

Baseline Clinical Information

REDCap Record ID

CAST-NET Study ID: [study_id]

Organization

- ☐ FPD
☐ EpiCentre

Chart Information

Date of site visit for imaging

Imaging at site completed by

Patient chart found in healthcare facility

- ☐ Yes
☐ No - note in enrollment log

Facility

- ☐ Stanza Bopape II Clinic
☐ Olievenhout Ext 13
☐ Atteridgeville
☐ Bophelong
☐ Phomolong
☐ Soshanguve X
☐ Soshanguve 2
☐ Soshanguve TT
☐ Sedilega
☐ Tlamelong
☐ Karenpark
☐ Jack Hindon
☐ Dark City Community Clinic
☐ Stanza Bopape CHC
☐ Kgabo CHC
☐ Soshanguve CHC
☐ Mamelodi Hospital
☐ Tshwane District Hospital
☐ Kalafong Hospital
☐ Jubilee District Hospital
☐ Odi Hospital
☐ Dr. George Mukhari Hospital
☐ Other

FPD PHC

FPD CHC

FPD Hospital

Name of ward where chart found

Patient Information

CrAg test result

- ☐ Positive
☐ Negative
☐ Unknown

(From specimen taken on [crag_date_specimen_taken])

(National) Identity number available?

- ☐ Yes
☐ No

(National) Identity Number

Has the patient visited the facility since the CrAg test? (Any visit after [crag_date_specimen_taken]?)

- ☐ Yes
☐ No or unknown

Date of first facility visit after
[crag_date_specimen_taken]

CrAg specimen to return clinic visit

Patient has died

- ☐ Yes
☐ No or unknown
(If Dead, complete this form, then also mark
Intermediate and Final forms as Incomplete)

Timing of death

- ☐ Exact date known
☐ Exact date unknown

Date of Death

Approximate month of death

(Numerical (1 - Jan, 2 - Feb, etc.))

Approximate year of death

Referral Information

Was the patient referred here from another facility
(since [crag_date_specimen_taken])?

- ☐ Yes
☐ No or unknown

Date of referral (if known)

FPD Facility where patient referred from

- ☐ Stanza Bopape II Clinic
- ☐ Olievenhout Ext 13
- ☐ Atteridgeville
- ☐ Bophelong
- ☐ Phomolong
- ☐ Soshanguve X
- ☐ Soshanguve 2
- ☐ Soshanguve TT
- ☐ Sedilega
- ☐ Tlamelong
- ☐ Karenpark
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- ☐ Mamelodi Hospital
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- ☐ Kalafong Hospital
- ☐ Jubilee District Hospital
- ☐ Odi Hospital
- ☐ Dr. George Mukhari Hospital
- ☐ Other

Referred from PHC

Referred from CHC

Referred from Hospital

Other facility

Has the patient been referred to another facility
(since [crag_date_specimen_taken])?

- ☐ Yes
- ☐ No or unknown

Date of referral (if known)

FPD Facility where patient referred to

- ☐ Stanza Bopape II Clinic
- ☐ Olievenhout Ext 13
- ☐ Atteridgeville
- ☐ Bophelong
- ☐ Phomolong
- ☐ Soshanguve X
- ☐ Soshanguve 2
- ☐ Soshanguve TT
- ☐ Sedilega
- ☐ Tlamelong
- ☐ Karenpark
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- ☐ Stanza Bopape CHC
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- ☐ Soshanguve CHC
- ☐ Mamelodi Hospital
- ☐ Tshwane District Hospital
- ☐ Kalafong Hospital
- ☐ Jubilee District Hospital
- ☐ Odi Hospital
- ☐ Dr. George Mukhari Hospital
- ☐ Other

Referred to FPD PHC

Referred to FPD CHC

Referred to FPD Hospital

Other facility (FPD)

HIV Information

HIV status

- ☐ Positive
- ☐ Negative
- ☐ Unknown

Patient was known to be HIV positive...

([crag_date_specimen_taken] is CrAg specimen date)

- ☐ prior to [crag_date_specimen_taken]
- ☐ starting on [crag_date_specimen_taken]

Had the patient EVER been on ART prior to [crag_date_specimen_taken]?

- ☐ Yes
- ☐ No or unknown

First ART date available

- ☐ Exact ART regimen start date
- ☐ Any ART prescription prior to [crag_date_specimen_taken]
- ☐ No specific date indicated

First ART date

What was the patient's ART status on [crag_date_specimen_taken]?

- ☐ Currently on ART
- ☐ Not currently on ART
- ☐ Unknown

Was the patient initiated/re-initiated on ART on [crag_date_specimen_taken]?

- ☐ Initiated/Re-initiated on ART
- ☐ Not initiated/Delayed
- ☐ Unknown

ART regimen on [crag_date_specimen_taken]

- ☐ TDF+3TC+EFV
- ☐ TDF+FTC+EFV
- ☐ TDF+FTC+NVP
- ☐ TDF+3TC+NVP
- ☐ TDF+FTC+LPV/r
- ☐ TDF+3TC+LPV/r
- ☐ AZT+3TC+EFV
- ☐ AZT+3TC+NVP
- ☐ ABC+3TC+LPV/r
- ☐ ABC+3TC+EFV
- ☐ FDC {fixed dose combination}
- ☐ AZT+3TC +LPV/r
- ☐ AZT+FTC+LVP/r
- ☐ AZT+TDF+3TC+LPV/r
- ☐ TDF+3TC+LPV/r
- ☐ TDF+FTC+LPV/r
- ☐ AZT+ABC+LPV/r
- ☐ Other

Specify other ART regimen

On [crag_date_specimen_taken] the patient was on the ART regimen above. What was the ART status on [clvis_dt]?

- ☐ Continuing same ART regimen
- ☐ Changed ART regimen
- ☐ Stopped ART
- ☐ Unknown

On [crag_date_specimen_taken] the patient was not on ART or their ART status was unknown. What was the ART status on [clvis_dt]?

- ☐ Started ART
- ☐ Not started ART or unknown

ART status at BL

New ART regimen

-
- ☐ TDF+3TC+EFV
 - ☐ TDF+FTC+EFV
 - ☐ TDF+FTC+NVP
 - ☐ TDF+3TC+NVP
 - ☐ TDF+FTC+LPV/r
 - ☐ TDF+3TC+LPV/r
 - ☐ AZT+3TC+EFV
 - ☐ AZT+3TC+NVP
 - ☐ ABC+3TC+LPV/r
 - ☐ ABC+3TC+EFV
 - ☐ FDC {fixed dose combination}
 - ☐ AZT+3TC +LPV/r
 - ☐ AZT+FTC+LVP/r
 - ☐ AZT+TDF+3TC+LPV/r
 - ☐ TDF+3TC+LPV/r
 - ☐ TDF+FTC+LPV/r
 - ☐ AZT+ABC+LPV/r
 - ☐ Other

Specify other ART regimen

Any toxicity noted at time of ART regimen change?

-
- ☐ Yes
 - ☐ No or unknown

Specify ART-related toxicity as per the medical notes

Any virologic failure noted at time of ART regimen change?

-
- ☐ Yes
 - ☐ No or unknown

Any viral load taken on or since
[crag_date_specimen_taken]?

-
- ☐ Yes
 - ☐ No or unknown

Viral load

Any CD4 count taken since [crag_date_specimen_taken]?

-
- ☐ Yes
 - ☐ No or unknown

CD4 count

Absolute CD4

-
- ☐ Yes
 - ☐ No or unknown

Crypto Information

Has the patient ever been diagnosed with cryptococcal meningitis before [crag_date_specimen_taken]?

-
- ☐ Yes
 - ☐ No or unknown

Cryptococcal meningitis diagnosis date known?

-
- ☐ Yes
 - ☐ No or unknown

Cryptococcal meningitis diagnosis date

Were meningitis symptoms noted at first return visit
(on [clvis_dt])?

-
- ☐ Yes
 - ☐ No or unknown

Duration of headache (if applicable)

(in days)

Lumbar puncture ordered on [clvis_dt]?

-
- ☐ Yes
 - ☐ No or unknown

Lumbar puncture done for order on [clvis_dt]?

- ☐ Yes
☐ No or unknown

Was the patient diagnosed with cryptococcal meningitis on [clvis_dt]?

- ☐ Yes
☐ No or unknown

TB Information

Was the patient screened for TB from [crag_date_specimen_taken] to [clvis_dt]?

- ☐ Yes
☐ No or unknown

TB symptoms noted
(check any that apply)

- ☐ Cough (for more than 2 weeks)
☐ Weight loss
☐ Fever
☐ Night sweats
☐ Haemoptysis
☐ Fatigue

Any TB tests done?
(check any that apply)

- ☐ GeneXpert
☐ Microscopy (AFB/acid-fast bacilli)
☐ TB culture
☐ Chest X Ray

Gene Xpert test result

- ☐ positive
☐ negative
☐ unknown

Microscopy (AFB/acid-fast bacilli) test result

- ☐ positive
☐ negative
☐ unknown

TB culture result

- ☐ positive
☐ negative
☐ unknown

Chest X Ray result

- ☐ findings
☐ no findings
☐ unknown

Was the patient diagnosed with TB via clinical determination?

- ☐ Yes
☐ No or unknown

Did the patient receive TB treatment?

- ☐ Yes
☐ No or unknown

TB diagnosis at baseline

Fluconazole Information

Was fluconazole prescribed on [clvis_dt]?

- ☐ Yes
☐ No

Mark any of these statuses that were true about the patient on [clvis_dt]

- ☐ Pregnant
☐ Breastfeeding
☐ Liver disease
☐ Fluconazole out of stock
☐ Other
☐ No documentation

Daily fluconazole dose prescribed on [clvis_dt]

- ☐ 200 mg
☐ 400 mg
☐ 600 mg
☐ 800 mg
☐ 1200 mg
☐ Other

Specify Other Fluconazole dose

(in mg)

Comments

Comments

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