Follow-up HIV Test Results (A1) (FHT-1)

Visit Code 2

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1. Test #1: Determine 4th Generation

Lot No. ________ Exp. Date __________

Mark one box indicating the results from the Determine test strip:

- CONTROL
- Ag
- Ab
- NR
- R
- A
- R

If test is invalid (no control line), mark box and repeat Determine Test.

Valid Determine Test Results

1. If NR, STOP and record as NR in Sample Test Result and Participant Result sections. No further testing is required.
2. If R or A, test blood sample with Unigold test.

3. Test #2: Unigold

Lot No. ________ Exp. Date __________

Mark the box indicating the result from the Unigold test strip:

- REACTIVE (R)
- NON-REACTIVE (NR)

If Valid Unigold Results, record in both Sample Test Result and Participant Result sections.

Test Results Interpretation

1. Determine Test = R and Unigold Test = R:
   Record R in both Sample Test Result and Participant Result sections.
2. Determine Test = R and Unigold Test = NR:
   Record as IND in both Sample Test Result and Participant Result sections.
3. Determine Test = A and Unigold Test = R:
   Record as IND in both Sample Test Result and Participant Result sections.
4. Determine Test = A and Unigold Test = NR:
   Record as A in Sample Test Result section and IND in Participant Result section.

4. Sample Test Result

Mark box and record on Sample Tube Label.

- R  (Determine = R and Unigold = R)
- NR  (Determine NR only)
- IND (Determine = R and Unigold = NR or Determine = A and Unigold = R)
- A  (Determine = A and Unigold = NR)

5. Participant Result

- NR
- R
- IND (IND or A)*

* In both cases, counsel as indeterminate result.

6. Were the results given to the participant?

- Yes
- No, participant refused
- No, other: ___________________________

7. If the participant is HIV-positive, provide the name of the nearest health facility, recommend that the participant go to that facility for care and treatment, and record the referral number:

A ____________

If conducting a follow-up interview, return to the Short-term Follow-up (A1) CRF.

Specimen Collection Date

dd MMM yy

Staff ID: ____________ Team ID: ____________

27-JUL-11