



HPTN 052 (096)

ITA-1 (160)

Visit Code

Index ID

- - -
 Site Number Index Number Partner Chk

Index Treatment Adherence

Visit Date

dd MMM yy

Instructions: This is an interviewer-administered form. Complete form at every follow-up visit for index participants on ART. Prior to the participant's arrival, record all medications and medication code(s) in the participant's current regimen.

1. Manje sengizokubuza imibuzo mayelana nemithi yocwaningo onqunyelwe yona noma ngabe kukhona ongazange uwaphuze kwayizolo, ezinsukwini ezimbili ezedlule, noma emavikini amabili edlule noma ezinsukwini ezingamashumi amathathu ezedlule. uma uke wathatha ingxenye yamaphilisi osukwini noma ezinsukwini lezi, kuthathe njengokuthi awuzange uwaphuze. Uwabike amaphilisi ongazaphuzanga.

Med code	Abbreviation/ Name of your drugs	Indlela onqunyelwe ngayo ukuphuza umuthi noma amaphilisi ngosuku	Amaphilisi ongazange uwaphuze izolo	Amaphilisi ongazange uwaphuze ezinsukwini ezimbili ezedlule	Amaphilisi ongazange uwaphuze emavikini amabili edlule	Amaphilisi ongazange uwaphuze ezinsukwini ezingamashumi amathathu edlule
1a.	<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"/>
1b.	<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"/>
1c.	<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"/>
1d.	<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"/>
1e.	<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"/>

2. Ezinsukwini ezingamashumi amathathu ezedlule kwakunini lapho ungazange uphuze ama philisi owayalelwe? **Show Card #11.**

- evikini eledlule
- evikini elilodwa ukuya kwamabili adlule
- emavikini amabili ukuya kwamane adlule

1-3 months ago

NO LONGER APPLICABLE FOR THIS PROTOCOL

- angikaze ngeqise amaphilisi noma akwenzeki

16-JAN-13

Language

Staff Initials / Date

Index Treatment Adherence (ITA-1)

Item-specific Instructions:

- **Item 1:** A dose is the number of times a participant takes one or more pills per day within a 24-hour time period (e.g., two pills every 8 hours equals 3 doses per day). Record “0” or “00” if a dose was not missed.
- **Medication Code:** Refer to Atlas for the most 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.*



HPTN 052 (096)

ITA-2 (162)

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Index ID

- - -

Site Number Index Number Partner Chk

Index Treatment Adherence

The following questions pertain to the study medications on page 1.

3. Ezinsukwini ezine ezedlule, zingaki izinsuku lapho ongazange uthathe amaphilisi wonke?

- akuzange nhlobo
- illanga eliilodwa
- amalanga amabili
- amalanga amathathu
- amalanga amane

4. Abanye abantu bayaye bakhohlwe ukuthatha amaphilisi ngempelasonto. uke wangaphuzi amaphilisi ngomqibelo odlule noma ngesonto? yes no

5. ~~Have you had any medications within the past month?~~
NO LONGER APPLICABLE FOR THIS PROTOCOL.

6. Enyangeni edlule, kukangaki lapho ungawaphuzanga amaphilisi ngoba:
 Mark one box for each item.

Show Card #12.

	<i>never</i>	<i>rarely</i>	<i>sometimes</i>	<i>often</i>
6a. Ngangifuna ukugwema imiphumela engemihle?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6b. Kubenzima ukulandela imiyalo yokudla?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6c. Ukwahlulelana ngama art nomunye womndeni noma abangani?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6d. Ukungaqondi ngokuphelele impatho nezidingo?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6e. Ngenxa yezinkolelo zenkolo?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6f. Ukubakude nasekhaya?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6g. Izinkinga zezinqola zokuhamba zokuya emtholampilo?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6h. Ukulahlekelwa ngamaphilisi?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6i. Ukuba namaphilisi amaningi?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16-JAN-13

Language

Staff Initials / Date

Index Treatment Adherence (ITA-2)

No specific instructions.

Version 4.0, 16-JAN-13

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HPTN 052 (096)

ITA-3 (163)

Visit Code

Index ID

- - -

Site Number Index Number Partner Chk

Index Treatment Adherence

6. Enyangeni edlule, kukangaki lapho ungawaphuzanga amaphilisi ngoba: *Continued*

	<i>never</i>	<i>rarely</i>	<i>sometimes</i>	<i>often</i>
6j. Ukuba nesikhathi esibi kwenza ucabange ukuthi imbangela kungaba amaphilisi/imithi oyiphuzayo?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6k. Wakhohlwa?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6l. Uphelelwe amaphilisi?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6m. Wawuthathekile wenza ezinye izinto (isibonelo: usebenza, uzama impilo noma ukuthola ukudla)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6n. Ukhathele ukuphuza amaphilisi amaningi?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6o. Ukuba nezinye izifo noma izinkinga empilweni?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6p. Ukwesaba(ukuthi abantu bazothini uma sebazi ngesimo sempilo yakho kubantu bangaphandle noma ilungu lomndeni)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6q. Ukwesaba phakathi emndenini (isibonelo: ukungathandi ukuthi umyeni noma unkosikazi wakho azi)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6r. Amaphilisi onakaliswa ukushisa noma abe manzi?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6s. Ubugula kakhulu awakwazi ukufinyelela emtholampilo ukuba uthole amaphilisi?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6t. Amaphilisi ebiwe (isibonelo: usesendleleni ebhasini, etekisini noma esitimeleni)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6u. Ufanele ukuvuka ekuseni kakhulu ulungisele ukuya emsebenzini futhi sibe singekho isikhathi sokudla?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6v. Awucabanganga ukuthi angakusiza ngempela?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6w. Ukhathezwa amaphupho?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6x. Chaza ezinye: <i>Local Language</i> _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>English</i> _____				

Index Treatment Adherence (ITA-3)

Item-specific Instructions:

- **Item 6x:** Specify “other” reason in local language, as applicable. Record in English prior to faxing.