it? | numeric | 3 | numeric | |
| MFN02EDIT | | READ: "You cannot enter a number that is greater than [Response to MTOT_P], the number of women, other than your most recent primary partner, with whom you've had vaginal or anal sex and believe were not HIV-positive. Please re-answer this question." | | | | |
| MFNFV2 | M/F Other: # female partners unknown/unsure of HIV status | FLOATER VARIABLE: MTOT_PN = MTOT_P - MFN02 If MFN02<0, then MTOT_PN = MTOT_P | | | | |
| MFN03 | M/F other: confirm # female unknown or unsure of HIV status | So you had this number of female partners - [variable] - whose HIV status you did not know or were unsure of? | multiple choice | 3 | numeric | AFFIRM |
| MFN03READ | | READ: You indicated that you would like to change your answer. Please re-enter information about the HIV status of your partners. | | | | |
| MFNFL4 | | FLOATER LOGIC: | | | | |
| MFN04 | M/F other: HIV pos female told you HIV pos | Of the [Response to MFN01] HIV-positive women, how many actually TOLD you they were HIV-positive and you had no reason to doubt it? | numeric | 3 | numeric | |
| MFN04EDIT | | READ: "You cannot enter a number that is greater than [Response to MFN01], the number of partners you believe to be HIV-positive. Please re-answer this question." | | | | |
| MFNFL5 | | FLOATER LOGIC: | | | | |
| MFN05 | M/F other: HIV neg female told you HIV neg | Of the [Response to MFN02] HIV-negative women, how many actually TOLD you they were HIV-negative and you had no reason to doubt it? | numeric | 3 | numeric | |

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| MFN05EDIT | | READ: "You cannot enter a number that is greater than [Response to MFN02], the number of partners you believe to be HIV-negative. Please re-answer this question." | | | | |
| BEGIN | | BEGIN Global Sex Behavior MSF -- Sexual Behavior with HIV-Positive Partners (MSH) | | | | |
| MSHFL1 | | FLOATER LOGIC: | | | | |
| MSH01READ | | READ: "These next questions ask about your [Response to MFN01] HIV-positive partners who were NOT your most recent primary partner. So, please think about all of the women, OTHER than your most recent primary partner, with whom you've had any vaginal or anal sex in the last 6 months who were HIV-positive." | | | | |
| MSH01 | M/F other HIV pos: # female unprotected vaginal/anal sex | With how many of your [Response to MFN01] HIV-positive partners who were NOT your most recent primary partner did you have ANY unprotected vaginal or anal sex? Note: if you started with a condom and then the condom came off during penetration, or if penetration started without a condom and then you used a condom, count this as unprotected sex. | numeric | 3 | numeric | |
| MSH01EDIT | | READ: "You cannot enter a number that is greater than [Response to MFN01], - the number of partners you believe to be HIV-positive. Please re-answer this question." | | | | |
| MSH02 | M/F other HIV pos: # female unprotected vaginal/anal sex while high or drunk | Of these [Response to MSH01] women, with how many did you have any unprotected vaginal or anal sex while you were high on ANY drugs (including prescription drugs) or were drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSH02EDIT | | READ: "You cannot enter a number that is greater than [Response to MSH01], the number of HIV-positive partners with whom you've had unprotected vaginal or anal sex. Please re-answer this question." | | | | |
| MSHFL2 | | FLOATER LOGIC: | | | | |

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| MSH03READ | | <p>READ: "Now we are going to ask you some more questions about the [Response to MFN01] HIV-positive women, other than your most recent primary partner, with whom you've had vaginal or anal sex in the last 6 months. For these remaining questions, we are going to ask you about the number of times you had vaginal or anal sex with these women."</p> <p>Again, when we refer to the "times" that you have had sex, we would like for you to count each sex act separately. For example, if on one occasion you had both vaginal and anal sex, this would count as 2 times.</p> <p>As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of vaginal sex) with the same partner or with different partners, this would count as 3 times.</p> <p>Please ask the Study Staff for help if what we mean by "times" is not clear.</p> | | | | |
| MSH03 | M/F other HIV pos: # times vaginal sex | In the last 6 months, how many times did you have vaginal sex with your [Response to MFN01] HIV-positive female partners? | numeric | 3 | numeric | |
| MSH04 | M/F other HIV pos: # times vaginal sex high or drunk | How many of these [Response to MSH03] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSH04EDIT | | READ: You cannot enter a number that is greater than [Response to MSH03], the number of times you had vaginal sex with your HIV-positive female partners. Please re-answer this question. | | | | |
| MSH05 | M/F other HIV pos: # times condom used for vaginal sex | How many of these [Response to MSH03] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MSH05EDIT | | READ: "You cannot enter a number that is greater than [Response to MSH03], the number of times you had vaginal sex with your HIV-positive female partners. Please re-answer this question." | | | | |
| MSHFV1 | M/F other HIV pos: # times had unprotected vaginal sex | FLOATER VARIABLE: MUNPRO2 = MSH03-MSH05 If MSH05<0, then MUNPRO2 = MSH03 | | | | |
| MSHFL3 | | FLOATER LOGIC: | | | | |

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| MSH06 | M/F other HIV pos: # times high or drunk during unprotected vaginal sex | Think of the [MUNPRO2] times you had vaginal sex and did not use a condom from start to finish with your [Response to MFN01] HIV-positive female partners. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSH06EDIT | | READ: "You cannot enter a number that is greater than [MUNPRO2], the number of times you had vaginal sex and did not use condoms with your HIV-positive female partners other than your most recent primary partner. Please re-answer this question." | | | | |
| MSHFL4 | | FLOATER LOGIC: | | | | |
| MSH07 | M/F other HIV pos: # times anal sex | In the last 6 months, how many times did you have anal sex with your [Response to MFN01] HIV-positive female partners? | numeric | 3 | numeric | |
| MSH08 | M/F other HIV pos: # times anal sex high or drunk | How many of these [Response to MSH07] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSH08EDIT | | READ: You cannot enter a number that is greater than [Response to MSH07], the number of times you had anal sex with your HIV-positive female partners. Please re-answer this question. | | | | |
| MSH09 | M/F other HIV pos: #condom used for anal sex | How many of these [Response to MSH07] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MSH09EDIT | | READ: "You cannot enter a number that is greater than [Response to MSH07], the number of times you had anal sex with your HIV-positive female partners. Please re-answer this question." | | | | |
| MSHFV2 | M/F other HIV pos: # times had unprotected anal sex | FLOATER VARIABLE: MUNPRO3 = MSH07-MSH09 If MSH09<0, then MUNPRO3 = MSH07 | | | | |
| MSHFL5 | | FLOATER LOGIC: | | | | |
| MSH10 | M/F other HIV pos: # times high or drunk during unprotected anal sex | Think of the [MUNPRO3] times you had anal sex and did not use a condom from start to finish with your [Response to MFN01] HIV-positive female partners. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |

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| MSH10EDIT | | READ: "You cannot enter a number that is greater than [MUNPRO3], the number of times you had anal sex and did not use condoms with your HIV-positive female partners. Please re-answer this question." | | | | |
| BEGIN | | BEGIN Global Sexual Behavior MSF -- Sexual Behavior with HIV-Negative Partners (MSN) | | | | |
| MSNFL1 | | FLOATER LOGIC: | | | | |
| MSN01READ | | READ: "These next questions ask about your [Response to MFN02] HIV-negative female partners who were NOT your most recent primary partner. So, please think about all of the women, OTHER than your most recent primary partner, with whom you've had any vaginal or anal sex in the last 6 months who were HIV-negative." | | | | |
| MSN01READ1 | | READ: "REMEMBER ... when we ask about the times you had vaginal sex, we mean your penis was in a woman's vagina. When we ask about the times you had anal sex, we mean your penis was in a woman's anus. Some questions refer to condom use. Include the times you used a male condom or a female condom (such as the Reality condom). Sex with a condom means that the condom was put on before you began having vaginal or anal sex and the condom was not taken off until you were done." | | | | |
| MSN01 | M/F other HIV neg: # female unprotected vaginal/anal sex | With how many of your [Response to MFN02] HIV-negative partners who were NOT your primary partner did you have ANY unprotected vaginal or anal sex ? Note: if you started with a condom and then the condom came off during penetration, or if penetration started without a condom and then you used a condom, count this as unprotected sex. | numeric | 3 | numeric | |
| MSN01EDIT | | READ: "You cannot enter a number that is greater than [Response to MFN02], the number of partners believed to be HIV-negative. Please re-answer this question." | | | | |
| MSN02 | M/F other HIV neg: # female unprotected vaginal/anal sex while high or drunk | Of these [Response to MSN01] women, with how many did you have any unprotected vaginal or anal sex while you were high on ANY drugs (including prescription drugs) or were drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSN02EDIT | | READ: "You cannot enter a number that is greater than [Response to MSN01], which is the number of HIV-negative partners OTHER than your most recent primary partner with whom you've had unprotected vaginal or anal sex. Please re-answer this question." | | | | |

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| MSN03READ | | <p>READ: "Now we are going to ask you some more questions about the [Response to MFN02] HIV-negative women, other than your most recent primary partner, with whom you had vaginal or anal sex in the last 6 months. For these remaining questions, we are going to ask you about the number of times you had vaginal or anal sex with these women." Again, when we refer to the "times" that you have had sex, we would like for you to count each sex act separately. For example, if on one occasion you had both vaginal and anal sex, this would count as 2 times.</p> <p>As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of vaginal sex) with the same partner or with different partners, this would count as 3 times.</p> <p>Please ask the Study Staff for help if what we mean by "times" is not clear.</p> | | | | |
| MSNFL2 | | FLOATER LOGIC: | | | | |
| MSN03 | M/F other HIV neg: # times vaginal sex | In the last 6 months, how many times did you have vaginal sex with your [Response to MFN02] HIV-negative female partners? | numeric | 3 | numeric | |
| MSN04 | M/F other HIV neg: # times vaginal sex high or drunk | How many of these [Response to MSN03] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSN04EDIT | | READ: You cannot enter a number that is greater than [Response to MSN03] , the number of times you had vaginal sex with your HIV-negative female partners. Please re-answer this question. | | | | |
| MSN05 | M/F other HIV neg: # times condom used for vaginal sex | How many of these [Response to MSN03] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MSN05EDIT | | READ: "You cannot enter a number that is greater than [Response to MSN03] , the number of times you had vaginal sex with your HIV-negative female partners. Please re-answer this question." | | | | |
| MSNFV1 | M/F other HIV neg: # times had unprotected vaginal sex | FLOATER VARIABLE: MUNPRO4= MSN03-MSN05 If MSN05<0, then MUNPRO4 = MSN03 | | | | |
| MSNFL3 | | FLOATER LOGIC: | | | | |

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| MSN06 | M/F other HIV neg: # times high or drunk during unprotected vaginal sex | Think of the [MUNPRO4] times you had vaginal sex and did not use a condom from start to finish with your [Response to MFN02] HIV-negative female partners. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSN06EDIT | | READ: "You cannot enter a number that is greater than [MUNPRO4], the number of times you had vaginal sex and did not use a condom with your HIV-negative partners. Please re-answer this question." | | | | |
| MSNFL4 | | FLOATER LOGIC: | | | | |
| MSN07 | M/F other HIV neg: # times anal sex | In the last 6 months, how many times did you have anal sex with your [Response to MFN02] HIV-negative female partners? | numeric | 3 | numeric | |
| MSN08 | M/F other HIV neg: # times anal sex high or drunk | How many of these [Response to MSN07] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSN08EDIT | | READ: You cannot enter a number that is greater than [Response to MSN07], the number of times you had anal sex with your HIV-negative female partners. Please re-answer this question. | | | | |
| MSN09 | M/F other HIV neg: # times condom used for anal sex | How many of these [Response to MSN07] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MSN09EDIT | | READ: "You cannot enter a number that is greater than [Response to MSN07], the number of times you had anal sex with your HIV-negative female partners. Please re-answer this question." | | | | |
| MSNFV2 | M/F other HIV neg: # times had unprotected anal sex | FLOATER VARIABLE: MUNPRO5 = MSN07-MSN09 If MSN09<0, then MUNPRO5 = MSN07 | | | | |
| MSNFL5 | | FLOATER LOGIC: | | | | |
| MSN10 | M/F other HIV neg: # times high or drunk during unprotected anal sex | Think of the [MUNPRO5] times you had anal sex and did not use a condom from start to finish with your [Response to MFN02] HIV-negative female partners. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |

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| MSN10EDIT | | READ: "You cannot enter a number that is greater than [MUNPRO5], the number of times you had anal sex and did not use a condom with your HIV-negative female partners. Please re-answer this question." | | | | |
| | | BEGIN Global Sexual Behavior MSF -- Sexual Behavior with Partners of Unknown HIV Status (MSU) | | | | |
| MSUFL1 | | FLOATER LOGIC: | | | | |
| MSU01READ | | READ: "These next questions ask about your [MTOT_PN] female partners whose HIV status you did not know and who were NOT your most recent primary partner. So, please think about all of the women, other than your most recent primary partner, with whom you've had vaginal or anal sex in the last 6 months whose HIV status you did not know." | | | | |
| MSU01 | M/F other HIV unk: # female unprotected vaginal/anal sex | With how many of your [MTOT_PN] partners who were NOT your most recent primary partner and whose HIV status you did not know did you have ANY unprotected vaginal or anal sex? Note: if you started with a condom and then the condom came off during penetration, or if penetration started without a condom and then you used a condom, count this as unprotected sex. | numeric | 3 | numeric | |
| MSU01EDIT | | READ: "You cannot enter a number that is greater than [MTOT_PN], the number of partners whose HIV status you did not know. Please re-answer this question." | | | | |
| MSU02 | M/F other HIV unk: # female unprotected vaginal/anal sex while high or drunk | Of these [Response to MSU01] women, with how many did you have any unprotected vaginal or anal sex while you were high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSU02EDIT | | READ: "You cannot enter a number that is greater than [Response to MSU01], the number of women with whom you had unprotected vaginal or anal sex. Please re-answer this question." | | | | |

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| MSU03READ | | <p>READ: "Now we are going to ask you some more questions about the [MTOT_PN] female partners, other than your most recent primary partner, in the last 6 months whose HIV status you did not know. For these remaining questions, we are going to ask you about the number of times you had vaginal or anal sex with these women."</p> <p>Again, when we refer to the "times" that you have had sex, we would like for you to count each sex act separately. For example, if on one occasion you had both vaginal and anal sex, this would count as 2 times.</p> <p>As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of vaginal sex) with the same partner or with different partners, this would count as 3 times.</p> <p>Please ask the Study Staff for help if what we mean by "times" is not clear.</p> | | | | |
| MSU03READ1 | | <p>READ: "REMEMBER ... when we ask about the times you had vaginal sex, we mean your penis was in a woman's vagina. When we ask about the times you had anal sex, we mean your penis was in a woman's anus. Some questions refer to condom use. Include the times you used a male condom or a female condom (such as the Reality condom). Sex with a condom means that the condom was put on before you began having vaginal or anal sex and the condom was not taken off until you were done."</p> | | | | |
| MSUFL2 | | FLOATING LOGIC: | | | | |
| MSU03 | M/F other HIV unk: # times vaginal sex | In the last 6 months, how many times did you have vaginal sex with your [MTOT_PN] partners whose HIV status you did not know ? | numeric | 3 | numeric | |
| MSU04 | M/F other HIV unk: # times vaginal sex high or drunk | How many of these [Response to MSU03] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSU04EDIT | | READ: You cannot enter a number that is greater than [Response to MSU03], the number of times you had vaginal sex with female partners other than your most recent primary partner whose HIV status you did not know. Please re-answer this question. | | | | |

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| MSU05 | M/F other HIV unk: # times condom used for vaginal sex | How many of these [Response to MSU03] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MSU05EDIT | | READ: "You cannot enter a number that is greater than [MSU03], the number of times you had vaginal sex with female partners, other than your most recent primary partner, whose HIV status you did not know. Please re-answer this question." | | | | |
| MSUFV1 | M/F other HIV unk: # times had unprotected vaginal sex | FLOATER VARIABLE: MUNPRO6 = MSU03-MSU05 If MSU05<0, then MUNPRO6 = MSU03 | | | | |
| MSUFL3 | | FLOATER LOGIC: | | | | |
| MSU06 | M/F other HIV unk: # times high or drunk during unprotected vaginal sex | Think of the [MUNPRO6] times you had vaginal sex and did not use a condom from start to finish with your [MTOT_PN] female partners whose HIV status you did not know . How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSU06EDIT | | READ: "You cannot enter a number that is greater than [MUNPRO6], the number of times you had vaginal sex and did not use a condom with your unknown HIV status female partners. Please re-answer this question." | | | | |
| MSUFL4 | | FLOATER LOGIC: | | | | |
| MSU07 | M/F other HIV unk: # times anal sex | In the last 6 months, how many times did you have anal sex with your [MTOT_PN] female partners whose HIV status you did not know ? This would be with or without a condom, and whether or not you had an orgasm or ejaculated. | numeric | 3 | numeric | |
| MSU08 | M/F other HIV unk: # times anal sex high or drunk | How many of these [Response to MSU07] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSU08EDIT | | READ: You cannot enter a number that is greater than [Response to MSU07], the number of times you had anal sex with your female partners whose HIV status you did not know. Please re-answer this question. | | | | |
| MSU09 | M/F other HIV unk: # times condom used for anal sex | How many of these [MSU07] times was a condom used from start to finish? | numeric | 3 | numeric | |

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| MSU09EDIT | | READ: "You cannot enter a number that is greater than [Response to MSU07], the number of times you had anal sex with your female partners whose HIV status you did not know. Please re-answer this question." | | | | |
| MSUFV2 | M/F other HIV unk: # times had unprotected anal sex | FLOATER VARIABLE: MUNPRO7 = MSU07-MSU09 If MSU09<0, then MUNPRO7 = MSU07 | | | | |
| MSUFL5 | | FLOATER LOGIC: | | | | |
| MSU10 | M/F other HIV unk: # times high or drunk during unprotected anal sex | Think of the [MUNPRO7] times you had anal sex and did not use a condom from start to finish with your [MTOT_PN] female partners whose HIV status you did not know . How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MSU10EDIT | | READ: "You cannot enter a number that is greater than [MUNPRO7], the number of times you had anal sex and did not use a condom with your unknown HIV status female partners. Please re-answer this question." | | | | |
| BEGIN | | BEGIN Global Sexual Behavior Male Sexual Behavior with Males (MSM) | | | | |
| MSMFL2 | | FLOATER LOGIC | | | | |
| MSM01READ | | READ: "This part of the interview asks about male sexual partners and activities. Some questions ask about all your partners, and others ask only about certain partners. We want to remind you that everything you tell us is completely confidential. This means we will not give information about you to anyone, including staff of this Community Treatment Program." | | | | |
| BEGIN | | BEGIN Orientation to Sexual Terminology: Male Sexual Behavior with Males (MSM) | | | | |
| MSM01READ 1 | | READ: "Before we begin talking about your sexual experiences, we'd like to go over some terms for talking about sex. People have different words for sex. We want to make sure the words in our questions are clear to you." | | | | |
| MSM01READ 2 | | "When we ask about the times you were a top, we mean a top during anal sex (that is, insertive anal sex, where your penis was in a man's rectum). When we ask about the times you were a bottom, we mean a bottom during anal sex (that is, receptive anal sex, where a man's penis was in your rectum)." | | | | |

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| MSM01READ 3 | | <p><u>"When we ask about anal sex, we want you to think about times when you used or didn't use a condom, and whether or not you or your partner ejaculated.</u> When we refer to the "times" that you have had anal sex, we would like for you to count each sex act separately. For example, if on one occasion you had both insertive and receptive anal sex (that is, you were a top and a bottom), this would count as 2 times.</p> <p>As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of insertive anal sex or sex where you were a top) with the same partner or with different partners, this would count as 3 times.</p> <p>Please ask the Study Staff for help if what we mean by "times" is not clear.</p> | | | | |
| BEGIN | | BEGIN Re-orientation to 6-month Time Frame Male Sexual Behavior with Males (MSM) | | | | |
| MSM01READ 4 | | <p>READ: "Again, many of our questions will be asking about the past 6 months. Some people have trouble thinking about the last 6 months all at once. Here are some ways to make it easier. Count six months backward from today [INSERT SYSDATE-180 days].</p> <p>Are there any special occasions that happened around this time? Any holidays, or birthdays or something important? Any major events in the news? O.K., keep this time period in mind when answering these questions. Some people find it easier to think about the past 6 months specifically by month, by week, or by day. Six months is 26 weeks or 183 days. For example, some people have sex maybe a couple of times per month; for them, it's easiest to think of sexual experiences by month. Some people have sex a few times a week; for them, it's easiest to think of a week. Some people have sex a few times a day; for them, it's easiest to think of a day. Use whichever way is easiest for you to think about the past 6 months."</p> | | | | |
| MSM01READ 5 | | READ: "First, we want to ask you about all of the men with whom you've had ANY anal sex in the past 6 months." | | | | |
| MSM01 | M/M: # men any anal sex | With how many men did you have ANY anal sex (that is, where you were a top or bottom) in the last 6 months? | numeric | 3 | numeric | |
| MSM02 | M/M: Confirm no anal sex acts | You indicated you did not have ANY anal sex with any male sex partners in the past 6 months, is this correct? (Choose one) | multiple choice | 2 | numeric | AFFIRM |
| MSM02WARN | | READ: You previously indicated that you had anal sex with a male partner in the past 6 months, but now state that you have not. If this is wrong, please re-enter. Otherwise continue to the next question. | | | | |

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| MSM02READ | | READ: "You indicated that you would like to change your answer. Please re-enter information about your sex partners." | | | | |
| MSM03 | M/M: Is only partner primary? | Do you consider this partner to be a primary partner? By "primary" partner we mean a man with whom you have felt a special emotional commitment, someone you have dated or would call your boyfriend, spouse, significant other, or life partner. | yes/no | 2 | numeric | |
| MSM04 | M/M: only partner HIV status | What is his HIV status? (Choose one) | multiple choice | 2 | numeric | HIVSTAT |
| MSM05 | M/M: confirm only non-primary partner HIV status | Did he actually tell you that he was HIV-(#MSM04#) and you had no reason to doubt it? | yes/no | 2 | numeric | |
| MSM06 | M/M: # men insertive anal sex acts | With how many men did you have any insertive anal sex (that is, where you were a top) in the last 6 months? This includes times when you used or didn't use a condom, and whether or not you had an orgasm or there was ejaculation. | numeric | 3 | numeric | |
| MSM06EDIT | | READ: The number of male insertive anal sex partners in the past six months ([response to MSM06]) cannot be more than the TOTAL number of male anal sex partners you reported earlier. Please correct. | | | | |
| MSM07 | M/M: Confirm no insertive anal sex acts | You indicated you did not have any insertive anal sex with any male sex partners in the past 6 months, is this correct? (Choose one) | multiple choice | 2 | numeric | AFFIRM |
| MSM07READ | | READ: "You indicated that you would like to change your answer. Please re-enter information about your sex partners." | | | | |
| MSM08 | M/M: # men receptive anal sex acts | With how many men did you have any receptive anal sex (that is, where you were a bottom) in the last 6 months? This includes times when you used or didn't use a condom, and whether or not you had an orgasm or there was ejaculation. | numeric | 3 | numeric | |
| MSM08EDIT | | READ: The number of male insertive anal sex partners ([MSM06]) plus the number of male receptive anal sex partners ([MSM08]) in the past six months must be greater than or equal to the total number of sex partners you reported earlier ([response to MSM01]). Please correct. | | | | |
| MSM08EDITX | | READ: "The number of male receptive anal sex partners in the past six months ([MSM08]) cannot be more than the number of male anal sex partners ([MSM01]) you reported earlier. Please correct" | | | | |
| MSM09 | M/M: confirm no receptive anal sex | You indicated you did not have receptive anal sex with any male sex partners in the past 6 months, is this correct? (Choose one) | multiple choice | 2 | numeric | AFFIRM |

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| MSM09READ | | READ: "You indicated that you would like to change your answer. Please re-enter information about your sex partners." | | | | |
| MSM10READ | | READ: Now we want to ask you if you have had a primary male partner over the last 6 months [PAST180D]. By "Primary" partner we mean a man with whom you have felt a special emotional commitment, someone you have dated or would call your boyfriend, spouse, significant other, or life partner. | | | | |
| MSM10 | M/M: Primary male partner | Have you had a primary male partner in the last 6 months? | yes/no | 2 | numeric | |
| BEGIN | | BEGIN Global Sexual Behavior MOST RECENT PRIMARY PARTNER (MMP) | | | | |
| MMP01READ | | READ: "Now we are going to ask you some questions about your sex behavior with your most recent male primary partner." | | | | |
| MMP01 | M/M primary: HIV status | What is his HIV status? (Choose one) | multiple choice | 2 | numeric | HIVSTAT |
| MMPFL5 | | FLOATER LOGIC: | | | | |
| MMP02 | M/M primary: # times insertive anal sex | In the last 6 months, how many times were you the top (in anal sex) with your most recent primary partner? | numeric | 3 | numeric | |
| MMP03 | M/M primary: # times high or drunk during insertive anal sex | How many of these [Response to MMP02] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMP03EDIT | | READ: You cannot enter a number that is greater than [Response to MMP02], the number of times you were the top (in anal sex) with your most recent primary partner. Please re-answer this question. | | | | |
| MMP04 | M/M primary: # times used condoms during insertive anal sex | How many of these [Response to MMP02] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MMP04EDIT | | READ: "You cannot enter a number that is greater than [Response to MMP02], the number of times you were the top (in anal sex) with your most recent partner. Please re-answer this question." | | | | |

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| MMPFV1 | M/M primary: # times had unprotected insertive anal sex | FLOATER VARIABLE: AUNPRO = MMP02-MMP04 If MMP04<0, then AUNPRO = MMP02 | | | | |
| MMPFL1 | | FLOATER LOGIC | | | | |
| MMP05 | M/M primary: # times high or drunk during unprotected insertive anal sex | Think of the [AUNPRO] times you were the top (in anal sex) and did not use a condom from start to finish with your most recent primary partner. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMP05EDIT | | READ: You cannot enter a number that is greater than [AUNPRO], which is the number of times you were the top (in anal sex) and did not use a condom with your most recent partner. Please re-answer this question. | | | | |
| MMPFL2 | | FLOATER LOGIC: | | | | |
| MMP06 | M/M primary: # times receptive anal sex | In the last 6 months, how many times were you the bottom (in anal sex) with your most recent primary partner? | numeric | 3 | numeric | |
| MMP07 | M/M primary: # times high or drunk during receptive anal sex | How many of these [Response to MMP06] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMP07EDIT | | READ: You cannot enter a number that is greater than [Response to MMP06], the number of times you were the bottom (in anal sex) with your most recent primary partner. Please re-answer this question. | | | | |
| MMP08 | M/M primary: # times used condoms during receptive anal sex | How many of these [Response to MMP06] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MMP08EDIT | | READ: "You cannot enter a number that is greater than [Response to MMP06], the number of times you were the bottom (in anal sex) with your most recent partner. Please re-answer this question." | | | | |

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| MMPFV2 | M/M primary: # times had unprotected receptive anal sex | FLOATER VARIABLE: AUNPRO1=MMP06-MMP08 If MMP08<0, then AUNPRO1 = MMP06 | | | | |
| MMPFL3 | | FLOATER LOGIC | | | | |
| MMP09 | M/M primary: # times high or drunk during unprotected receptive anal sex | Think of the [AUNPRO1] times you were the bottom (in anal sex) and did not use a condom from start to finish with your most recent primary partner. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMP09EDIT | | READ: "You cannot enter a number that is greater than [AUNPRO1], which is the number of times you were the bottom (in anal sex) and did not use a condom with your most recent partner. Please re-answer this question." | | | | |
| MMPFL4 | | FLOATER LOGIC | | | | |
| MMP10READ | | READ: "Now we want to ask you about all of the men OTHER than your most recent primary partner, with whom you've had any anal sex in the past 6 months." If you've already told us that you have NOT had a primary partner in the last 6 months, then just think about ALL of the male partners that you've had sex with over the last 6 months. | | | | |
| MMP10 | M/M other: # men any anal sex | With how many men did you have ANY anal sex (as top or bottom) in the last 6 months other than your most recent primary partner? This includes times when you used or didn't use a condom and whether or not there was ejaculation. | numeric | 3 | numeric | |
| MMP10EDIT | | READ: "You cannot enter a number that is greater than [Response to MSM01], the number of men with whom you've had ANY anal sex in the last 6 months. Please re-answer this question." | | | | |
| MMP11 | M/M other: confirm no anal sex acts | You indicated you did not have anal sex with anyone other than your most recent primary partner in the past 6 months, is this correct? (Choose one) | multiple choice | 2 | numeric | AFFIRM |
| MMP11READ | | READ: "You indicated you would like to change your answers. Please re-enter information about your non-primary sex partners." | | | | |
| BEGIN | | BEGIN Global Sexual Behavior SEXUAL BEHAVIOR WITH ALL OTHER MALE PARTNERS (MMN) | | | | |
| MMN01READ | | READ: "The next questions will be about all of your [Response to MMP10] male partners, OTHER than your most recent primary partner, with whom you had any anal sex (as top or bottom) in the last 6 months. We want to ask you about the HIV status of these male partners." | | | | |

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| MMN01READ 1 | | READ: We will ask you to tell us how many of these [Responses to MMP10] male partners were HIV-positive, how many were HIV-negative, and how many of these partners had an HIV status that you did not know. The numbers that you provide for all three categories (that is, HIV-positive, HIV-negative, and HIV status unknown) must equal (that is, add up to) [Response MMP10] the total number of male partners, OTHER than your most recent primary partner, with who you reported having had any anal sex in the last 6 months. | | | | |
| MMN01 | M/M other: # men HIV positive | Of these [Response to MMP10] men, how many did you believe were HIV-positive and had no reason to doubt it? | numeric | 3 | numeric | |
| MMN01EDIT | | READ: "You cannot enter a number that is greater than [Response to MMP10], which is the number of men, other than your most recent primary partner, with whom you've had ANY anal sex. Please re-answer this question." | | | | |
| MMNFV1 | M/M other: # male partners who were HIV non-positive | FLOATER VARIABLE: ATOT_P = MMP10-MMN01 If MMN01<0, then ATOT_P = MMP10 | | | | |
| MMNFL2 | | FLOATER LOGIC: | | | | |
| MMN02 | M/M other: # men HIV negative | Of these remaining [ATOT_P] men, how many did you believe were HIV-negative and had no reason to doubt it? | numeric | 3 | numeric | |
| MMN02EDIT | | READ: "You cannot enter a number that is greater than [Response to ATOT_P], the number of men, other than your most recent primary partner, with whom you've had ANY anal sex and believe were not HIV-positive. Please re-answer this question." | | | | |
| MMNFV2 | M/M Other: # male partners unknown/unsu re of HIV status | FLOATER VARIABLE: ATOT_PN = ATOT_P - MMN02 If MMN02<0, then ATOT_PN = ATOT_P | | | | |
| MMN03 | M/M other: confirm # men unknown or unsure of HIV status | So you had this number of male partners - [variable] - whose HIV status you did not know or were unsure of? | multiple choice | 3 | numeric | AFFIRM |
| MMN03READ | | READ: You indicated that you would like to change your answer. Please re-enter information about the HIV status of your partners | | | | |
| MMNFL4 | | FLOATER LOGIC: | | | | |

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|-----------|---|--|---------|---|---------|--|
| MMN04 | M/M other: HIV pos men told you HIV pos | Of the [Response to MMN01] HIV-positive men , how many actually TOLD you they were HIV-positive and you had no reason to doubt it? | numeric | 3 | numeric | |
| MMN04EDIT | | READ: "You cannot enter a number that is greater than [Response to MMN01], the number of partners you believe to be HIV-positive. Please re-answer this question." | | | | |
| MMNFL5 | | FLOATER LOGIC: | | | | |
| MMN05 | M/M other: HIV neg men told you HIV neg | Of the [Response to MMN02] HIV-negative men , how many actually TOLD you they were HIV-negative and you had no reason to doubt it? | numeric | 3 | numeric | |
| MMN05EDIT | | READ: "You cannot enter a number that is greater than [Response to MMN02], the number of partners you believe to be HIV-negative. Please re-answer this question." | | | | |
| BEGIN | | BEGIN Global Sexual Behavior MSM -- Sexual Behavior with HIV-Positive Partners (MMH) | | | | |
| MMHFL1 | | FLOATER LOGIC: | | | | |
| MMH01READ | | READ: "These next questions ask about your [Response to MMN01] HIV-positive partners who were NOT your most recent primary partner. So, please think about all of the men, other than your most recent primary partner, with whom you've had any anal sex in the last 6 months who were HIV-positive." | | | | |
| MMH01 | M/M other HIV pos: # men unprotected anal sex | With how many of your [Response to MMN01] HIV-positive partners who were NOT your primary partner did you have ANY unprotected anal sex ? Note: If you started with a condom and then the condom came off during penetration, or if penetration started without a condom and then you used a condom, count this as unprotected sex. | numeric | 3 | numeric | |
| MMH01EDIT | | READ: "You cannot enter a number that is greater than [Response to MMN01], the number of partners you believe to be HIV-positive. Please re-answer this question." | | | | |
| MMH02 | M/M other HIV pos: # men unprotected anal sex while high or drunk | Of these [Response to MMH01] men , with how many did you have ANY unprotected anal sex while you were high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMH02EDIT | | READ: "You cannot enter a number that is greater than [Response to MMH01], the number of HIV-positive partners with whom you've had ANY unprotected anal sex. Please re-answer this question." | | | | |
| MMHFL2 | | FLOATER LOGIC: | | | | |

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|-----------|---|---|---------|---|---------|--|
| MMH03READ | | <p>READ: "Now we are going to ask you some more questions about the [Response to MMN01] HIV-positive men other than your most recent primary partner with whom you had any anal sex in the last 6 months. For these remaining questions, we are going to ask you about the number of times you had ANY anal sex with these men."</p> <p>Again, when we refer to the "times" that you have had anal sex, we would like for you to count each sex act separately. For example, if on one occasion you had both insertive and receptive anal sex (that is, you were a top and a bottom), this would count as 2 times.</p> <p>As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of insertive anal sex or sex where you were a top) with the same partner or with different partners, this would count as 3 times.</p> <p>Please ask the Study Staff for help if what we mean by "times" is not clear.</p> | | | | |
| MMH03 | M/M other HIV pos: # times insertive anal sex | In the last 6 months, how many times were you the top (in anal sex) with your [Response to MMN01] HIV-positive male partners? | numeric | 3 | numeric | |
| MMH04 | M/M other HIV pos: # times insertive anal sex high or drunk | How many of these [Response to MMH03] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMH04EDIT | | READ: You cannot enter a number that is greater than [Response to MMH03], the number of times you were the top (in anal sex) with your HIV-positive male partners. Please re-answer this question. | | | | |
| MMH05 | M/M other HIV pos: # times condom used insertive anal sex | How many of these [Response to MMH03] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MMH05EDIT | | READ: "You cannot enter a number that is greater than [Response to MMH03], the number of times you were the top (in anal sex) with your HIV-positive male partners. Please re-answer this question." | | | | |

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|-----------|--|--|---------|---|---------|--|
| MMHFV1 | M/M other HIV pos: # times had unprotected insertive anal sex | FLOATER VARIABLE: AUNPRO2 = MMH03-MMH05 If MMH05<0, then AUNPRO2 = MMH03 | | | | |
| MMHFL3 | | FLOATER LOGIC | | | | |
| MMH06 | M/M other HIV pos: # times high or drunk during unprotected insertive anal sex | Think of the [AUNPRO2] times you were the top (in anal sex) and did not use a condom from start to finish with your [Response to MMN01] HIV-positive male partners. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMH06EDIT | | READ: "You cannot enter a number that is greater than [AUNPRO2], the number of times you were the top (in anal sex) and did not use condoms with your HIV-positive partners other than your most recent primary partner. Please re-answer this question." | | | | |
| MMHFL4 | | FLOATER LOGIC: | | | | |
| MMH07 | M/M other HIV pos: # times receptive anal sex | In the last 6 months, how many times were you the bottom (in anal sex) with your [Response to MMN01] HIV-positive male partners? | numeric | 3 | numeric | |
| MMH08 | M/M other HIV pos: # times receptive anal sex high or drunk | How many of these [Response to MMH07] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMH08EDIT | | READ: You cannot enter a number that is greater than [Response to MMH07], the number of times you were the bottom (in anal sex) with your HIV-positive male partners. Please re-answer this question. | | | | |
| MMH09 | M/M other HIV pos: # times condom used receptive anal sex | How many of these [Response to MMH07] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MMH09EDIT | | READ: "You cannot enter a number that is greater than [Response to MMH07], the number of times you were the bottom (in anal sex) with your HIV-positive male partners. Please re-answer this question." | | | | |

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|------------|--|--|---------|---|---------|--|
| MMHFV2 | M/M other HIV pos: # times had unprotected receptive anal sex | FLOATER VARIABLE: AUNPRO3 = MMH07-MMH09 If MMH09<0, then AUNPRO3 = MMH07 | | | | |
| MMHFL5 | | FLOATER LOGIC | | | | |
| MMH10 | M/M other HIV pos: # times high or drunk during unprotected receptive anal sex | Think of the [AUNPRO3] times you were the bottom (in anal sex) and did not use a condom from start to finish with your [Response to MMN01] HIV-positive male partners. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMH10READ | | READ: "You cannot enter a number that is greater than [AUNPRO3], the number of times you were the bottom (in anal sex) and did not use condoms with your HIV-positive male partners. Please re-answer this question." | | | | |
| BEGIN | | BEGIN Global Sexual Behavior MSM -- Sexual Behavior with HIV-Negative Partners (MHN) | | | | |
| MHNFL1 | | FLOATER LOGIC: | | | | |
| MHN01READ | | READ: "These next questions ask about your [Response to MMN02] HIV-negative partners who were NOT your most recent primary partner. So, please think about all the men, OTHER than your most recent primary partner, with whom you've had anal sex in the last 6 months who were HIV-negative." | | | | |
| MHN01READ1 | | READ: "REMEMBER ... when we ask about the times you were a top, we mean a top during anal sex (that is, insertive anal sex, where your penis was in a man's rectum). When we ask about the times you were a bottom, we mean a bottom during anal sex (that is, receptive anal sex, where a man's penis was in your rectum). Some questions refer to condom use. Include the times you used a male condom or an anal condom (such as the Reality condom). Sex with a condom means that the condom was put on before you began having anal sex and the condom was not taken off until you were done." | | | | |
| MHN01 | M/M other HIV neg: # men unprotected anal sex | With how many of your [Response to MMN02] HIV-negative partners who were NOT your most recent primary partner did you have ANY unprotected anal sex ? Note: If you started with a condom and then the condom came off during penetration, or if penetration started without a condom and then you used a condom, count this as unprotected sex. | numeric | 3 | numeric | |
| MHN01EDIT | | READ: "You cannot enter a number that is greater than [Response to MMN02], the number of partners believed to be HIV-negative. Please re-answer this question." | | | | |

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| MHN02 | M/M other HIV neg: # men unprotected anal sex while high or drunk | Of these [Response to MHN01] men , with how many did you have ANY unprotected anal sex while you were high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MHN02EDIT | | READ: "You cannot enter a number that is greater than [Response to MHN01], the number of HIV-negative partners other than your most recent primary partner with whom you've had unprotected anal sex. Please re-answer this question." | | | | |
| MHN03READ | | READ: "Now we are going to ask you some more questions about the [Response to MMN02] HIV-negative men, other than your most recent primary partner, with whom you had any anal sex in the last 6 months. For these remaining questions, we are going to ask you about the number of times you had ANY anal sex with these men." Again, when we refer to the "times" that you have had anal sex, we would like for you to count each sex act separately. For example, if on one occasion you had both insertive and receptive anal sex (that is, you were a top and a bottom), this would count as 2 times. As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of insertive anal sex or sex where you were a top) with the same partner or with different partners, this would count as 3 times. Please ask the Study Staff for help if what we mean by "times" is not clear. | | | | |
| MHNFL2 | | FLOATER LOGIC: | | | | |
| MHN03 | M/M other HIV neg: # times insertive anal sex | In the last 6 months, how many times were you the top (that is, did you have insertive anal sex) with your [Response to MMN02] HIV-negative male partners? | numeric | 3 | numeric | |
| MHN04 | M/M other HIV neg: # times insertive anal sex high or drunk | How many of these [Response to MHN03] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MHN04EDIT | | READ: You cannot enter a number that is greater than [Response to MHN03], which is the number of times you were the top (in anal sex) with your HIV-negative male partners. Please re-answer this question. | | | | |

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|-----------|--|---|---------|---|---------|--|
| MHN05 | M/M other HIV neg: # times condom used during insertive anal sex | How many of these [Response to MHN03] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MHN05EDIT | | READ: "You cannot enter a number that is greater than [Response to MHN03], the number of times you were the top (in anal sex) with your HIV-negative male partners. Please re-answer this question." | | | | |
| MHNFV1 | M/M other HIV neg: # times had unprotected insertive anal sex | FLOATER VARIABLE: AUNPRO4= MHN03-MHN05 If MHN05<0, then AUNPRO4 = MHN03 | | | | |
| MHNFL3 | | FLOATER LOGIC: | | | | |
| MHN06 | M/M other HIV neg: # times high or drunk during unprotected insertive anal sex | Think of the [AUNPRO4] times you were the top (that is, you had insertive anal sex) and did not use a condom from start to finish with your [Response to MMN02] HIV-negative male partners. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed within 2 hours before or during sex? | numeric | 3 | numeric | |
| MHN06EDIT | | READ: "You cannot enter a number that is greater than [AUNPRO4], which is the number of times you were the top (in anal sex) and did not use a condom with your HIV-negative partners. Please re-answer this question." | | | | |
| MHNFL4 | | FLOATER LOGIC: | | | | |
| MHN07 | M/M other HIV neg: # times receptive anal sex | In the last 6 months, how many times were you the bottom (that is, you had receptive anal sex) with your [Response to MMN02] HIV-negative male partners? | numeric | 3 | numeric | |
| MHN08 | M/M other HIV neg: # times receptive anal sex high or drunk | How many of these [Response to MHN07] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MHN08EDIT | | READ: You cannot enter a number that is greater than [Response to MHN07], the number of times you were the bottom (in anal sex) with your HIV-negative male partners. Please re-answer this question. | | | | |

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|-----------|--|--|---------|---|---------|--|
| MHN09 | M/M other HIV neg: # times condom used during receptive anal sex | How many of these [Response to MHN07] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MHN09EDIT | | READ: "You cannot enter a number that is greater than [Response to MHN07], the number of times you were the bottom (in anal sex) with your HIV-negative male partners. Please re-answer this question." | | | | |
| MHNFV2 | M/M other HIV neg: # times had unprotected receptive anal sex | FLOATER VARIABLE: AUNPRO5= MHN07-MHN09 If MHN09<0, then AUNPRO5 = MHN07 | | | | |
| MHNFL5 | | FLOATER LOGIC: | | | | |
| MHN10 | M/M other HIV neg: # times high or drunk during unprotected receptive anal sex | Think of the [AUNPRO5] times you were the bottom (that is, you had receptive anal sex) and did not use a condom from start to finish with your [Response to MMN02] HIV-negative male partners. How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MHN10EDIT | | READ: "You cannot enter a number that is greater than [AUNPRO5], the number of times you were the bottom (in anal sex) and did not use a condom with your HIV-negative male partners. Please re-answer this question." | | | | |
| BEGIN | | BEGIN Global Sexual Behavior MSM -- Sexual Behavior with Partners of Unknown HIV Status (MMU) | | | | |
| MMUFL1 | | FLOATER LOGIC: | | | | |
| MMU01READ | | READ: "These next questions ask about your [ATOT_PN] partners whose HIV status you did not know and who were NOT your most recent primary partner. So, please think about all of the men, OTHER than your most recent primary partner, with whom you've had ANY anal sex in the last 6 months whose HIV status you did not know." | | | | |
| MMU01 | M/M other HIV unk: # men unprotected anal sex | With how many of your [ATOT_PN] partners who were NOT your most recent primary partner and whose HIV status you did not know did you have ANY unprotected anal sex ? Note: If you started with a condom and then the condom came off during penetration, or if penetration started without a condom and then you used a condom, count this as unprotected sex. | numeric | 3 | numeric | |

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|----------------|---|---|---------|---|---------|--|
| MMU01EDIT | | READ: "You cannot enter a number that is greater than [ATOT_PN], the number of partners whose HIV status you did not know. Please re-answer this question." | | | | |
| MMU02 | M/M other HIV unk: # men unprotected anal sex while high or drunk | Of these [MMU01] men, with how many did you have ANY unprotected anal sex while you were high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMU02EDIT | | READ: "You cannot enter a number that is greater than [Response to MMU01], the number of men with whom you had ANY unprotected anal sex. Please re-answer this question." | | | | |
| MMU03READ | | READ: "Now we are going to ask you some more questions about the [ATOT_PN] partners, other than your most recent primary partner, in the last 6 months whose HIV status you did not know. For these remaining questions, we are going to ask you about the number of times you had ANY anal sex with these men." Again, when we refer to the "times" that you have had anal sex, we would like for you to count each sex act separately. For example, if on one occasion you had both insertive and receptive anal sex (that is, you were a top and a bottom), this would count as 2 times. As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of insertive anal sex or sex where you were a top) with the same partner or with different partners, this would count as 3 times. Please ask the Study Staff for help if what we mean by "times" is not clear. | | | | |
| MMU03READ 1 | | READ: "REMEMBER ... when we ask about the times you were a top, we mean a top during anal sex (that is, insertive anal sex, where your penis was in a man's rectum). When we ask about the times you were a bottom, we mean a bottom during anal sex (that is, receptive anal sex, where a man's penis was in your rectum). Some questions refer to condom use. Include the times you used a male condom or an anal condom (such as the Reality condom). Sex with a condom means that the condom was put on before you began having anal sex and the condom was not taken off until you were done." | | | | |
| MMUFL2 | | FLOATER LOGIC: | | | | |

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|-----------|--|---|---------|---|---------|--|
| MMU03 | M/M other HIV unk: # times insertive anal sex | In the last 6 months, how many times were you the top (that is, you had insertive anal sex) with your [ATOT_PN] partners whose HIV status you did not know ? | numeric | 3 | numeric | |
| MMU04 | M/M other HIV unk: # times insertive anal sex high or drunk | How many of these [Response to MMU03] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMU04EDIT | | READ: You cannot enter a number that is greater than [Response to MMU03], the number of times you were the top (in anal sex) with your male partners other than your most recent primary partner whose HIV status you did not know. Please re-answer this question. | | | | |
| MMU05 | M/M other HIV unk: # times condom used during insertive anal sex | How many of these [Response to MMU03] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MMU05EDIT | | READ: "You cannot enter a number that is greater than [Response to MMU03], the number of times you were the top (in anal sex) with your male partners other than your most recent primary partner whose HIV status you did not know. Please re-answer this question." | | | | |
| MMUFV1 | M/M other HIV unk: # times had unprotected insertive anal sex | FLOATER VARIABLE: AUNPRO6= MMU03-MMU05 If MMU05<0, then AUNPRO6 = MMU03 | | | | |
| MMUFL3 | | FLOATER LOGIC: | | | | |
| MMU06 | M/M other HIV unk: # times high or drunk during unprotected insertive anal sex | Think of the [AUNPRO6] times you were the top (that is, you had insertive anal sex) and did not use a condom from start to finish with your [ATOT_PN] partners whose HIV status you did not know . How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMU06EDIT | | READ: "You cannot enter a number that is greater than [AUNPRO6], the number of times you were the top (in anal sex) and did not use a condom with your unknown HIV status partners. Please re-answer this question." | | | | |
| MMUFL4 | | FLOATER LOGIC: | | | | |

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| MMU07 | M/M other HIV unk: # times receptive anal sex | In the last 6 months, how many times were you the bottom (that is, you had receptive anal sex) with your [ATOT_PN] partners whose HIV status you did not know ? This would be with or without a condom, and whether or not you had an orgasm or there was ejaculation. | numeric | 3 | numeric | |
| MMU08 | M/M other HIV unk: # times receptive anal sex high or drunk | How many of these [Response to MMU07] times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMU08EDIT | | READ: You cannot enter a number that is greater than [Response to MMU07], the number of times you were the bottom (in anal sex) with your partners whose HIV status you did not know. Please re-answer this question. | | | | |
| MMU09 | M/M other HIV unk: # times condom used during receptive anal sex | How many of these [Response to MMU07] times was a condom used from start to finish? | numeric | 3 | numeric | |
| MMU09EDIT | | READ: "You cannot enter a number that is greater than [MMU07], the number of times you were the bottom (in anal sex) with your partners whose HIV status you did not know. Please re-answer this question." | | | | |
| MMUFV2 | M/M other HIV unk: # times had unprotected receptive anal sex | FLOATER VARIABLE: AUNPRO7 = MMU07-MMU09 If MMU09<0, then AUNPRO7 = MMU07 | | | | |
| MMUFL5 | | FLOATER LOGIC | | | | |
| MMU10 | M/M other HIV unk: # times high or drunk during unprotected receptive anal sex | Think of the [AUNPRO7] times you were the bottom (that is, you had receptive anal sex) and did not use a condom from start to finish with your [ATOT_PN] partners whose HIV status you did not know . How many of these times were you high on ANY drugs (including prescription drugs) or drunk or buzzed on alcohol within 2 hours before or during sex? | numeric | 3 | numeric | |
| MMU10EDIT | | READ: "You cannot enter a number that is greater than [AUNPRO7], the number of times you were the bottom (in anal sex) and did not use a condom with your unknown HIV status partners. Please re-answer this question." | | | | |
| BEGIN | Start Assessment | BEGIN Episode-level Sexual Behavior (Primary or Non-primary) FSM or MSF | | | | |
| BNPFL1 | | FLOATER LOGIC | | | | |

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|------------|---|---|--------------------|---|---------|------|
| BNP01READ | | <i>READ: "You will now be asked more detailed questions about the last person with whom you had any anal or vaginal sex in the last 6 months. This could be a primary or non-primary partner. Think about the <u>very last</u> person with whom you had any anal or vaginal sex in the last 6 months.</i> | | | | |
| BNP01READ1 | | <i>Again, for the purpose of this questionnaire, if your partner was a transgender or transsexual partner, please categorize this partner based on his or her genitals at the time that you had sex with them. For example if a transgender or transsexual partner had a penis when you had sex, then consider the partner as MALE. If the transgender or transsexual partner had a vagina when you had sex, then consider the partner as FEMALE."</i> | | | | |
| BNP01 | RECENT NON-PRIM PART | Was your most recent partner a: | multiple choice | 2 | numeric | SEX2 |
| BEGIN | Start Assessment | BEGIN Episode-level Sexual Behavior (Primary or Non-primary) FSM and MSF | | | | |
| EFM01READ | | <i>READ: You will now be asked more detailed questions about the last person with whom you had any anal or vaginal sex in the last 6 months. This could be a primary or non-primary partner. Think about the very last person with whom you had any anal or vaginal sex in the last 6 months. Again, when we refer to the "times" that you have had sex, we would like for you to count each sex act separately. For example, if on one occasion you had both vaginal and anal sex, this would count as 2 times. As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of vaginal sex) with the same partner or with different partners, this would count as 3 times. Please ask the study Staff for help if what we mean by "times" is not clear.</i> | | | | |
| EFM01 | F/M or M/F most recent partner: Initials | Throughout this next group of questions, this person will be referred to by their initials. Please enter their initials here. Use AA if you do not know their name. | text | 3 | text | |
| EFM02 | F/M or M/F most recent partner: Age | How old is this last person ([Response to EFM01]) with whom you had vaginal or anal sex in the last six months? | numeric | 3 | numeric | |

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|----------------|--|--|--------------------|---|---------|-------------|
| EFM03 | F/M or M/F most recent partner: primary or not | Would you consider your last partner with whom you had vaginal or anal sex ([Response to EFM01]) to be a primary partner or non-primary partner? By 'primary' partner we mean someone with whom you have felt a special emotional commitment, someone you have dated or would call your boyfriend or girlfriend, spouse, significant other, or life partner. | multiple choice | 2 | numeric | PARTNE R |
| EFM04 | F/M or M/F most recent partner: # times vaginal/anal sex | About how many times have you had any vaginal or anal sex with your last partner ([Response to EFM01]) in the last 6 months? That is, vaginal or anal sex with or without a condom, and with or without ejaculation. | numeric | 3 | numeric | |
| EFM04WARN | | READ: You previously indicated that you had vaginal or anal sex in the last 6 months but now indicate that you had vaginal or anal sex 0 times with your last partner ([response to EFM01]). Would you like to change your answer? | yes/no | 2 | numeric | |
| EFM04WARN 2 | | READ: You indicated previously that you had vaginal or anal sex in the last 6 months but now indicate that you do not know or refuse to answer the number of times that you had vaginal or anal sex in the last 6 months. Would you like to change your answer? | yes/no | 2 | numeric | |
| EFM05 | F/M or M/F most recent partner: # times vaginal sex | How many of these [Response to EFM04] times did you have vaginal sex? | numeric | 3 | numeric | |
| EFMFL1 | | FLOATER LOGIC: | | | | |
| EFM05EDIT | | READ: "You cannot enter a number that is greater than [Response EFM04], the number of times you had vaginal or anal sex with your last partner. Please re-answer this question." | | | | |
| EFM06 | F/M or M/F most recent partner: # times vaginal sex with condom | How many of these [Response to EFM05] times that you had vaginal sex was a condom used from start to finish? | numeric | 3 | numeric | |
| EFM06EDIT | | READ: "You cannot enter a number that is greater than [Response EFM05], the number of times you had vaginal sex with your last partner. Please re-answer this question." | | | | |
| EFM07 | F/M or M/F most recent partner: # times anal sex | How many of these [Response to EFM04] times did you have anal sex? | numeric | 3 | numeric | |
| EFMFL2 | | FLOATER LOGIC | | | | |

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|------------|--|--|--------------------|---|---------|-------------|
| EFM07EDIT | | READ: The number of times you had <u>vaginal</u> sex with your last partner that you reported earlier ([EFM05]) plus the number of times you had <u>anal</u> sex with your last partner ([EFM07]) in the last 6 months must be equal to the TOTAL number of times ([EFM04]) that you had <u>vaginal or anal</u> sex with this last partner ([EFM01]). Please correct. | | | | |
| EFM07XEDIT | | You stated the number of times ([response to EFM04]) you had vaginal or anal sex with your last partner ([response to EFM01]) in the last 6 months, but later indicated that you did not know or were unsure how many times you had vaginal or anal sex with this partner ([response to EFM01]) in the last 6 months. Would you like to change your answer? | yes/no | 2 | numeric | |
| EFMFL6 | | FLOATER LOGIC | | | | |
| EFM08 | F/M or M/F most recent partner: # times anal sex with condom | How many of these [Response to EFM07] times that you had anal sex was a condom used from start to finish? | numeric | 3 | numeric | |
| EFM08EDIT | | READ: "You cannot enter a number that is greater than [Response EFM07], the number of times you had anal sex with your last partner. Please re-answer this question." | | | | |
| EFM10READ | | READ: "The next group of questions asks about the MOST RECENT (that is, the LAST) time you had vaginal or anal sex with your last partner [Response to EFM01]." | | | | |
| EFM10READ1 | | READ: "Some of the questions refer to condom use. Include the times you used a male condom or a female condom (such as the Reality condom). Sex with a condom means that the condom was put on before having vaginal or anal sex and the condom was not taken off until you were done." | | | | |
| EFM10 | F/M or M/F most recent partner: How long since vaginal/ anal sex | How long ago was the last time you had any vaginal or anal sex with your last partner ([Response to EFM01])? That is, with or without a condom, and with or without ejaculation. | multiple choice | 2 | numeric | FREQ7 |
| EFM11 | F/M or M/F most recent partner: HIV Status | What was your last partner's ([Response to EFM01]) HIV status? (Choose one) | multiple choice | 2 | numeric | FSMSTA T |
| EFM12 | F/M or M/F most recent partner: told HIV pos. and no reason to doubt it | Did your last partner ([Response to EFM01]) actually tell you they were HIV-positive, and you had no reason to doubt it? | yes/no | 2 | numeric | |

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|-----------|--|--|--------|---|---------|--|
| EFM13 | F/M or M/F most recent partner: told HIV neg. and no reason to doubt it | Did your last partner ([Response to EFM01]) actually tell you they were HIV-negative , and you had no reason to doubt it? | yes/no | 2 | numeric | |
| EFM14 | F/M or M/F most recent partner: Tell partner HIV status before vagina/anal sex | Did you tell your last partner ([Response to EFM01]) your correct HIV status before the last time you had vaginal or anal sex together? | yes/no | 2 | numeric | |
| EFMFL5 | | FLOATER LOGIC | | | | |
| EFM15 | F/M or M/F most recent partner: most recent time was vaginal | During the most recent time you had vaginal or anal sex with your last partner ([Response to EFM01]), did you have vaginal sex? This would be with or without a condom, and with or without ejaculation | yes/no | 2 | numeric | |
| EFM16 | F/M or M/F most recent partner: was condom used during vaginal sex | Was a condom used from start to finish during the most recent time you had vaginal sex with your last partner ([Response to EFM01])? | yes/no | 2 | numeric | |
| EFMFL3 | | FLOATER LOGIC | | | | |
| EFM17 | F/M or M/F most recent partner: most recent time was anal | During the most recent time you had vaginal or anal sex with your last partner ([Response to EFM01]), did you have anal sex? This would be with or without a condom and with or without ejaculation. | yes/no | 2 | numeric | |
| EFMFL4 | | FLOATER LOGIC | | | | |
| EFM17EDIT | | READ: You previously indicated that you had anal or vaginal sex with your last partner ([Response to EFM01]), but now state that you did not have vaginal nor anal sex during the most recent time with this partner ([Response to EFM01]). If this is wrong, please re-enter. Otherwise continue to the next question. | | | | |
| EFM18 | F/M or M/F most recent partner: was condom used during anal sex | Was a condom used from start to finish during the most recent time you had anal sex with your last partner ([Response to EFM01])? | yes/no | 2 | numeric | |
| BEGIN | Start Assessment | BEGIN Episode-level Sexual Behavior (Non-primary) MSM | | | | |

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|-------------|---|--|-----------------|---|---------|---------|
| EMM01READ | | <p>READ: You will now be asked more detailed questions about the last person with whom you had any anal sex in the last 6 months. This could be a primary or non-primary partner. Think about the very last person with whom you had any anal sex in the last 6 months.</p> <p>Again, when we refer to the “times” that you have had anal sex, we would like for you to count each sex act separately. For example, if on one occasion you had both insertive and receptive anal sex (that is, you were a top and a bottom), this would count as 2 times.</p> <p>As another example, if on one occasion you were involved in repeated sex acts (say 3 acts of insertive anal sex or sex where you were a top) with the same partner or with different partners, this would count as 3 times.</p> <p>Please ask the Study Staff for help if what we mean by “times” is not clear.</p> | | | | |
| EMM01 | M/M most recent partner: Initials | Throughout this next group of questions, this person will be referred to on the screen by their initials. Please put their initials here. Use AA if you do not know his name. | text | 3 | text | |
| EMM02 | M/M most recent partner: Age | How old is your last partner with whom you had anal sex ([Response to EMM01]) ? If you are not sure, give it your best guess. | numeric | 3 | numeric | |
| EMM03 | M/M most recent partner: primary or not | Would you consider your last partner with whom you had anal sex ([Response to EMM01]) to be a primary partner or non-primary partner? By 'primary' partner we mean a man with whom you have felt a special emotional commitment, someone you have dated or would call your boyfriend, spouse, significant other, or life partner. | multiple choice | 2 | numeric | PARTNER |
| EMM04 | M/M most recent partner: # times anal sex | About how many times have you had any anal sex with your last partner ([Response to EMM01]) in the last 6 months? That is, anal sex with or without a condom, and with or without ejaculation. | numeric | 3 | numeric | |
| EMM04WARN | | READ: You previously indicated that you had anal sex in the last 6 months but now indicate that you had anal sex 0 times with your last partner ([response to EMM01]). Would you like to change your answer? | yes/no | 2 | numeric | |
| EMM04WARN 2 | | READ: You indicated previously that you had anal sex in the last 6 months but now indicate that you do not know or refuse to answer the number of times that you had anal sex in the last 6 months. Would you like to change your answer? | yes/no | 2 | numeric | |
| EMM05 | M/M most recent partner: # times on top | How many of these [Response to EMM04] times were you the top ? | numeric | 3 | numeric | |
| EMMFL1 | | FLOATER LOGIC: | | | | |

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|------------|--|--|---------|---|---------|--|
| EMM05EDIT | | READ: "You cannot enter a number that is greater than [Response EMM04], the number of times you had any anal sex with your last partner. Please re-answer this question." | | | | |
| EMM06 | M/M most recent partner: # times on top with condom | How many of these [Response to EMM05] times that you were the top was a condom used from start to finish? | numeric | 3 | numeric | |
| EMM06EDIT | | READ: "You cannot enter a number that is greater than [Response EMM05], the number of times you were the top. Please re-answer this question." | | | | |
| EMM07 | M/M most recent partner: # times bottom | How many of these [Response to EMM04] times were you the bottom? | numeric | 3 | numeric | |
| EMMFL2 | | FLOATER LOGIC: | | | | |
| EMM07EDIT | | The number of times you had insertive <u>anal</u> sex with your last partner that you reported earlier ([EMM05]) plus the number of times you had receptive <u>anal</u> sex with your last partner ([EMM07]) in the last 6 months must be equal to the TOTAL number of times ([EMM04]) that you had any <u>anal</u> sex with this last partner ([EMM01]). Please correct. | | | | |
| EMM07XEDIT | | You stated the number of times you had any anal sex ([response to EMM04]) with your last partner ([response to EMM01]) in the last 6 months, but later indicated that you did not know or were unsure how many times you had anal sex with this partner ([response to EMM01]) in the last 6 months. Would you like to change your answer? | yes/no | 2 | numeric | |
| EMMFL7 | | FLOATER LOGIC | | | | |
| EMM08 | M/M most recent partner: # times bottom with condom | How many of these [Response to EMM07] times that you were the bottom was a condom used from start to finish? | numeric | 3 | numeric | |
| EMM08EDIT | | READ: "You cannot enter a number that is greater than [Response EMM07], - the number of times you were the bottom with your last partner. Please re-answer this question." | | | | |
| EMM10READ | | READ: "The next group of questions asks about the MOST RECENT (that is, the LAST)_ time you were a top or bottom with your last partner with whom you had anal sex ([Response to EMM01])." | | | | |

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| EMM10READ 1 | | READ: "Some of the questions refer to condom use. Include the times you used a male condom or an anal condom (such as the Reality condom). Sex with a condom means that the condom was put on before having <i>any anal</i> sex and the condom was not taken off until you were done." | | | | |
| EMM10 | | How long ago was the last time you had any anal sex with your last partner ([Response to EMM01])? That is, with or without a condom, and with or without ejaculation. | multiple choice | 2 | numeric | FREQ7 |
| EMM11 | M/M most recent partner: HIV Status | What was your last partner's ([Response to EMM01]) HIV status? (Choose one) | multiple choice | 2 | numeric | FSMSTAT |
| EMM12 | M/M most recent partner: HIV positive and no reason to doubt it | Did your last partner ([Response to EMM01]) actually tell you he was HIV-positive , and you had no reason to doubt it? | yes/no | 2 | numeric | |
| EMM13 | M/M most recent partner: HIV neg. and no reason to doubt it | Did your last partner ([Response to EMM01]) actually tell you he was HIV-negative , and you had no reason to doubt it? | yes/no | 2 | numeric | |
| EMM14 | M/M most recent partner: Tell partner HIV status before anal sex | Did you tell your last partner ([Response to EMM01]) your correct HIV status before the last time you had any anal sex together? | yes/no | 2 | numeric | |
| EMMFL5 | | FLOATER LOGIC | | | | |
| EMM15 | M/M most recent partner: most recent time was on top | During the most recent time you had anal sex with your last partner ([Response to EMM01]), were you the top ? This would be with or without a condom and with or without ejaculation. | yes/no | 2 | numeric | |
| EMM16 | M/M most recent partner: was condom used while on top | Was a condom used from start to finish during the most recent time you had insertive anal sex with your last partner ([Response to EMM01])? | yes/no | 2 | numeric | |
| EMMFL3 | | FLOATER LOGIC | | | | |

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|-----------|--|---|----------------|---|---------|--|
| EMM17 | M/M most recent partner: most recent time on bottom | During the most recent time you had anal sex with your last partner ([Response to EMM01]), were you the bottom ? This would be with or without a condom and with or without ejaculation. | yes/no | 2 | numeric | |
| EMMFL4 | | FLOATER LOGIC | | | | |
| EMM17EDIT | | READ: You previously indicated that you had anal sex with your last partner ([Response to EMM01]), but now state that you did not have any anal sex during the most recent time with this partner [Response to EMM01]. If this is wrong, please re-enter. Otherwise continue to the next question. | | | | |
| EMM18 | M/M most recent partner: was condom used while on bottom | Was a condom used from start to finish during the most recent time you had receptive anal sex with your last partner ([Response to EMM01])? | yes/no | 2 | numeric | |
| BEGIN | | BEGIN Episode-level Sex and Substance Use Behaviors (Asked of most recent partner) | | | | |
| ENP01READ | | READ: You will now be asked more detailed questions about the last partner with whom you had any anal or vaginal sex in the last 6 months (Initials = [insert EFM01 or EMM01, whichever is not missing]). | | | | |
| ENP01 | M/M most recent partner: participant drunk or buzzed | Were you drunk or buzzed on alcohol within two hours before or during the most recent time you had vaginal or anal sex with your last partner ([Response to EFM01 or EMM01])? | yes/no | 2 | numeric | |
| ENP02 | M/M most recent partner: # of drinks | How many drinks did you have? By a drink, I mean a 12 oz can or glass of beer, a 4 oz. glass of wine, a 1-1/2 oz. shot of liquor, or a mixed drink with that amount of liquor. | numeric | 3 | numeric | |
| ENP03 | M/M most recent partner: Partner drunk or buzzed | Was your last partner ([Response to EFM01 or EMM01]) drunk or buzzed on alcohol within two hours before or during the most recent time you had vaginal or anal sex with this partner ([Response to EFM01 or EMM01])? | yes/no | 2 | numeric | |
| ENP04 | M/M most recent partner: participant high on drugs | Were you high on ANY drugs (including prescription drugs, but NOT alcohol) within two hours before or during the most recent time you had vaginal or anal sex with your last partner ([Response to EFM01 or EMM01])? | yes/no | 2 | numeric | |
| ENP05 | M/M most recent partner: Which drugs | Which drugs? (Check all that apply.) | all that apply | | | |

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|--------------|--|--|--|---|--|--|
| ENP05multi0 | M/M most recent partner: Ecstasy | Ecstasy (also known as E, X, or MDMA) | | 2 | | |
| ENP05multi1 | M/M most recent partner: GHB | GHB (also known as gamma hydroxybutyric acid, G, or GBL) | | 2 | | |
| ENP05multi2 | M/M most recent partner: Heroin | Heroin | | 2 | | |
| ENP05multi3 | M/M most recent partner: Marijuana | Marijuana | | 2 | | |
| ENP05multi4 | M/M most recent partner: Methamphetamine | Methamphetamines or other amphetamines (also known as Crystal Meth, Speed, or Tina) | | 2 | | |
| ENP05multi5 | M/M most recent partner: hallucinogens | Other hallucinogens (such as LSD, mushrooms, Peyote, or Mescaline) | | 2 | | |
| ENP05multi6 | M/M most recent partner: PCP | PCP (also known as Angel Dust, wet, or wicky sticks) | | 2 | | |
| ENP05multi7 | M/M most recent partner: Poppers | Poppers (also known as Amyl Nitrate) | | 2 | | |
| ENP05multi8 | M/M most recent partner: Powdered cocaine | Powdered Cocaine | | 2 | | |
| ENP05multi9 | M/M most recent partner: Crack | Rock or Crack Cocaine | | 2 | | |
| ENP05multi10 | M/M most recent partner: Ketamine | Ketamine (also known as Special K, or K) | | 2 | | |
| ENP05multi11 | M/M most recent partner: prescription drugs | Recreational use of prescription drugs or pain killers to get high (such as Codeine, Vicodin or Hydrocodone, Percocet, Darvon, Oxycontin or Oxycodone, Demerol, or Dilaudid) | | 2 | | |

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| ENP05multi12 | M/M most recent partner: tranquilizers | Tranquilizers or Barbiturates (such as Valium, Librium, Seconal, Xanax, or Rohypnol -- also called Roofies) | | 2 | | |
| ENP05multi13 | M/M most recent partner: viagra | Viagra or similar drugs (such as Levitra or Cialis) | | 2 | | |
| ENP05multi14 | M/M most recent partner: Other drugs | Other | | 2 | | |
| ENP05sp | M/M most recent partner: Specify other drugs | Please type the name of the other drug or drugs | text | 50 | text | |
| ENP06 | M/M most recent partner: Partner high on any drugs | Was your last partner ([Response to EFM01 or EMM01]) high on ANY drugs (including prescription drugs, but NOT alcohol) within two hours before or during that time? | yes/no | 2 | numeric | |
| ENP07 | Recent drugs other partner use | Which drugs? (Check all that apply.) | all that apply | | | |
| ENP07multi0 | M/M most recent partner: Partner on ecstasy | Ecstasy (also known as E, X, or MDMA) | | 2 | | |
| ENP07multi1 | M/M most recent partner: Partner on GHB | GHB (also known as gamma hydroxybutyric acid, G, or GBL) | | 2 | | |
| ENP07multi2 | M/M most recent partner: Partner on Heroin | Heroin | | 2 | | |
| ENP07multi3 | M/M most recent partner: Partner on Marijuana | Marijuana | | 2 | | |
| ENP07multi4 | M/M most recent partner: Partner on Methamphetamine | Methamphetamines, other amphetamines (also known as Crystal Meth, Speed, or Tina) | | 2 | | |

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| ENP07multi5 | M/M most recent partner: Partner on hallucinogens | Other hallucinogens (such as LSD, mushrooms, Peyote, or Mescaline) | | 2 | | |
| ENP07multi6 | M/M most recent partner: Partner on PCP | PCP (also known as Angel Dust, wet, or wicky sticks) | | 2 | | |
| ENP07multi7 | M/M most recent partner: Partner on Poppers | Poppers (also known as Amyl Nitrate) | | 2 | | |
| ENP07multi8 | M/M most recent partner: Partner on Powdered cocaine | Powdered Cocaine | | 2 | | |
| ENP07multi9 | M/M most recent partner: Partner on Crack | Rock or Crack Cocaine | | 2 | | |
| ENP07multi10 | M/M most recent partner: Partner on Ketamine | Ketamine (also known as Special K, or K) | | 2 | | |
| ENP07multi11 | M/M most recent partner: Partner on prescription drugs | Recreational use of prescription drugs or pain killers to get high (such as Codeine, Vicodin or Hydrocodone, Percocet, Darvon, Oxycontin or Oxycodone, Demerol, or Dilaudid) | | 2 | | |
| ENP07multi12 | M/M most recent partner: Partner on tranquilizers | Tranquilizers or Barbiturates (such as Valium, Librium, Seconal, Xanax, or Rohypnol -- also called Roofies) | | 2 | | |
| ENP07multi13 | M/M most recent partner: Partner on viagra | Viagra or similar drugs (such as Levitra, or Cialis) | | 2 | | |

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|--------------|--|---|-----------------|----|---------|-------|
| ENP07multi14 | M/M most recent partner: Partner on Other drugs | Other | | 2 | | |
| ENP07sp | M/M most recent partner: Partner on Specify other drugs | Please type the name of other drug or drugs | text | 50 | text | |
| BEGIN | Start Assessment | Depression | | | | |
| DEP01READ | | READ: Now we are going to ask you to describe how you've been feeling and acting over the past week. Please select the one response to each item that best describes you for the past seven days | | | | |
| DEP01 | Falling Asleep | Falling Asleep | multiple choice | 2 | numeric | DPR01 |
| DEP02 | Sleep During the Night | Sleep During the Night | multiple choice | 2 | numeric | DPR02 |
| DEP03 | Waking Up Too Early | Waking Up Too Early | multiple choice | 2 | numeric | DPR03 |
| DEP04 | Sleeping Too Much | Sleeping Too Much | multiple choice | 2 | numeric | DPR04 |
| DEP05 | Feeling Sad | Feeling Sad | multiple choice | 2 | numeric | DPR05 |
| DEP06 | Decreased Appetite | Decreased Appetite | multiple choice | 2 | numeric | DPR06 |
| DEP07 | Increased Appetite | Increased Appetite | multiple choice | 2 | numeric | DPR07 |
| DEP08 | Lost weight (w/in 2 wks) | Decreased Weight (within the last two weeks) | multiple choice | 2 | numeric | DPR08 |
| DEP09 | Gained weight (w/in 2 wks) | Increased Weight (within the last two weeks) | multiple choice | 2 | numeric | DPR09 |
| DEP10 | Concentration | Concentration or Decision Making | multiple choice | 2 | numeric | DPR10 |
| DEP11 | Self view | View of Myself | multiple choice | 2 | numeric | DPR11 |
| DEP12 | Death thoughts | Thoughts of Death or Suicide | multiple choice | 2 | numeric | DPR12 |
| DEP13 | General Interest | General Interest | multiple choice | 2 | numeric | DPR13 |
| DEP14 | Energy evel | Energy Level | multiple choice | 2 | numeric | DPR14 |
| DEP15 | Sluggish | Feeling Slowed Down | multiple choice | 2 | numeric | DPR15 |
| DEP16 | Restless | Feeling Restless | multiple choice | 2 | numeric | DPR16 |
| BEGIN | | INTERVENTION EXPOSURE | | | | |

| | | | | | | |
|-------------|---|---|----------------|---|---------|--|
| EXP01 | Talk with agency | Since you entered this study on [insert ADM09], have you talked with staff at this agency (including study staff) about any of the following topics? (Choose all that apply) | all that apply | 2 | | |
| EXP01MULTI0 | Agency: drugs/alcohol influences sexual behaviors | How using drugs and/or alcohol influences your sexual behaviors | | 2 | numeric | |
| EXP01MULTI1 | Agency:condom use | How to use a condom | | 2 | numeric | |
| EXP01MULTI2 | Agency: communication with partner about condom use | How to talk about condom use with your sexual partner | | 2 | numeric | |
| EXP01MULTI3 | Agency: HIV transmission | How HIV spreads from person to person | | 2 | numeric | |
| EXP01MULTI4 | Agency: personal risk | Your personal risk of being exposed to or transmitting HIV | | 2 | numeric | |
| EXP01MULTI5 | Agency: prevention of exposure/transmission | Helping you to develop a plan to prevent your exposure to or transmission of HIV | | 2 | numeric | |
| EXP01MULTI6 | Agency:risks regarding anal/vaginal intercourse | Risks associated with anal and/or vaginal intercourse | | 2 | numeric | |
| EXP01MULTI7 | Agency: risks with sharing needles | Risks associated with sharing needles or other works used to shoot up | | 2 | numeric | |
| EXP01MULTI8 | Agency: personal sexual behaviors | How your personal sexual behaviors might put you at risk for exposure to or transmission of HIV | | 2 | numeric | |
| EXP01MULTI9 | Agency: prevention of other infections | How to prevent exposure to or transmission of sexually transmitted diseases other than HIV | | 2 | numeric | |

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|--------------|---|---|----------------|---|---------|--|
| EXP01MULTI10 | Agency: -none of the above | None of the above topics | | 2 | numeric | |
| EXP02 | talk with participant | Since you entered this study on [insert ADM09], have you talked with someone else (such as a client or patient at this agency, friend, etc.) who is participating in this study about any of the following topics? (Choose all that apply) | all that apply | 2 | | |
| EXP02MULTI10 | Participant in study: drugs/alcohol influences sexual behaviors | How using drugs and/or alcohol influences your sexual behaviors | | 2 | numeric | |
| EXP02MULTI11 | Participant in study: condom use | How to use a condom | | 2 | numeric | |
| EXP02MULTI12 | Participant in study: communication with partner about condom use | How to talk about condom use with your sexual partner | | 2 | numeric | |
| EXP02MULTI13 | Participant in study: HIV transmission | How HIV spreads from person to person | | 2 | numeric | |
| EXP02MULTI14 | Participant in study: personal risk | Your personal risk of being exposed to or transmitting HIV | | 2 | numeric | |
| EXP02MULTI15 | Participant in study: prevention of exposure/transmission | Helping you to develop a plan to prevent your exposure to or transmission of HIV | | 2 | numeric | |
| EXP02MULTI16 | Participant in study: risks regarding anal/vaginal intercourse | Risks associated with anal and/or vaginal intercourse | | 2 | numeric | |
| EXP02MULTI17 | Participant in study: risks with sharing needles | Risks associated with sharing needles or other works used to shoot up | | 2 | numeric | |
| EXP02MULTI18 | Participant in study: personal sexual behaviors | How your personal sexual behaviors might put you at risk for exposure to or transmission of HIV | | 2 | numeric | |
| EXP02MULTI19 | Participant in study: prevention of other infections | How to prevent exposure to or transmission of sexually transmitted diseases other than HIV | | 2 | numeric | |

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| EXP02MULTI10 | Participant in study:none of the above | None of the above topics | | 2 | numeric | |
| EXP03 | talk with other professional | Since you entered this study on [insert ADM09], have you talked with a doctor, nurse, counselor, case manager, or other person that provides healthcare or social services to you (other than staff at this agency) about any of the following topics? (Choose all that apply) | all that apply | 2 | numeric | |
| EXP03MULTI0 | Other professional: drugs/alcohol influences sexual behaviors | How using drugs and/or alcohol influences your sexual behaviors | | 2 | numeric | |
| EXP03MULTI1 | Other professional: condom use | How to use a condom | | 2 | numeric | |
| EXP03MULTI2 | Other professional: communication with partner about condom use | How to talk about condom use with your sexual partner | | 2 | numeric | |
| EXP03MULTI3 | Other professional: HIV transmission | How HIV spreads from person to person | | 2 | numeric | |
| EXP03MULTI4 | Other professional: personal risk | Your personal risk of being exposed to or transmitting HIV | | 2 | numeric | |
| EXP03MULTI5 | Other professional: prevention of exposure/transmission | Helping you to develop a plan to prevent your exposure to or transmission of HIV | | 2 | numeric | |
| EXP03MULTI6 | Other professional: risks regarding anal/vaginal intercourse | Risks associated with anal and/or vaginal intercourse | | 2 | numeric | |
| EXP03MULTI7 | Other professional: risks with sharing needles | Risks associated with sharing needles or other works used to shoot up | | 2 | numeric | |
| EXP03MULTI8 | Other professional: personal sexual behaviors | How your personal sexual behaviors might put you at risk for exposure to or transmission of HIV | | 2 | numeric | |

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|--------------|--|--|-----------------|---|---------|------|
| EXP03MULTI9 | Other professional: prevention of other infections | How to prevent exposure to or transmission of sexually transmitted diseases other than HIV | | 2 | numeric | |
| EXP03MULTI10 | Other professional: none of the above | None of the above topics | | 2 | numeric | |
| BEGIN | | ENDSTUDY | | | | |
| END01 | | Thank you for your participation. Please leave the screen up and call the study staff. | | | | |
| ENDRA01 | | RA log in | | | | |
| END01A | Participant will return to finish survey | Did the participant state they wanted to come back to finish the assessment? | yes/no | 2 | numeric | |
| END02 | Study Complete | Was the survey completed by the participant or RA/interviewer? | multiple choice | 2 | numeric | END |
| END03 | Received Help | How much help did you give the participant in this survey? | multiple choice | 2 | numeric | END1 |
| END04 | Assessment location | Where was this assessment conducted? Check all that apply | all that apply | 2 | numeric | |
| END04MULTI0 | assessment field | In the field | | 2 | | |
| END04MULTI1 | assessment clinic | In the clinic | | 2 | | |
| END04MULTI2 | assessment phone | By phone | | 2 | | |
| ENDREAD | | READ: This participant did not successfully complete the ACASI because [insert formatted HXTFV3]. Please check 'no' to eligibility criterion 8 on the eligibility worksheet. This participant is NOT ELIGIBLE to be randomized. | | | | |
| ENDREAD2 | | READ: This participant has successfully completed the ACASI. The participant's DOB is [insert ADM08 (DOB)] and their gender is [insert formatted DEMSEX]. Please enter this information at the bottom of the eligibility worksheet. | | | | |
| ENDREAD3 | | READ: Participant stated they will come back to finish this assessment. Please do not call the IVRS system until this participant has completed this assessment. Inform the participant that they should return within 1 week to complete the assessment. | | | | |

**Audio Computer-Assisted Self-Interview (ACASI) Data
Dictionary Codelist**

(Database entitled “weeklyftp”)

| Codelist Name | Valid Response | Valid Response Codes | Comments | |
|---------------|---------------------------|---|----------|--|
| AFFIRM | 0; 1 | No, I want to change my answer Yes | | |
| AFFIRM1 | 0; 1; 2; | No, never; Yes, but not in the past 3 months; Yes, within the past 3 months; | | |
| AGREE | 1; 2; 3; 4; 5 | Strongly disagree; Disagree; Undecided; Agree; Strongly Agree | | |
| CAR01 | 5; | I am not thinking about HIV medical care at this time; HIV medical care is important to me but I am not ready to start care yet; I have thought about starting HIV medical care but have not yet tried to find a doctor or clinic; I have found a doctor or clinic for HIV medical care but have not yet tried to make an appointment; I have tried to obtain HIV care from a doctor or clinic but have not been successful yet; I have an appointment for HIV care with a doctor or clinic but have not been there yet; I have already gone to a doctor or clinic for HIV care at least once | | |
| CAR08 | 2; | Very helpful; Somewhat helpful; Somewhat unhelpful; Very unhelpful | | |
| CAR09 | 2; | No information; Understood most of the information; Understood some but not all of the information; Understood none or almost none of the information | | |
| CAR14 | 0; 1; 2; 3; 4 | Less than 50; 50 - 99; 100 - 199; 200 - 500; Greater than 500 | | |

| | | | | |
|---------|-----|--|---------------|--|
| CAR17 | | 0; Undetectable; 1; < 1,000; 2; 1,000 - 9,999; 3; 10,000 - 100,000; 4 > 100,000 | | |
| CAR18 | 1; | No; Yes; 0; Have never made an appointment for 2 HIV care | | |
| CTPSITE | N/A | 150301 La Frontera Center, Inc. 071000 Daymark Recovery Services 020201 Glenwood Life Counseling Center 020801 Chesterfield 110401 Morris Village Alcohol & Drug Addiction Treatment Center 110901 LRADAC 160401 Life Link 190100 WPIC Addiction Medicine Services (CPCDS) 030600 Wheeler Clinic, Inc 030700 Midwestern Connecticut Council on Alcoholism (MCCA) 091100 Gibson Recovery Center, Inc. 040401 CODA | drop down box | |
| DKRTA | | -1; Don't know; -2 Refused to answer | | |
| DPR01 | | I never take longer than 30 minutes to fall asleep; I take at least 30 minutes to fall asleep, less than half the time; 0; I take at least 30 minutes to fall 1; asleep, more than half the time; 2; I take more than 60 minutes to fall 3 asleep, more than half the time | | |
| DPR02 | | I do not wake up at night; I have a restless, light sleep with a few brief awakenings each night; I wake up at least once a night, but I 0; go back to sleep easily; 1; I awaken more than once a night and 2; stay awake for 20 minutes or more, 3 more than half the time | | |

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|-------|--|--|--|--|
| DPR03 | | <p>Most of the time, I awaken no more than 30 minutes before I need to get up;</p> <p>More than half the time, I awaken more than 30 minutes before I need to get up;</p> <p>I almost always awaken at least one</p> <p>0; hour or so before I need to, but I go 1; back to sleep eventually; 2; I awaken at least one hour before I 3 need to, and can't go back to sleep</p> | | |
| DPR04 | | <p>I sleep no longer than 7 to 8 hours a night, without napping during the day;</p> <p>I sleep no longer than 10 hours in a 24-hour period including naps;</p> <p>0; I sleep no longer than 12 hours in a 1; 24-hour period including naps; 2; I sleep longer than 12 hours in a 24- 3 hour period including naps</p> | | |
| DPR05 | | <p>0; I do not feel sad;</p> <p>1; I feel sad less than half the time;</p> <p>2; I feel sad more than half the time;</p> <p>3 I feel sad nearly all of the time</p> | | |
| DPR06 | | <p>There is no change in my usual appetite;</p> <p>I eat somewhat less often or lesser amounts of food than usual;</p> <p>I eat much less than usual and only</p> <p>0; with personal effort;</p> <p>1; I rarely eat within a 24-hour period, 2; and only with extreme personal effort 3 or when others persuade me to eat</p> | | |
| DPR07 | | <p>There is no change in my usual appetite;</p> <p>I feel a need to eat more frequently than usual;</p> <p>0; I regularly eat more often and/or 1; greater amounts of food than usual; 2; I feel driven to overeat both at 3 mealtime and between meals</p> | | |
| DPR08 | | <p>I have not had a change in my weight;</p> <p>0; I feel as if I've had a slight weight 1; loss; 2; I have lost 2 pounds or more; 3 I have lost 5 pounds or more</p> | | |

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|-------|--|---|--|--|
| DPR09 | | <p>I have not had a change in my weight;</p> <p>0; I feel as if I've had a slight weight gain;</p> <p>1; gain;</p> <p>2; I have gained 2 pounds or more;</p> <p>3 I have gained 5 pounds or more</p> | | |
| DPR10 | | <p>There is no change in my usual capacity to concentrate or make decisions;</p> <p>I occasionally feel indecisive or find that my attention wanders;</p> <p>Most of the time, I struggle to focus my attention or to make decisions;</p> <p>0; my attention or to make decisions;</p> <p>1; I cannot concentrate well enough to read or cannot make even minor decisions</p> <p>2; read or cannot make even minor</p> <p>3 decisions</p> | | |
| DPR11 | | <p>I see myself as equally worthwhile and deserving as other people;</p> <p>I am more self-blaming than usual;</p> <p>0; I largely believe that I cause problems for others;</p> <p>1; for others;</p> <p>2; I think almost constantly about major and minor defects in myself</p> <p>3</p> | | |
| DPR12 | | <p>I do not think of suicide or death;</p> <p>I feel that life is empty or wonder if it's worth living;</p> <p>I think of suicide or death several times a week for several minutes;</p> <p>0; I think of suicide or death several times a day in some detail, or I have made specific plans for suicide or have actually tried to take my life</p> <p>1; times a day in some detail, or I have</p> <p>2; made specific plans for suicide or</p> <p>3</p> | | |
| DPR13 | | <p>There is no change from usual in how interested I am in other people or activities;</p> <p>I notice that I am less interested in people or activities;</p> <p>0; I find I have interest in only one or two of my formerly pursued activities;</p> <p>1; two of my formerly pursued activities;</p> <p>2; I have virtually no interest in formerly pursued activities</p> <p>3</p> | | |

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| DPR14 | | <p>There is no change in my usual level of energy; I get tired more easily than usual; I have to make a big effort to start or finish my usual daily activities (for example, shopping, homework, cooking or going to work);</p> <p>0; 1; I really cannot carry out most of my usual daily activities because I just don't have the energy</p> | | |
| DPR15 | | <p>I think, speak, and move at my usual rate of speed; I find that my thinking is slowed down or my voice sounds dull or flat; It takes me several seconds to respond to most questions and I'm sure my thinking is slowed;</p> <p>0; 1; sure my thinking is slowed; 2; I am often unable to respond to questions without extreme effort</p> | | |
| DPR16 | | <p>I do not feel restless; I'm often fidgety, wringing my hands, or need to shift how I am sitting;</p> <p>0; 1; I have impulses to move about and am quite restless; 2; At times, I am unable to stay seated and need to pace around</p> | | |
| EDUCATE | | <p>1; 8th grade or less; 2; Some high school, no diploma; 3; High school diploma or GED; 4; Some college or technical training; 5; College degree (such as BA, BS); 6; Any post college education;</p> | | |
| EMPLOY | | <p>1; Full time; 2; Steady part time; 3; Only sometimes;</p> | | |
| END | | <p>Participant Only</p> <p>1; Study Staff Person Only 2; Both participant and Study Staff Person</p> | | |
| END1 | | <p>1; Very little help 2; Some help 3; A lot of help</p> | | |
| FLAG | | <p>Client had a positive HIV TEST; Client received results from test performed in last year;</p> <p>1; 2; Eligibility could not be determined due to missing data; 3; 4; Client opted out</p> | | |

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| FREQ | <p>Rarely or none of the time (that is, less than 1 day);</p> <p>Some or a little of the time (that is, 1-2 days);</p> <p>Occasionally or a moderate amount of time (that is, 3-4 days);</p> <p>All of the time (that is, 5-7 days)</p> | | |
| FREQ1 | <p>36 drinks or more;</p> <p>24 to 35 drinks;</p> <p>18 to 23 drinks;</p> <p>12 to 17 drinks;</p> <p>8 to 11 drinks;</p> <p>5 to 7 drinks;</p> <p>4 drinks;</p> <p>3 drinks;</p> <p>2 drinks;</p> <p>1 drink</p> | | |
| FREQ2 | <p>25 or more drinks;</p> <p>19 to 24 drinks;</p> <p>16 to 18 drinks;</p> <p>12 to 15 drinks;</p> <p>9 to 11 drinks;</p> <p>7 to 8 drinks;</p> <p>5 to 6 drinks;</p> <p>3 to 4 drinks;</p> <p>2 drinks;</p> <p>1 drink</p> | | |
| FREQ3 | <p>Every day;</p> <p>5 to 6 days a week;</p> <p>3 to 4 days a week;</p> <p>2 days a week;</p> <p>1 day a week;</p> <p>2 to 3 days a month;</p> <p>1 day a month;</p> <p>3 to 5 days in the past 6 months;</p> <p>1 or 2 days in the past 6 months;</p> <p>Never</p> | | |
| FREQ4 | <p>Less than once a month;</p> <p>About once a week;</p> <p>More than once a week, but not every day;</p> <p>Every day;</p> | | |
| FREQ5 | <p>Less than once a month;</p> <p>1-3 times a month;</p> <p>About once a week;</p> <p>More than once a week, but not every day;</p> <p>Every day;</p> <p>Never</p> | | |

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| FREQ6 | <p>Less than a week ago;</p> <p>1; More than a week but less than a month ago;</p> <p>2; One to three months ago;</p> <p>3; Four to six months ago;</p> <p>4; Seven to twelve months ago;</p> <p>5; More than a year ago;</p> <p>6; Never</p> <p>7</p> | | |
| FREQ7 | <p>0; Less than 1 day;</p> <p>1; 1 to 3 days;</p> <p>2; 4 to 6 days;</p> <p>3; 1 week to 1 month;</p> <p>4; 1 month up to 3 months;</p> <p>5; 3 months up to 6 months;</p> | | |
| FREQ8 | <p>Every day;</p> <p>1; 5 to 6 days a week;</p> <p>2; 3 to 4 days a week;</p> <p>3; 2 days a week;</p> <p>4; 1 day a week;</p> <p>5; 2 to 3-days a month;</p> <p>6; 1 day a month;</p> <p>7; 3 to 5 days in the past 6 months;</p> <p>8; 1 or 2-days in the past 6 months;</p> <p>9; I did not drink any alcohol in the past 6 months, but I did drink in the past;</p> <p>10; 6 months, but I did drink in the past;</p> <p>11 I never drank any alcohol in my life</p> | | |
| FREQ9 | <p>Every day;</p> <p>1 5 to 6 days a week;</p> <p>2 3 to 4 days a week;</p> <p>3 2 days a week;</p> <p>4 1 day a week;</p> <p>5 2 to 3 days a month;</p> <p>6 1 day a month;</p> <p>7 I did not drink any alcohol since I entered this study</p> <p>10</p> <p>11 I never drank any alcohol in my life</p> | | |
| FREQ10 | <p>1: Every day;</p> <p>2; 5 to 6 days a week;</p> <p>3; 3 to 4 days a week;</p> <p>4; 2 days a week;</p> <p>5; 1 day a week;</p> <p>6; 2 to 3 days a month;</p> <p>7; 1 day a month;</p> <p>8; Never</p> | | |

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| FREQ11 | | 1: Every day; 2; 5 to 6 days a week; 3; 3 to 4 days a week; 4; 2 days a week; 5; 1 day a week; 6; 2 to 3 days a month; 7; 1 day a month; 8; 3 to 5 days since I entered the study; 9; 1 or 2 days since I entered the study; 10 Never | | |
| FREQ12 | | Every day; 1; 5 to 6 days a week; 2; 3 to 4 days a week; 3; 2 days a week; 4; 1 day a week; 5; 2 to 3 days a month; 6; 1 day a month; 7; 3 to 5 days since I entered the study; 8; 1 or 2-days since I entered the study; 9; I did not drink any alcohol since I 10; entered the study; 11 I never drank any alcohol in my life | | |
| FSMSTAT | | You believe they were HIV-positive and had no reason to doubt it; You believe they were HIV-negative 1: and had no reason to doubt it; 2; You did not know or were unsure 3; about their HIV status; | | |
| FSM1STAT | | You believe she was HIV-positive and had no reason to doubt it; You believe she was HIV-negative 1: and had no reason to doubt it; 2; You did not know or were unsure 3; about her HIV status; | | |

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| HIVNO | | <p>Thought the site would contact me if positive; Afraid of getting the result; Too busy to get the result; Forgot to get the result; Moved or out of town; Jail-related (meaning you were tested in jail or or jailed before getting result)</p> <p>1; ; 2; Unable to get transportation to the 3; testing place; 4; Lost appointment card, paperwork, ID 5; number; 6; Didn't want to know or didn't care 7; about result; 8; Didn't seek the test or didn't care 9; about being tested; 10; Results were not ready yet; 11; Testing site was inconvenient (such 12; as because of location or hours) ; 13; Other;</p> | | |
| HIVRDY | | <p>I am not thinking about being tested for HIV at this time; Being tested for HIV is important to me but I am not ready to get tested yet; I have thought about being tested for HIV but have not yet tried to find a testing site (place to get tested); I have found a testing site for HIV but have not yet tried to make an appointment; I have tried to get tested for HIV at a</p> <p>1; testing site but have not been 2; successful yet; 3; I have an appointment for an HIV test 4; but have not been to the testing site 5; yet; 6; I have already been tested for HIV at 7; least once;</p> | | |
| HIVREC | | <p>1; Negative; 2; Positive; 3; Indeterminate;</p> | | |
| HIVSITE | | <p>1; Swab from mouth; 2; Blood from finger; 3; Blood from arm; 4; Other;</p> | | |

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|----------|--|--|--|--|
| HIVSTAT | | 0; Negative; 1; Positive; 2; Unknown/Don't know | | |
| HIVWHERE | | Needle exchange program; HIV and/or AIDS street outreach program or Mobile Unit ; Adult HIV and/or AIDS specialty clinic; 1; Sexually transmitted disease clinic; 2; Community health center/public health clinic; 3; Family planning clinic; 4; Prenatal or obstetrics clinic; 5; HIV counseling and testing site; 6; Other outpatient facility; 7; Hospital (as an inpatient); 8; Emergency room; 9; Drug treatment program; 10; Private doctors office (including HMO); 11; Correctional facility (such as jail or prison); 12; Blood bank or Plasma center; 13; Military; 14; At home; 15; Other; | | |
| HIV2WHER | | Needle exchange program; Sexually transmitted disease clinic; 1; Community health center/public health clinic; 2; Family planning clinic; 3; Prenatal/obstetrics clinic; 4; Other outpatient facility; 5; Hospital (inpatient); 6; Emergency room; 7; Drug treatment program; 8; Private doctors office (including HMO); 9; Correctional facility (jail or prison); 10; Blood bank/Plasma center; 11; Military; 12; At home; 13; Other; | | |
| IMP | | 1; Not at all important; 2; Somewhat important; 3; Moderately important; 4; Very important; 5; Extremely important | | |

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| INCOME | 1; \$0; 2; \$1 to \$5000; 3; \$5,001 to \$10,000; 4; \$10,001 to \$20,000; 5; \$20,001 to \$30,000; 6; \$30,001 to \$40,000; 7; \$40,001 to \$50,000; 8; More than \$50,000; | | |
| JAIL6 | less than 1 month; 0; 1-2 months; 1; 2-3 months; 2; 3-4 months; 3; 4-5 months; 4; 5-6 months; 5; I have not spent any time in jail or 6; prison in the last 6 months; | | |
| LANGUAGE | 1; English; 2 Spanish | | |
| LIKERT | 1; Strongly agree; 2; Agree; 3; Disagree; 4; Strongly disagree; | | |
| MARITAL | 1; Married; 2; Living with partner/cohabitating; 3; Widowed; 4; Separated; 5; Divorced; 6; Single; | | |
| MTHFMT | 1; January; 2; February; 3; March; 4; April; 5; May; 6; June; 7; July; 8; August; 9; September; 10; October; 11; November; 12 December | | |
| NEEDLE | I always use new needles; I always clean my needle just before I shoot up; 1; After I shoot up, I always clean my 2; needle; 3; Sometimes I clean my needle, 4; sometimes I don't ; 5 I never clean my needle | | |

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| NEEDLE1 | | Never; A few times (that is, 1-2 times); 0; About once a week (that is, 3-4 1; times); 2; More than once a week (that is, 5 or 3 more times) | | |
| NOALC | | 1: Yes, I never drank; 0 No, I did drink | | |
| PAROLE | | No, neither; Yes, parole or post release 0; supervision; 1; Yes, probation or pre-sentencing 2 diversion | | |
| PARTNER | | 1; primary partner; 2 non-primary partner | | |
| responset_freq_drug | | Less than once a month; 1; 1-3 times a month; 2; About once a week; 3; More than once a week, but not every 4; day; 5; Every day; | | |
| SEX1 | | 1; Male; 2; Female; 3 Transgender or Transsexual | | |
| SEX2 | | 1; Male; 2 Female | | |
| SEX3 | | Males only; 1; Females only; 2; Both males and females; 3; No anal or vaginal sex in past 6 4 months | | |
| SEX4 | | Males only; 1; Females only; 2; Both males and females; 3; No anal or vaginal sex since entering 4 the study | | |

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|--------|--|--|--|
| SLEEP | <p>A house, apartment or flat that you own or rent; A lover or sexual partner's house, apartment, or flat; Someone else's (such as relatives' or friends') house or apartment; Rented room (such as hotel, motel or rooming house);</p> <p>1; Car, bus, truck or other vehicle; 2; Abandoned buildings (such as squats 3; or having no fixed address); 4; Shelter, welfare residence; 5; Jail (such as a prison or detention 6; center); 7; Treatment facility or halfway house; 8; On the streets (including park, bus or 9; train station, under a highway 10; overpass, alleys, or rooftops); 11; Other;</p> | | |
| SOCCU | <p>1; Never; 2; Almost never; 3; Sometimes; 4; Almost every time; 5; Every time</p> | | |
| SOCCU1 | <p>1; Less than 6 months; 2; 6 months or more</p> | | |
| VISIT | <p>1; Baseline; 2; One Month 3; Six Month</p> | | |