| **Transfer Checklist (Receiving Site)** |
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|  **Procedure** | **Staff Initials and Date** | **Comments:** |
| ***Prior to the visit:*** |
| 1 | **Discuss and agree upon logistical details of the transfer with the transferring site** (e.g. next target visit date, special needs of participant, ongoing AEs, language fluency, participant’s new contact information and location, transport needs/directions to receiving site, etc.). |  |  |
| 2 | **Confirm receipt of written permission to receive copies of the participant study records.** *(NOTE: If the participant has already moved, this may be accomplished by the transferring site faxing the release to the receiving site for completion by the participant.)* |  |  |
| 3 | **Confirm receipt of certified copies of the participant paper study records from the transferring site.**  |  |  |
| 4 | **Confirm that participant casebook is accessible to receiving site within the MTN-025 RAVE clinical database.** |  |  |
| 5 | **Schedule the participant for her next applicable visit at the receiving site.** *Note: The participant’s original PTID and follow-up visit schedule will remain unchanged.* |  |  |
| ***As part of the participant’s first scheduled visit at the receiving site, complete the following additional procedures:*** |
| 6 | **Reconsent the participant using the current version of applicable consents from the receiving site:** * **Enrollment Informed Consent (required)**
* Specimen Storage Consent (if applicable)
* Off Site Visits (if applicable)
* Audio Recording (if applicable)
 |  |  |
| 7 | **Add the participant to the receiving site PTID-name link log**  |  |  |
| 8 | **Complete the Participant Receipt eCRF**  |  |  |
| 9 | **If applicable, (i.e. if the participant chooses to accept study product):** Authorized prescriber to complete a MTN-025 Vaginal Ring Request Slip (or MTN-025 prescription, if this is the participants first time accepting product), as well as a signed and dated note to pharmacy staff at the receiving site stating that:* The participant has provided written informed consent to take part in the study at the receiving site, and
* That the prescriber authorizes the participant to continue study product use per the MTN-025 protocol at the receiving site

*\*Note: if the participant has transferred from a different country, then a new prescription should be completed in lieu of completing the vaginal ring request slip and accompanying note. If more than one ring will need to be dispensed a request slip may also be needed to indicate the quantity.* |  |  |