

HPTN 035 Gel Resupply Worksheet

Participant ID

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Visit Date

dd		MMM		yy	

Clinic Staff: Applicators are dispensed in cartons of 10 only. At each visit, dispensing must take into account the participant's sexual frequency, supplies remaining from the prior visit(s), and the maximum number of 6 cartons allowed to be dispensed per 26-day period. Before administering this worksheet, complete item 2a based on worksheet item 2c from last visit and information from the participant's most recent behavior assessment form.

1. Now we are going to talk about how much study gel you may need between now and your next visit. Can you tell me how many unopened or full cartons of gel you have left now, and how many you have left that are partially used? *Probe here as needed to help the participant determine her best estimate of remaining supplies.*

1a. Number of unopened/full cartons: → **Clinic Staff:** Multiply by 10: applicators

1b. Number of partially used cartons: → How many individual applicators do you think you have left from these cartons? applicators

+

=

1c. **Clinic Staff:** Add items 1a and 1b to get the number of applicators remaining:..... applicators

2. We want to be sure you have enough applicators so that you can use one each time you have vaginal sex between now and your next visit.

2a. At your last visit you thought you usually had sex about: times per week

Thinking ahead to next month, do you think you will have sex about the same number of times per week, or might you have sex either more or less often than that?
Probe here as needed by asking about, for example, planned partner absences or returns from absences.

about the same → 2b. **Clinic Staff:** Multiply item 2a times 4: times per month

Go to item 3.

more or less often → 2c. How many times per week do you think you will have sex over the next month? times per week

x 4

=

2d. **Clinic Staff:** Multiply item 2c times 4: times per month

2e. That would add up to about (item 2d) _____ times per month. Does that sound about right? yes no → **If no, go to 2c.**

3. **Clinic Staff:** Subtract item 1c from the estimated number of applicators needed for the next month (item 2b or 2d). Record result. **If "00", skip to item 5 and record "01".** applicators

If item 1c is greater than 2b or 2d, participant does not need any additional applicators at this visit. Do not complete a Study Product Request Slip. Go to item 7 on page 2.

