

b. Genitalia (Male)	<input type="radio"/> Stage 1 <input type="radio"/> Stage 2 <input type="radio"/> Stage 3 or greater
c. Pubic Hair (both)	<input type="radio"/> Stage 1 <input type="radio"/> Stage 2 <input type="radio"/> Stage 3 or greater
D. PREGNANCY MONITORING	
1. If FEMALE, does the participant have reproductive potential?	<input type="radio"/> Yes <input type="radio"/> No
2. Is the female participant sexually active?	<input type="radio"/> Yes <input type="radio"/> No
If YES to question D1 above, continue (If not, proceed to Section E.)	
a. Does she currently use a form of birth control?	<input type="radio"/> Yes <input type="radio"/> No
b. Does she plan on becoming pregnant in the next 6 months?	<input type="radio"/> Yes <input type="radio"/> No
c. Was urine pregnancy test completed at this visit?	<input type="radio"/> Yes <input type="radio"/> No
If yes, 1) was the test result positive?	<input type="radio"/> Yes <input type="radio"/> No
E. COMPLIANCE	
How many doses has the participant missed since the last study visit?	<input type="text"/>
Is the participant currently taking study drug?	<input type="radio"/> Yes <input type="radio"/> No
F. PROCEDURES PERFORMED	
The following procedures should be performed during this visit:	
1. Lifestyle Questionnaire	<input type="radio"/> Yes <input type="radio"/> No <input type="text"/> <input type="text"/> <input type="text"/> dd/mmm/yyyy
2. Dispensation/return of study drug (if YES, complete the Study Drug Dispensation and Return Form - OT14)	<input type="radio"/> Yes <input type="radio"/> No <input type="text"/> <input type="text"/> <input type="text"/> dd/mmm/yyyy