| **MTN-032 PTID:** | **FGD No.:** | **Visit Date:** |
| --- | --- | --- |
|  |  |
| **Initials** | **Procedures** |
| **Participant Arrival, IC & Data Collection** |
|  | Confirm participant identity |
|  | **INCLUSION CRITERIA** Confirm eligibility criteria:* HOPE PTID for female partner included on Recruitment List from SCHARP

[*MP Inclusion criteria 1*]* HOPE participant provided permission to contact this male partner *[according to HOPE study exit & permission to contact forms; MP Inclusion criteria 1 and 2]*
* Is above the age of 18 at the time of study participation *[per participant ID or locator information; MP Inclusion criteria 5]*
 |
|  | **INCLUSION CRITERIA – Informed Consent**Explain, conduct, and document informed consent process per site SOPs:* Willing and able to provide written informed consent ⇒ CONTINUE, have participant sign ICF, collect signed form, and offer a copy for participant to take home. [*MP Inclusion criteria 3 and 4*]

or* NOT willing and able to provide written informed consent ⇒ STOP, provide participant reimbursement and thank him for his time. Document in PSF and participant file notes.
 |
|  | **EXCLUSION CRITERIA** * Participant **DOES NOT** have any condition that, in the opinion of the IoR/designee, would preclude informed consent, make study participation unsafe, complicate interpretation of study outcome data, or otherwise interfere with achieving the study objectives.

 **ELIGIBLE ⇒ CONTINUE.*** Participant has any condition that, in the opinion of the IoR/designee, would preclude informed consent, make study participation unsafe, complicate interpretation of study outcome data, or otherwise interfere with achieving the study objectives.

[*Exclusion criteria 1*] ⇒ **NOT ELIGIBLE ⇒ STOP**. Document in Participant Status Form (PSF) and participant file notes. |
|  | * Administer Demographic Information Form (DEM)
* Administer Behavioral Assessment Form (BA)
 |
|  | Alert the participant that he will now be joining the FGD with other participants. |
|  **Post FGD (Immediately following FGD)** |
|  | Complete PSF |
| **Comments**: *Initial and date all comments.*       |