



Visit Code

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MTN 015 (143)

STR-1 (131)

Participant ID

□□□-□□□□□□-□  
Site Number Participant Number Chk

Initial Collection Date

□□ □□□ □□  
dd MMM yy

Sexually Transmitted Diseases Results

Not done/ Not collected  Alternate Collection Date dd MMM yy □□ □□□ □□

1. VAGINAL WET PREP

Not done

1a. Homogeneous vaginal discharge

negative positive

1b. pH ..... □□.□□ → If > 4.5 mark as positive. →

1c. Whiff test .....

1d. Clue cells ≥ 20% .....

1e. Trichomonads .....

1f. Buds and/or hyphae (yeast) .....

Not done/ Not collected  Alternate Collection Date dd MMM yy □□ □□□ □□

2. STD SEROLOGY

non-reactive reactive

2a. Syphilis screening test .....

2a1. Titer 1: □□□□

→ If non-reactive, go to item 3a.

2b. Syphilis confirmatory test .....

negative positive

Not done/ Not collected  Alternate Collection Date dd MMM yy □□ □□□ □□  
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3. OTHER STD TESTS

negative positive

3a. N. gonorrhea .....

3b. C. trachomatis .....

Not done/ Not collected  Alternate Collection Date dd MMM yy □□ □□□ □□  
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4. Trichomonas Rapid Test .....

negative positive

5. NO LONGER APPLICABLE FOR THIS PROTOCOL .....

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

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## Sexually Transmitted Diseases Results (STR-1)

**Purpose:** This form is used to document sexually transmitted disease test results obtained during the study.

**General Information/Instructions:** Record specimen test results on this form as they become available from the local lab. Fax this form to SCHARP DataFax when results for all collected specimens are available and recorded.

**Initial Collection Date:** Record the date that the first specimen(s) was *collected* (NOT the date results were reported or recorded on the form) for this visit. Complete date required.

**Alternate Collection Date:** This date is to be completed ONLY if the specimen was collected on a different day than the Initial Collection Date. A specimen collected for the same visit but on a different day should be recorded on the same form only when obtained within the same visit window. Complete date required.

**Not done/Not collected:** For each item, mark *either* the “Not done/Not collected” box *or* enter a test result(s). For items 1a–1f, mark the “Not done” box if a particular test is not done.

### Item-specific Instructions:

- **Item 1a:** Only mark “negative” or “positive” if a clinical work-up for BV is performed. If homogenous vaginal discharge is observed but BV work-up is not done, mark this item as “Not done” and record the abnormal discharge on the Pelvic Exam Diagrams and Medical History Log non-DataFax forms.
- **Item 2a1:** Remember to use leading zeros when recording syphilis titer level. For example, a titer level of 1:4 is recorded as “1:0004.”
- **Items 3a and 3b:** If a result of “indeterminate” is received, do not record this result. Repeat the testing and/or specimen collection until a result of “positive” or “negative” is received, and record that result on the form. Also record “Alternate Collection Date” if additional specimens are collected for this testing.