

# Participant-Specific Clinic Study Product Accountability Log

PTID: \_\_\_\_\_

Study (tick one):  MTN-042/DELIVER

MTN-043/B-PROTECTED

PROVIDED					RETURNED						
Ring= R or Tablets = T	Quantity	Date Provided (dd-MMM-yy)	Visit Code	Staff Initials & Date	Ring= R or Tablets = T	Quantity	Date Returned (dd-MMM-yy)	Visit Code	Ring/Tablet Status	Comments (as needed)	Staff Initials & Date
									<input type="checkbox"/> Used ring for destruction: bin # _____ <input type="checkbox"/> Used ring for testing: date to lab _____ <input type="checkbox"/> Unused ring/tablets to pharmacy <input type="checkbox"/> Ring/Tablets not returned		
									<input type="checkbox"/> Used ring for destruction: bin # _____ <input type="checkbox"/> Used ring for testing: date to lab _____ <input type="checkbox"/> Unused ring/tablets to pharmacy <input type="checkbox"/> Ring/Tablets not returned		
									<input type="checkbox"/> Used ring for destruction: bin # _____ <input type="checkbox"/> Used ring for testing: date to lab _____ <input type="checkbox"/> Unused ring/tablets to pharmacy <input type="checkbox"/> Ring/Tablets not returned		
									<input type="checkbox"/> Used ring for destruction: bin # _____ <input type="checkbox"/> Used ring for testing: date to lab _____ <input type="checkbox"/> Unused ring/tablets to pharmacy <input type="checkbox"/> Ring/Tablets not returned		
									<input type="checkbox"/> Used ring for destruction: bin # _____ <input type="checkbox"/> Used ring for testing: date to lab _____ <input type="checkbox"/> Unused ring/tablets to pharmacy <input type="checkbox"/> Ring/Tablets not returned		
									<input type="checkbox"/> Used ring for destruction: bin # _____ <input type="checkbox"/> Used ring for testing: date to lab _____ <input type="checkbox"/> Unused ring/tablets to pharmacy <input type="checkbox"/> Ring/Tablets not returned		
									<input type="checkbox"/> Used ring for destruction: bin # _____ <input type="checkbox"/> Used ring for testing: date to lab _____ <input type="checkbox"/> Unused ring/tablets to pharmacy <input type="checkbox"/> Ring/Tablets not returned		
									<input type="checkbox"/> Used ring for destruction: bin # _____ <input type="checkbox"/> Used ring for testing: date to lab _____ <input type="checkbox"/> Unused ring/tablets to pharmacy <input type="checkbox"/> Ring/Tablets not returned		

**Instructions:** Complete one row for each study product provided to the participant. Record the product (R=ring or T=tablets), Quantity (For tablets, the quantity provided is usually 30), Date Provided, Visit, Staff Initials and Date. When the participant comes to her next visit and the ring and/or tablets are returned, complete the product (R=ring or T=tablets), Quantity (For tablets, document the total number of pills returned), Date Returned, and Visit. This information should also be recorded in the event of an off-site visit if the ring or tablets are collected. Recording the Ring/Tablet Status: If a ring is returned and set aside for destruction, check the box for that option and record the destruction bin #. If a ring is returned and set aside for testing, check the box for that option and record the date the ring was sent to the lab. If an unused ring or tablets were returned, check the box for that option and return the ring/tablets to the pharmacy on the same day. If a ring/tablets is not returned as expected, check the box for that option. Record Staff Initials and Date. Update if the ring/tablets is returned at a later date. All entries must be made in dark ink. Corrections may be made by drawing a single line through incorrect entries, entering correct information, and initialing and dating the correction.