

Note that fields marked with \* are required for completion and fields marked with \*\* will provide valuable additional information if completed. Please submit the completed form to [IPM-safety@arriello.com](mailto:IPM-safety@arriello.com)

### Patient Details

Date of Birth:

\*Age:

Country:

Sex: Female

### Event Type: (Report one event type per form)

HIV Infection

Pregnancy

Side-effect

Other

### Event details:

\*Description of Event:

(Provide the details of the event you are reporting. If available, include relevant medical history of the patient, laboratory or diagnostic test results associated with the event and treatment provided)

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\*\*Seriousness: Choose an item.

(Did the side effect result in any of the following? Complete only when reporting side effects)

Date Side-effect(s) Started:

Date Side-effect(s) Stopped:

\*\*Side Effect Outcome:  Recovered

Ongoing/Not Recovered

Recovering  
(improvement in condition)

Death

Unknown

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Recovered with other consequences:

**Product Details:**

\*Product Name: Dapivirine Vaginal Ring (25mg)

Reason (indication) for use: HIV Prevention

Batch Number:

Expiration Date:

Administration Route: Vaginal

Dose Details:

Date of most recent product administration:

Date product use was stopped:

Action taken with product after occurrence of side-effect(s): Choose an item.

Was product re-introduced after the first occurrence of side effect(s)? Choose an item.

Did side effect(s) reoccur after re-introduction of product? Choose an item.

**Other Medication Taken:**

Product Name	Reason (indication) for use	Dose	Date Started	Date Stopped

**Reporter Details:**

\*Name of Reporter:

\*Healthcare Professional: Choose an item.

Occupation:

Telephone Number:

\*\*Email:

Address:

\*Can reporter be contacted in case further information are required? Choose an item.

Note: By submitting this document, you agree to allow the International Partnership for Microbicides (IPM) and its affiliates to process and store the personal data provided herein only for the purposes of reporting safety information. Personal data are collected, processed, and stored as outlined in our [privacy policy](#).

## Safety Reporting Form

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Date

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Signature