## **Final Clinical Information**

REDCap Record ID

CAST-NET Study ID: [study\_id]

| Chart Information  |   |
|--|---|
| Date of imaging at site  |   |
| Imaging at site completed by   |   |
| Patient chart found in healthcare facility                                     | <ul><li>○ Yes</li><li>○ No - note in enrollment log</li></ul>   |
| Facility   | <ul> <li>Stanza Bopape II Clinic</li> <li>Olievenhout Ext 13</li> <li>Atteridgeville</li> <li>Bophelong</li> <li>Phomolong</li> <li>Soshanguve X</li> <li>Soshanguve 2</li> <li>Soshanguve TT</li> <li>Sedilega</li> <li>Tlamelong</li> <li>Karenpark</li> <li>Jack Hindon</li> <li>Dark City Community Clinic</li> <li>Stanza Bopape CHC</li> <li>Kgabo CHC</li> <li>Soshanguve CHC</li> <li>Mamelodi Hospital</li> <li>Tshwane District Hospital</li> <li>Kalafong Hospital</li> <li>Jubilee District Hospital</li> <li>Odi Hospital</li> <li>Dr. George Mukhari Hospital</li> <li>Other</li> </ul> |
| FPD PHC  |   |
| FPD CHC  |   |
| FPD Hospital   |   |
| Name of ward where chart found   |   |
|  |   |
| Patient Information  |   |
| How many times has the patient visited the facility since [recentclvis_dt_im]? |   |
| Date of first facility visit after<br>[recentclvis_dt_im]                      |   |

Date of most recent facility visit



| Patient has died   | <ul> <li>Yes</li> <li>No or unknown</li> <li>(If Dead, complete this form, then also mark<br/>Intermediate and Final forms as Incomplete)</li> </ul>  |
|--|---|
| Timing of death  | <ul> <li>Exact date known</li> <li>Exact date unknown</li> </ul>  |
| 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 [recentclvis_dt_im])? | <ul><li>○ Yes</li><li>○ No or unknown</li></ul>   |
| Date of referral (if known)  |   |
| FPD Facility where patient referred from   | <ul> <li>Stanza Bopape II Clinic</li> <li>Olievenhout Ext 13</li> <li>Atteridgeville</li> <li>Bophelong</li> <li>Phomolong</li> <li>Soshanguve X</li> <li>Soshanguve 2</li> <li>Soshanguve TT</li> <li>Sedilega</li> <li>Tlamelong</li> <li>Karenpark</li> <li>Jack Hindon</li> <li>Dark City Community Clinic</li> <li>Stanza Bopape CHC</li> <li>Kgabo CHC</li> <li>Soshanguve CHC</li> <li>Mamelodi Hospital</li> <li>Tshwane District Hospital</li> <li>Kalafong Hospital</li> <li>Jubilee District Hospital</li> <li>Odi Hospital</li> <li>Dr. George Mukhari Hospital</li> <li>Other</li> </ul> |
| Referred from PHC  |   |
| Referred from CHC  |   |
| Referred from Hospital   |   |
| Other facility   |   |
| Has the patient been referred to another facility (since [recentclvis_dt_im])?   | <ul><li>○ Yes</li><li>○ No or unknown</li></ul>   |
| Date of referral (if known)  |   |
|  |   |

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| FPD Facility where patient referred to  | <ul> <li>Stanza Bopape II Clinic</li> <li>Olievenhout Ext 13</li> <li>Atteridgeville</li> <li>Bophelong</li> <li>Phomolong</li> <li>Soshanguve X</li> <li>Soshanguve Z</li> <li>Soshanguve TT</li> <li>Sedilega</li> <li>Tlamelong</li> <li>Karenpark</li> <li>Jack Hindon</li> <li>Dark City Community Clinic</li> <li>Stanza Bopape CHC</li> <li>Kgabo CHC</li> <li>Soshanguve CHC</li> <li>Mamelodi Hospital</li> <li>Tshwane District Hospital</li> <li>Kalafong Hospital</li> <li>Jubilee District Hospital</li> <li>Odi Hospital</li> <li>Dr. George Mukhari Hospital</li> <li>Other</li> </ul> |
|---|---|
| Referred to FPD PHC   |   |
| Referred to FPD CHC   |   |
| Referred to FPD Hospital  |   |
| Other facility (FPD)  |   |
|   |   |
| HIV Information   |   |
| HIV status  | <ul> <li>Positive</li> <li>Negative</li> <li>Unknown</li> </ul>   |
| The patient was last noted as on ART. Has the<br>patient's ART regimen changed from<br>[recentclvis_dt_im] to [recentclvis_dt_fl]? (This<br>includes stopping ART)  | <ul> <li>○ Yes</li> <li>○ No or unknown</li> </ul>  |
| Previous regimens (starting with most recent):<br>[art_reg_im_3]<br>[art_reg_im_2]<br>[art_reg_im_1]<br>(If "Other" then refer to Intermediate Form)                |   |
| The patient was last noted as not on ART or ART<br>status was unknown. Has the patient's ART regimen<br>changed from [recentclvis_dt_im] to<br>[recentclvis_dt_fl]? | <ul> <li>Started ART</li> <li>Not started ART or unknown</li> </ul>   |
| How many different ART regimen changes have been<br>prescribed from [clvis_dt] to [recentclvis_dt_fl]?<br>(This includes stopping ART)                              | <ul> <li>○ 1</li> <li>○ 2</li> <li>○ 3 or more</li> </ul>   |
| First ART regimen change  |   |
| Thist ART regimen change  | $\bigcirc$ Stopped ART<br>$\bigcirc$ Started a new ART regimen  |



## First 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 O AZT+ABC+LPV/r ○ Other

Specify other ART regimen

Start date of first new ART regimen

Any toxicity noted at time of first ART regimen change?

Specify ART-related toxicity as per medical notes

Any virologic failure noted at time of first ART regimen change?

Second ART regimen change

ART stop date

Second new ART regimen

Specify other ART regimen

Start date of second new ART regimen

Any toxicity noted at time of second ART regimen change?

Specify ART-related toxicity as per medical notes

○ Yes○ No or unknown

| Ο      | Yes   |   |
|--------|-------|---|
| $\cap$ | No or | ì |

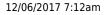
🔿 No or unknown

Stopped ART

○ Started a new ART regimen

O 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 O 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

○ Yes○ No or unknown





Any virologic failure noted at time of second ART regimen change?

Most recent ART regimen change

ART stop date

Most recent ART regimen

○ Yes
 ○ No or unknown

○ Stopped ART

○ Started a new ART regimen

○ TDF+3TC+EFV ○ TDF+FTC+EFV O TDF+FTC+NVP O TDF+3TC+NVP O TDF+FTC+LPV/r O TDF+3TC+LPV/r  $\bigcirc$  AZT+3TC+EFV  $\bigcirc$  AZT+3TC+NVP O ABC+3TC+LPV/r ○ ABC+3TC+EFV O 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

Start date of most recent ART regimen

Any toxicity noted at time of most recent ART regimen change?

Specify ART-related toxicity as per medical notes

Any virologic failure noted at time of most recent ART regimen change?

ART status at FL

Most recent viral load (if available)

Date of most recent viral load

Most recent CD4 count (if available)

Date of most recent CD4

## **Crypto Information**

| Any lumbar punctures ordered from [recentclvis_dt_im]<br>to [recentclvis_dt_fl]? |
|--|
| How many LPs have been ordered from  |

[recentclvis\_dt\_im] to [recentclvis\_dt\_fl]?

Was the first lumbar puncture ordered actually done?

| Date of first | lumbar | puncture |
|---------------|--------|----------|
|---------------|--------|----------|

○ Yes○ No or unknown

○ Yes○ No or unknown

○ Yes○ No or unknown

| Ο | 1 |    |      |
|---|---|----|------|
| Ο | 2 |    |      |
| Õ | 3 | or | more |

○ Yes○ No or unknown



| Was the second lumbar puncture ordered actually done?   | <ul><li>○ Yes</li><li>○ No or unknown</li></ul>   |
|---|---|
| Date of second lumbar puncture  |   |
| Was the most recent lumbar puncture ordered actually done?  | <ul><li>○ Yes</li><li>○ No or unknown</li></ul>   |
| Date of most recent lumbar puncture   |   |
| Has the patient been diagnosed with cryptococcal meningitis?  | <ul><li>○ Yes</li><li>○ No or unknown</li></ul>   |
| Date of cryptococcal meningitis diagnosis   |   |
| TB Information  |   |
| The patient was last recorded as on TB treatment.<br>What is the patient's most recent TB treatment status?   | <ul> <li>Continuing TB treatment</li> <li>Changed TB treatment</li> <li>Stopped TB treatment</li> <li>Unknown</li> </ul>                              |
| The patient was last recorded as "not on treatment"<br>or "unknown". Has the patient been recently<br>diagnosed with TB?  | ○ Yes<br>○ No   |
| What is the patient's TB treatment status?  | <ul> <li>Started TB treatment</li> <li>Not started TB treatment</li> <li>Unknown</li> </ul>   |
| TB status at FL   |   |
| TB Start Date   |   |
| TB Stop Date  |   |
| TB Change Date  |   |
| Fluconazole Information   |   |
| The patient's most recent fluconazole dose was<br>[fluc_im_3] (if "Other" then refer to Intermediate<br>Form). Any new fluconazole doses?<br>(This includes stopping fluconazole) | <ul> <li>○ Yes</li> <li>○ No or unknown</li> </ul>  |
| The patient was last recorded as not on fluconazole.<br>Has the patient recently been prescribed fluconazole?   | <ul><li>○ Yes</li><li>○ No or unknown</li></ul>   |
| Mark any of these statuses that were true about the patient when they recently returned to the clinic   | <ul> <li>Pregnant</li> <li>Breastfeeding</li> <li>Liver disease</li> <li>Fluconazole out of stock</li> <li>Other</li> <li>No documentation</li> </ul> |

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How many different fluconazole doses have been prescribed? (This includes stopping fluconazole)

First new fluconazole dose change

Specify Other Fluconazole dose

Date of first new fluconazole dose change since [recentclvis\_dt\_im]

Mark any of these statuses that were true about the patient when they stopped fluconazole

Specify other

Second new fluconazole dose change

Specify Other fluconazole dose

Date of second new fluconazole dose change since [recentclvis\_dt\_im]

Mark any of these statuses that were true about the patient when they stopped fluconazole

Specify other

Most recent new fluconazole dose change

Specify Other fluconazole dose

Date of most recent new fluconazole dose change since [recentclvis\_dt\_im]

○ 1
 ○ 2
 ○ 3 or more

○ 200 mg○ 400 mg

⊖ 600 mg

○ 800 mg

Ŏ 1200 mg

Not prescribed/prescription stopped

○ Other

(in mg)

Pregnant

Breastfeeding

Liver disease

☐ Fluconazole out of stock ☐ Other

□ No documentation

○ 200 mg

⊖ 400 mg

○ 600 mg

○ 800 mg

○ 1200 mg

O Not prescribed/prescription stopped

○ Other

(in mg)

Pregnant

Breastfeeding

Liver disease

Fluconazole out of stock

Other

No documentation

○ 200 mg

○ 400 mg

⊙ 600 mg

⊙ 800 mg

○ 1200 mg

O Not prescribed/prescription stopped

⊖ Other

(in mg)



-

Mark any of these statuses that were true about the patient when they stopped fluconazole

Pregnant
 Breastfeeding
 Liver disease
 Fluconazole out of stock
 Other
 No documentation

Specify other

Fluconazole status at IM

## Notes

Comments

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