



HPTN 052 (096)

IVA-1 (129)

Visit Code [ ][ ] . [ ]

Index ID

Site Number [ ][ ] - Index Number [ ][ ][ ] - Partner 0 0 - Chk [ ]

Index Virologic Failure Assessment

Form Completion Date

dd [ ][ ] MMM [ ][ ][ ] yy [ ][ ]

Instruction: Complete this form any time virologic failure has been confirmed.

1. Date virologic failure was confirmed: dd [ ][ ] MMM [ ][ ][ ] yy [ ][ ]

2. What new regimen did the participant begin as a result of failure?

- initial regimen
secondary regimen
salvage regimen
no change

Comments: \_\_\_\_\_

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## **Index Virologic Failure Assessment (IVA-1)**

**Purpose:** This form is used to document virologic failure. Refer to the HPTN 052 protocol for definition of virologic failure.

### **Item-specific Instructions:**

- **Item 1:** Provide the date of specimen collection confirming failure.