MTN-003 Study-Specific Procedures Manual Overview of Section Contents and Identification of Current Section Versions

Section		Current	Current	
Number	Section Title	Version Number	Version Date	Updates and Comments
1	Introduction	2.0	18 FEB 11	• Updated link for FAQs on MTN-003 web page
				Updated email alias list for MTN-003 Safety Physicians
2	Protocol	2.0	18 FEB 11	Substituted Version 2.0 of the protocol
3	Documentation Requirements	2.1	10 JUN 11	• Provided further guidance on chart notes as source documentation in section 3.2.2.
4	Participant Accrual	2.0	18 FEB 11	 Updated relevant sections with new accrual targets and time to complete accrual Modified text in figure 4-1 to indicate PEP provision is for HIV exposure, rather than infection Included guidance on cervical bleeding associated with speculum insertion and/or specimen collection Added Section 4.2.1.1: Assessment of Acute HIV Infection Prior to Enrollment Included option to conduct IC Enrollment prior to confirmation of eligibility In section 4.2.10.2 deleted reference to LOA#1
5	Informed Consent	2.0	18 FEB 11	 Updated references to Version 2.0 of the protocol Included option to conduct IC Enrollment prior to confirmation of eligibility Provided guidance on DAIDS Protocol Registration requirements for updated IC forms Added section 5.6 and appendices 5-4, 5-5, 5-6 to provide guidance on the on-going IC Comprehension Assessment process
6	Participant Follow-Up	2.5	20 DEC 11	 Incorporated guidance from CM #1 Included details and instructions on the study close-out plan Updated guidance on AE management following study exit
7	Visit Checklists	2.0	18 FEB 11	Updated per Version 2.0
8	Participant Retention	2.0	18 FEB 11	 Updated Section 8.2 to include information on how retention rate is calculated Updated Figure 8-1 to include retention targets for study Months 35 and 36 Administrative changes to Section 8.5 related to procedures for participants who voluntarily discontinue participation in the study

9	Study Product Considerations For Non-Pharmacy Staff	2.0	2 MAY 11	 Updated per Version 2.0 Added guidance on gel leakage Updated per VASP guidelines Included the following new sections: 9.6: Dispensing Study Products and Collecting Unused Study Products at In-Home Follow-Up Visits 9.6.1: Delivering Study Products During an In-Home Visit for a Participant Who Left the Clinic Early
10	Clinical Considerations	2.3	10 JUN 11	• Updated flow sheet guidance for 3+ proteinuria, for consistency with protocol
11	Adverse Event Reporting and Safety Monitoring	2.0	18 FEB 11	 Section 11.1.2 updated to expand exceptions to reproductive system AEs, provide guidance for reporting amenorrhea as an AE, include a table for AE terminology for bleeding/pelvic pain in a pregnant participant Figure 11-1 updated to provide further guidance on genital bleeding and hematuria Sections 11.1.3 and 11.1.4 updated to reflect procedures and reporting of SAEs/ EAEs, RCC updated to RSC (throughout the section) Figure 11-3 deleted since all sites will be operating under protocol Version 2.0 Figure 11-5 updated to specify that terminology for RTIs should be based on both clinical evaluation and confirmed laboratory results when applicable Section 11.3 updated to remove guidance for spontaneous abortions and pregnancy losses provided under protocol version 1.0, includes additional guidance related to abnormal pap examinations. Section 11.4 updated to remove guidance on AE relationship categories applicable to protocol version 1.0. Section 11.5 updated to include guidance to update EAE reports submitted to DAIDS RSC if there is a change in assessment of severity of the AE Appendix 11-1 updated to include Devika Singh as a member of the PSRT
12	Counseling Considerations	2.2	22 SEP 11	• Clarified HIV Counseling Messages for sites participating in PBMC Collection, per LoA #1 (Table 12-1b)
13	Laboratory Considerations	2.2	22 SEP 11	• Included PK Hair collection specifications per LoA #02

14	Data Collection	2.0	18 FEB 11	 Updated SCHARP team membership on page 14-1 Section 14.2.1, last bullet, specified priority fax time frames for AE Log and PH Log CRFs Sections 14.2.6 and 14.2.7 – minor updates to date of initialed and dated correction examples Section 14.3.2 – updated references to maximum product use period from 33 to 36 months; updated dates in examples under "Target Days and Visit Windows" and "Missed Visits"; added third paragraph under "Split Visits"; updated examples under "Interim Visits" Table 14-1 - added Month 34-36 visits; added footnotes Table 14-2 - added Month 24-36 visits Section 14.3.3 - updated example under "Visit Codes for Split Visits"; updated example under "Visit Codes for Interim Visits" Table 14-3 - updated visit codes for Monthly, Quarterly, and Semiannual Visits; added Ongoing Informed Consent Comprehension (ICC) form to "as needed" section under Monthly Visits, changed name of Product Returns, and Dispensations form to Product Resupplies and Re-issues (PRD); added Product Returns (PRT) form to Monthly, Quarterly, Semiannual, Annual, and PUEV visits; updated notes under Product Use End Visit and Study Exit Visit Section 14.5 - added third paragraph note; added "When to Skip Product Adherence Questions" section Section 14.6 - added clarification on common data issues noted in data communiqués and in site QC reports to date CRF Table of Contents and CRFs-updated to include ICC, PRD and PRT forms Minor wording and typographical corrections
15	Data Communiqués	2.0	18 FEB 11	Only the footer updated; version 2.0
16	ACASI Users Manual	2.0	18 FEB 11	Updated footers for version 2.0
17	Study Reporting Plan	2.0	18 FEB 11	 Updated SCHARP team membership on page 17-1 Table 17-1- Data QC Report, Distribution Frequency updated to 'every month, or as needed'
18	Bone Mineral Density Substudy	1.2	21 JUL 10	Updated to include MTN-003B Clarification Memo #02 and LOA #01.

19	Household and Community	1.4	26 JAN 12	Revised to reflect CM#04 including update to Group 1
	Factors Associated with			exclusion criteria
	VOICE Product Adherence			 Updated Section 19.5 allowing the signing of the Informed
	Substudy (VOICE-C)			Consent to occur on a different day prior to data collection for
				FGD participants.
				 Updated Section 19.6.1 regarding interview scheduling and
				data collection activities of Group 1 EI participants; there will
				be a minimum of 2 interviews and may be scheduled after the
				participant's VOICE TEV.