# Appendix III to SSP Section 13 HPTN 083 Schedule of Forms and CASI Surveys

Step 4a

CRF Name	Day 0 V61.0	Week 4 V62.0
Date of Visit - OLE	x	x
Specimen Storage	x	x
HIV Test Results	х	X
Local Laboratory Results	х	X
Vital Signs	х	x
SMSQ-OLE	x	
Interviewer Administered - OLE	х	
CASI Survey	х	

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## Step 4b

CRF Name	Day 0 V63.0
Date of Visit - OLE	x
Specimen Storage	x
HIV Test Results	х
Injection Administration	x
Vital Signs	x
SMSQ-OLE	x
Interviewer Administered - OLE	x
Local Laboratory Results	х
CASI Survey	х

# Step 4c

CRF Name	Day 0 V64.0	Week 8 V65.0	Week 16 V66.0	Week 24 V67.0	Week 32 V68.0	Week 40 V69.0	Week 48 V70.0
Date of Visit - OLE	х	х	Х	Х	Х	х	х
Vital Signs	х	х	Х	Х	Х	х	х
Injection Administration	х	х	Х	Х	Х	х	x
HIV Test Results	х	х	Х	Х	х	х	x
Local Laboratory Results	х			Х			х
Specimen Storage	х	х	х	х	Х	x	x
SMSQ-OLE	х		Х				x
Interviewer Administered - OLE	х		Х				x
Sexually Transmitted Infections				Х			х
Hepatitis Test Results							Х
CASI Survey	х		Х				Х

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Step 5

CRF Name	Day 0 V101.0	Week 12 V102.0	Week 24 V103.0	Week 36 V104.0	Week 48 V105.0	Week 60 V106.0	Week 72 V107.0	Week 84 V108.0	Week 96 V109.0
Date of Visit - OLE	х	х	х	Х	Х	Х	Х	Х	х
Vital Signs	х	Х	х	х	Х	Х	Х	Х	х
Sexually Transmitted Infections	х		х		Х		Х		x
HIV Test Results	х	Х	х	Х	Х	Х	Х	Х	х
Local Laboratory Results	х		х		Х		Х		х
Specimen Storage	х	х	х	Х	х	х	х	х	х
SMSQ-OLE	х		х		Х		Х		х
Interviewer Administered - OLE	х		х		х		х		х
Hepatitis Test Results			х		Х		Х		х
CASI Survey	х		х		х		х		х

Step 5b

CRF Name	Day 0 V121.0	Week 12 V122.0	Week 24 V123.0	Week 36 V124.0	Week 48 V125.0	Week 60 V126.0	Week 72 V127.0	Week 84 V128.0	Week 96 V129.0
Date of Visit - OLE	х	х	Х	Х	Х	Х	Х	х	Х
Vital Signs	х	x	Х	Х	Х	Х	х	x	х
Sexually Transmitted Infections	х		х		Х		х		Х
HIV Test Results	х	х	х	Х	x	х	х	x	х
Local Laboratory Results	х		х		х		х		Х
Specimen Storage	х	x	х	х	Х	х	х	х	Х
SMSQ-OLE	х		х		Х		х		Х
Interviewer Administered - OLE	х		х		Х		х		Х
Hepatitis Test Results			Х		Х		Х		Х
CASI Survey	х		х		Х		х		Х

#### **Seroconverter Schedule**

CRF Name	Week 12 V91.0	Week 24 V92.0	Week 36 V93.0	Week 48 V94.0
Date of Visit - HIV	х	х	х	Х
Vital Signs	х	х	х	Х
Specimen Storage	х	х	х	Х
Local lab Test Results		х		Х
CD4		х		Х
CASI Survey				

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#### Additional / As Needed CRFs:

#### Found in Ongoing Logs Folder

Concomitant Medications Y/N
Adverse Event Y/N
ART Medication Y/N
Protocol Deviation Y/N
Social Impact Y/N
Product Hold Y/N
Injection Site Reaction Y/N
Log Revisions
Product Hold - OLE Y/N

## Found in Participant Unblinding Folder

Participant Unblinding

#### **Found in Product Choice Folder**

Product Choice - OLE

#### Found in "Add Event" function

Yearly Visit	
Interim Visit - OLE	
V91.0 – Week 12	

#### **Additional Forms**

Participant Transfer

Participant Receipt

Supplemental HIV Results