



8. Patient's sexual activity (circle one)

- Heterosexual.....1
- Homosexual.....2
- Bisexual.....3
- No sexual activity since 1980.....4
- Virgin.....5
- Unknown.....6

9. Parenteral drug use. Include any needle injection (IV, IM, SC) of heroin, cocaine, and other "recreational" drugs or narcotics. (Circle one)

- Parenteral drug abuse since 1979.....1
- Parenteral drug abuse, but not since 1979..2
- No Parenteral drug abuse.....3
- Parenteral drug use history unknown.....4

10a. Last known HIV-1 serostatus of patient

- Positive.....1
- Negative.....2
- Never tested.....3

10b. Date of last negative sample (check box if always positive)

|\_\_|\_\_| |\_\_|\_\_| |\_\_|\_\_|      |\_\_|  
MONTH      DAY      YEAR      Always Positive

10c. Date of first positive sample

|\_\_|\_\_| |\_\_|\_\_| |\_\_|\_\_|  
MONTH      DAY      YEAR

11. Was sera or plasma stored before January 1, 1983?

- Yes.....1
- No.....2
- Unknown.....3

12. First date in medical/clinic record

|\_\_|\_\_| |\_\_|\_\_| |\_\_|\_\_|  
MONTH      DAY      YEAR

13. Date enrolled in this study

|\_\_|\_\_| |\_\_|\_\_| |\_\_|\_\_|  
MONTH      DAY      YEAR



16. Total non-heated treated Factor IX received (all brands). Circle one per year.

a. <u>1978</u>	b. <u>1979</u>	c. <u>1980</u>
> 100,000 units.....1	> 100,000 units.....1	> 100,000 units.....1
50,001 - 100,000 units..2	50,001 - 100,000 units..2	50,001 - 100,000 units..2
20,001 - 50,000 units...3	20,001 - 50,000 units...3	20,001 - 50,000 units...3
1 - 20,000 units.....4	1 - 20,000 units.....4	1 - 20,000 units.....4
None.....5	None.....5	None.....5
Unknown.....6	Unknown.....6	Unknown.....6

d. <u>1981</u>	e. <u>1982</u>	f. <u>1983</u>
> 100,000 units.....1	> 100,000 units.....1	> 100,000 units.....1
50,001 - 100,000 units..2	50,001 - 100,000 units..2	50,001 - 100,000 units..2
20,001 - 50,000 units...3	20,001 - 50,000 units...3	20,001 - 50,000 units...3
1 - 20,000 units.....4	1 - 20,000 units.....4	1 - 20,000 units.....4
None.....5	None.....5	None.....5
Unknown.....6	Unknown.....6	Unknown.....6

g. <u>1984</u>	h. <u>1985</u>	i. <u>1986</u>
> 100,000 units.....1	> 100,000 units.....1	> 100,000 units.....1
50,001 - 100,000 units..2	50,001 - 100,000 units..2	50,001 - 100,000 units..2
20,001 - 50,000 units...3	20,001 - 50,000 units...3	20,001 - 50,000 units...3
1 - 20,000 units.....4	1 - 20,000 units.....4	1 - 20,000 units.....4
None.....5	None.....5	None.....5
Unknown.....6	Unknown.....6	Unknown.....6

j. Last date this patient received any non-heat treated Factor IX.

|\_\_|\_\_| |\_\_|\_\_| |\_\_|\_\_|  
 MONTH                  DAY                  YEAR

17. Total heat treated Factor IX received (all brands). Circle one per year.

a. <u>1983</u>	b. <u>1984</u>	c. <u>1985</u>
> 100,000 units.....1	> 100,000 units.....1	> 100,000 units.....1
50,001 - 100,000 units..2	50,001 - 100,000 units..2	50,001 - 100,000 units..2
20,001 - 50,000 units...3	20,001 - 50,000 units...3	20,001 - 50,000 units...3
1 - 20,000 units.....4	1 - 20,000 units.....4	1 - 20,000 units.....4
None.....5	None.....5	None.....5
Unknown.....6	Unknown.....6	Unknown.....6

d. <u>1986</u>	e. <u>1987</u>	f. <u>1988</u>
> 100,000 units.....1	> 100,000 units.....1	> 100,000 units.....1
50,001 - 100,000 units..2	50,001 - 100,000 units..2	50,001 - 100,000 units..2
20,001 - 50,000 units...3	20,001 - 50,000 units...3	20,001 - 50,000 units...3
1 - 20,000 units.....4	1 - 20,000 units.....4	1 - 20,000 units.....4
None.....5	None.....5	None.....5
Unknown.....6	Unknown.....6	Unknown.....6

g. <u>1989</u>	h. <u>1990</u>	i. <u>1991</u>
> 100,000 units.....1	> 100,000 units.....1	> 100,000 units.....1
50,001 - 100,000 units..2	50,001 - 100,000 units..2	50,001 - 100,000 units..2
20,001 - 50,000 units...3	20,001 - 50,000 units...3	20,001 - 50,000 units...3
1 - 20,000 units.....4	1 - 20,000 units.....4	1 - 20,000 units.....4
None.....5	None.....5	None.....5
Unknown.....6	Unknown.....6	Unknown.....6

**PART B - PAST HISTORY To Be Completed Up Until Date of Enrollment**

1. Has this patient ever been diagnosed with AIDS?

a) Yes.....1 -----> Date of Diagnosis |\_\_|\_\_| |\_\_|\_\_| |\_\_|\_\_|  
 No.....2 MONTH DAY YEAR

b) What disease/symptoms caused the diagnosis to be made?

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2. Has this patient ever been diagnosed with ARC?

a) Yes.....1 -----> Date of Diagnosis |\_\_|\_\_| |\_\_|\_\_| |\_\_|\_\_|  
 No.....2 MONTH DAY YEAR

b) What disease/symptoms caused the diagnosis to be made?

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3. Has this patient received any of the following drugs?

a) Yes.....1 ---> CIRCLE ALL THAT APPLY AND ENTER TOTAL WEEKS ON EACH RX  
 No.....2

	<u>TOTAL WEEKS ON RX</u>	<u>Was patient on drug during past month?</u>	<u>Date Started MONTH/YEAR</u>
1. AZT (Retrovir).....	__ __ __	YES...1 NO...2	__ __   __ __
2. Ribavirin.....	__ __ __	YES...1 NO...2	__ __   __ __
3. DDC (Dideoxycytidine)...	__ __ __	YES...1 NO...2	__ __   __ __
4. Acyclovir (oral or IV)..	__ __ __	YES...1 NO...2	__ __   __ __
5. Alpha Interferon.....	__ __ __	YES...1 NO...2	__ __   __ __
6. DDI (Dideoxyinosine)....	__ __ __	YES...1 NO...2	__ __   __ __
7. Aerosolized pentamidine.	__ __ __	YES...1 NO...2	__ __   __ __
8. AL 721.....	__ __ __	YES...1 NO...2	__ __   __ __
9. Ampligen.....	__ __ __	YES...1 NO...2	__ __   __ __
10. Trimethoprim-sulfa (Septra, Bactrim).....	__ __ __	YES...1 NO...2	__ __   __ __
11. Pentamidine (IV only)..	__ __ __	YES...1 NO...2	__ __   __ __
12. Other anti-AIDS Rx (specify)	__ __ __	YES...1 NO...2	__ __   __ __
_____	__ __ __	YES...1 NO...2	__ __   __ __
_____	__ __ __	YES...1 NO...2	__ __   __ __
_____	__ __ __	YES...1 NO...2	__ __   __ __

4. Has this patient been enrolled in a double-blinded clinical trial?

a) Yes.....1 --> What drugs are in this trial? \_\_\_\_\_  
 No.....2

Date started on clinical trial |\_\_|\_\_| |\_\_|\_\_| |\_\_|\_\_|

<u>Was Condition Present At Any Time?</u>	<u>Circle One For Each Condition</u>	<u>Date First Diagnosed</u>
5. Kaposi's Sarcoma Specify how proven: _____ _ _	Yes.....1----> No.....2	_ _     _ _     _ _  MONTH DAY YEAR
6. Lymphoma, specify site and type: _____ _ _	Yes.....1----> No.....2	_ _     _ _     _ _  MONTH DAY YEAR
7. Other Malignancy, specify site and type: _____ _ _	Yes.....1----> No.....2	_ _     _ _     _ _  MONTH DAY YEAR
8. Pneumocystis Carinii Pneumonia specify how proven: _____ _ _	Yes.....1----> No.....2	_ _     _ _     _ _  MONTH DAY YEAR
9. Other Pneumonia, specify type _____ _ _	Yes.....1----> No.....2	_ _     _ _     _ _  MONTH DAY YEAR
10. Herpes Zoster (Shingles)	Yes.....1----> No.....2	_ _     _ _     _ _  MONTH DAY YEAR
11. Oral Candidiasis (Thrush)	Yes.....1----> No.....2	_ _     _ _     _ _  MONTH DAY YEAR
11a. Was Candidiasis During or Subsequent to Antibiotic Tx?	Yes.....1 No.....2	
12. Oral "Hairy" Leukoplakia	Yes.....1----> No.....2	_ _     _ _     _ _  MONTH DAY YEAR
13. Tuberculosis (circle site and specify type) Pulmonary    Extrapulmonary Type _____ _ _	Yes.....1----> No.....2	_ _     _ _     _ _  MONTH DAY YEAR
14. Toxoplasmosis specify how proven: _____ _ _	Yes.....1----> No.....2	_ _     _ _     _ _  MONTH DAY YEAR
15. Other AIDS-Related Infection specify _____ _ _	Yes.....1----> No.....2	_ _     _ _     _ _  MONTH DAY YEAR

<u>Was Condition Present At Any Time?</u>	<u>Circle One For Each Condition</u>	<u>Date First Diagnosed</u>
16. Persistent or Intermittent Diarrhea (specify cause) _____  __ __	Yes.....1----> No.....2	__ __   __ __   __ __  MONTH DAY YEAR
17. Persistent Fever (> 101 for more than 2 weeks)	Yes.....1----> No.....2	__ __   __ __   __ __  MONTH DAY YEAR
18. Persistent Non-productive Cough (> two weeks)	Yes.....1----> No.....2	__ __   __ __   __ __  MONTH DAY YEAR
19. Unexplained Weight Loss (> 10% body weight)	Yes.....1----> No.....2	__ __   __ __   __ __  MONTH DAY YEAR
20. Memory or Concentration Problem	Yes.....1----> No.....2	__ __   __ __   __ __  MONTH DAY YEAR
21. Coordination or Motor Problem (HIV-related)	Yes.....1----> No.....2	__ __   __ __   __ __  MONTH DAY YEAR
22. Change in Mood or Affect (e.g Depression)	Yes.....1----> No.....2	__ __   __ __   __ __  MONTH DAY YEAR
23. Other HIV Neurological Abnormalities (specify) _____  __ __	Yes.....1----> No.....2	__ __   __ __   __ __  MONTH DAY YEAR
24. Persistent Anemia (Hgb <13g/dl for male adult) (Hgb <11.5g/dl for women and children less than 15 years)	Yes.....1----> No.....2	__ __   __ __   __ __  MONTH DAY YEAR
25. Persistent Leukopenia (< 5,000 WBC/mm <sup>3</sup> )	Yes.....1----> No.....2	__ __   __ __   __ __  MONTH DAY YEAR
26. Persistent Thrombocytopenia (platelet count < 100,000) Specify lowest count:   __ __  thou/cu mm	Yes.....1----> No.....2	__ __   __ __   __ __  MONTH DAY YEAR

Was Condition Present  
At Any Time?

Circle One For  
Each Condition

Date First Diagnosed

27. Cervical  
Lymphadenopathy

Severe (> 2cm in  
two or more sites.....4  
Moderate (other sizes  
in two or more sites..3  
Mild (one site any  
size).....2  
None.....1

-->|\_|\_| | |\_|\_| | |\_|\_|  
MONTH DAY YEAR

28. Other Extrainguinal  
Lymphadenopathy

Severe (> 2cm in  
two or more sites.....4  
Moderate (other sizes  
in two or more sites..3  
Mild (one site any  
size).....2  
None.....1

-->|\_|\_| | |\_|\_| | |\_|\_|  
MONTH DAY YEAR

29. History of Jaundice

None.....1  
One episode.....2  
> One episode.....3  
Persistent.....4

-->|\_|\_| | |\_|\_| | |\_|\_|  
MONTH DAY YEAR

30. History of  
Transaminase  
Elevation

None.....1  
One episode  
> twice normal.....2  
Two or more episodes  
> twice normal.....3  
Persistently  
elevated.....4

-->|\_|\_| | |\_|\_| | |\_|\_|  
MONTH DAY YEAR

31. History of  
Splenomegaly

None.....1  
Palpable but not  
below costal margin...2  
Palpable below costal  
margin.....3

-->|\_|\_| | |\_|\_| | |\_|\_|  
MONTH DAY YEAR

(Specify max. |\_|\_| cm below costal margin)

32. History of  
Hepatomegaly

Yes.....1  
No.....2

---->|\_|\_| | |\_|\_| | |\_|\_|  
MONTH DAY YEAR

(Specify max. |\_|\_| cm below costal margin)



Please write in the Subject ID \_\_\_\_\_  
**Form 06 Addendum for Questions 15 and 17**

*\*Not Applicable means that the subject had not yet been born, the subject had already died or the year has not yet occurred or is not yet complete.*

**15. Total Heat-Treated Factor VIII Received (All Brands). Circle one answer per year**

<p>15 j. <u>1992</u></p> <p>&gt;100,000 units ..... 1          50,001 - 100,000 units ... 2          20,001 - 50,000 units .... 3          1 - 20,000 units ..... 4          None ..... 5          Unknown ..... 6          Not Applicable* ..... 9</p>	<p>15 k. <u>1993</u></p> <p>&gt;100,000 units ..... 1          50,001 - 100,000 units ... 2          20,001 - 50,000 units .... 3          1 - 20,000 units ..... 4          None ..... 5          Unknown ..... 6          Not Applicable* ..... 9</p>	<p>15 l. <u>1994</u></p> <p>&gt;100,000 units ..... 1          50,001 - 100,000 units ... 2          20,001 - 50,000 units .... 3          1 - 20,000 units ..... 4          None ..... 5          Unknown ..... 6          Not Applicable* ..... 9</p>
<p>15 m. <u>1995</u></p> <p>&gt;100,000 units ..... 1          50,001 - 100,000 units ... 2          20,001 - 50,000 units .... 3          1 - 20,000 units ..... 4          None ..... 5          Unknown ..... 6          Not Applicable* ..... 9</p>	<p>15 n. <u>1996</u></p> <p>&gt;100,000 units ..... 1          50,001 - 100,000 units ... 2          20,001 - 50,000 units .... 3          1 - 20,000 units ..... 4          None ..... 5          Unknown ..... 6          Not Applicable* ..... 9</p>	<p>15 o. <u>1997</u></p> <p>&gt;100,000 units ..... 1          50,001 - 100,000 units ... 2          20,001 - 50,000 units .... 3          1 - 20,000 units ..... 4          None ..... 5          Unknown ..... 6          Not Applicable* ..... 9</p>

**17. Total Heat-Treated Factor IX Received (All Brands). Circle one answer per year.**

<p>17 j. <u>1992</u></p> <p>&gt;100,000 units ..... 1          50,001 - 100,000 units ... 2          20,001 - 50,000 units .... 3          1 - 20,000 units ..... 4          None ..... 5          Unknown ..... 6          Not Applicable* ..... 9</p>	<p>17 k. <u>1993</u></p> <p>&gt;100,000 units ..... 1          50,001 - 100,000 units ... 2          20,001 - 50,000 units .... 3          1 - 20,000 units ..... 4          None ..... 5          Unknown ..... 6          Not Applicable* ..... 9</p>	<p>17 l. <u>1994</u></p> <p>&gt;100,000 units ..... 1          50,001 - 100,000 units ... 2          20,001 - 50,000 units .... 3          1 - 20,000 units ..... 4          None ..... 5          Unknown ..... 6          Not Applicable* ..... 9</p>
<p>17 m. <u>1995</u></p> <p>&gt;100,000 units ..... 1          50,001 - 100,000 units ... 2          20,001 - 50,000 units .... 3          1 - 20,000 units ..... 4          None ..... 5          Unknown ..... 6          Not Applicable* ..... 9</p>	<p>17 n. <u>1996</u></p> <p>&gt;100,000 units ..... 1          50,001 - 100,000 units ... 2          20,001 - 50,000 units .... 3          1 - 20,000 units ..... 4          None ..... 5          Unknown ..... 6          Not Applicable* ..... 9</p>	<p>17 o. <u>1997</u></p> <p>&gt;100,000 units ..... 1          50,001 - 100,000 units ... 2          20,001 - 50,000 units .... 3          1 - 20,000 units ..... 4          None ..... 5          Unknown ..... 6          Not Applicable* ..... 9</p>