



HPTN 052 (096)

IPC-1 (175)

Visit Code

Index ID

- - -

Site Number Index Number Partner Chk

Index Pill Count

Visit Date

dd MMM yy

Instructions: Complete this form with the index or the partner each time study medications are returned and dispensed.

	Med Code	# of pills brought in at this visit	Mark if pills not brought in	# of pills returned at this visit <i>NO LONGER APPLICABLE FOR THIS PROTOCOL.</i>	# of pills returned at this visit <i>NO LONGER APPLICABLE FOR THIS PROTOCOL.</i>	Total # of pills dispensed at this visit
1.	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/> <input type="text"/>
2.	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/> <input type="text"/>
3.	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/> <input type="text"/>
4.	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/> <input type="text"/>
5.	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/> <input type="text"/>
6.	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/> <input type="text"/>
7.	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/> <input type="text"/>
8.	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/> <input type="text"/>
9.	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/> <input type="text"/>

Comments: _____

16-JAN-13

Language

Staff Initials / Date

Index Pill Count (IPC-1)

- At the Post-ART Initiation visit, record the visit code as an interim visit. For example, if a participant began ART for the first time at visit “010.0,” and their next visit is the Post-ART Initiation visit, the visit should be coded “010.1.”

Item-specific Instructions:

- **Med code:** Record the codes for all study medications in the participant’s current regimen and the codes for any new study medications being dispensed for the first time at this visit. Refer to Atlas for current Medication Code List. *Note: During the study, this medication code list may be updated as new ARTs become available. Existing codes will not change, but new codes may be added. Please refer to the SSP appendices for medication code additions. If a drug used at your site is not listed, contact the SCHARP Project Manager for a new code.*
- **# of pills brought in at this visit:** Record the number of pills brought in to the clinic by the participant at this visit. If the participant reports having taken all of the pills, record ‘000’ under “# of pills brought in at this visit.”
- **Mark if pills not brought in:** Mark this box if the participant neglected to bring in any or all remaining pills.
- **Total number of pills dispensed at this visit:** Total number includes pills returned to the participant at this visit in addition to any new pills dispensed.

Note: If study medications are dispensed for the first time at this visit (e.g., at Enrollment, for the peripartum, or the initial regimen), the “# of pills brought in at this visit,” and “Mark if pills not brought in,” response boxes must be left blank.