

## GENOTYPISCHE RESISTENZBESTIMMUNG - HIV

**MATERIAL:** 3 ML EDTA-BLUT (Bei VL ≤ 1500 COP/ML BITTE 10 ML EDTA-BLUT !)

**PATIENTENDATEN:**

|                                                                   |                     |                     |
|-------------------------------------------------------------------|---------------------|---------------------|
| Name: _____                                                       | Vorname: _____      | Geburtsdatum: _____ |
| Geschlecht: m <input type="checkbox"/> w <input type="checkbox"/> | CD4-Zellzahl: _____ | Viruslast: _____    |
| Datum der Blutabnahme: _____                                      |                     |                     |

**KLINISCHE EINSTUFUNG:**

|                                           |                                        |
|-------------------------------------------|----------------------------------------|
| <input type="checkbox"/> therapienaiv     | <input type="checkbox"/> compliant     |
| <input type="checkbox"/> Therapieversager | <input type="checkbox"/> non-compliant |

**THERAPIEHISTORIE, KUMULATIV (alle antiretroviralen Medikamente bisher):**

|                                                       |                                                         |                                                                             |                                                        |
|-------------------------------------------------------|---------------------------------------------------------|-----------------------------------------------------------------------------|--------------------------------------------------------|
| <b>NRTI/NtRTI</b>                                     | <b>NNRTI</b>                                            | <b>PI</b>                                                                   | <b>Entryinh.</b>                                       |
| <input type="checkbox"/> AZT (Retrovir <sup>®</sup> ) | <input type="checkbox"/> EFV (Sustiva <sup>®</sup> )    | <input type="checkbox"/> APV/FPV (Agen. <sup>®</sup> ;Telzir <sup>®</sup> ) | <input type="checkbox"/> ENF (Fuzeon <sup>®</sup> )    |
| <input type="checkbox"/> DDI (Videx <sup>®</sup> )    | <input type="checkbox"/> DLV (Rescriptor <sup>®</sup> ) | <input type="checkbox"/> IDV (Crixivan <sup>®</sup> )                       | <input type="checkbox"/> MVC (Celsentri <sup>®</sup> ) |
| <input type="checkbox"/> D4T (Zerit <sup>®</sup> )    | <input type="checkbox"/> NVP (Viramune <sup>®</sup> )   | <input type="checkbox"/> NFV (Viracept <sup>®</sup> )                       |                                                        |
| <input type="checkbox"/> ABC (Ziagen <sup>®</sup> )   | <input type="checkbox"/> ETR (TMC125)                   | <input type="checkbox"/> SQV (Invirase <sup>®</sup> )                       | <b>Integraseinh.</b>                                   |
| <input type="checkbox"/> 3TC (EpiVir <sup>®</sup> )   |                                                         | <input type="checkbox"/> LPV (Kaletra <sup>®</sup> )                        | <input type="checkbox"/> RAL (Isentress <sup>®</sup> ) |
| <input type="checkbox"/> TDF (Viread <sup>®</sup> )   |                                                         | <input type="checkbox"/> ATV (Reyataz <sup>®</sup> )                        | <input type="checkbox"/> EVG (GS-9137)                 |
| <input type="checkbox"/> FTC (Emtriva <sup>®</sup> )  |                                                         | <input type="checkbox"/> TPV (Aptivus <sup>®</sup> )                        |                                                        |
| <input type="checkbox"/> DDC (Hivid <sup>®</sup> )    |                                                         | <input type="checkbox"/> DRV (Prezista <sup>®</sup> )                       |                                                        |
|                                                       |                                                         | <input type="checkbox"/> RTV (Norvir <sup>®</sup> )                         |                                                        |
| <input type="checkbox"/> sonstige: _____              |                                                         | <input type="checkbox"/> rtv (Norvir <sup>®</sup> , "Booster")              |                                                        |

**LETZTE THERAPIE VOR GENOTYPISIERUNG:**

|                                                       |                                                       |                                                                |                                                        |
|-------------------------------------------------------|-------------------------------------------------------|----------------------------------------------------------------|--------------------------------------------------------|
| <b>NRTI/NtRTI</b>                                     | <b>NNRTI</b>                                          | <b>PI</b>                                                      | <b>Entryinh.</b>                                       |
| <input type="checkbox"/> AZT (Retrovir <sup>®</sup> ) | <input type="checkbox"/> EFV (Sustiva <sup>®</sup> )  | <input type="checkbox"/> FPV (Telzir <sup>®</sup> )            | <input type="checkbox"/> T-20 (ENV)                    |
| <input type="checkbox"/> DDI (Videx <sup>®</sup> )    | <input type="checkbox"/> NVP (Viramune <sup>®</sup> ) | <input type="checkbox"/> IDV (Crixivan <sup>®</sup> )          | <input type="checkbox"/> MVC (Celsentri <sup>®</sup> ) |
| <input type="checkbox"/> D4T (Zerit <sup>®</sup> )    | <input type="checkbox"/> ETR (TMC125)                 | <input type="checkbox"/> NFV (Viracept <sup>®</sup> )          |                                                        |
| <input type="checkbox"/> ABC (Ziagen <sup>®</sup> )   |                                                       | <input type="checkbox"/> SQV (Invirase <sup>®</sup> )          | <b>Integraseinh.</b>                                   |
| <input type="checkbox"/> 3TC (EpiVir <sup>®</sup> )   |                                                       | <input type="checkbox"/> LPV (Kaletra <sup>®</sup> )           | <input type="checkbox"/> RAL (Isentress <sup>®</sup> ) |
| <input type="checkbox"/> TDF (Viread <sup>®</sup> )   |                                                       | <input type="checkbox"/> ATV (Reyataz <sup>®</sup> )           | <input type="checkbox"/> EVG (GS-9137)                 |
| <input type="checkbox"/> FTC (Emtriva <sup>®</sup> )  |                                                       | <input type="checkbox"/> TPV (Aptivus <sup>®</sup> )           |                                                        |
|                                                       |                                                       | <input type="checkbox"/> DRV (Prezista <sup>®</sup> )          |                                                        |
| <input type="checkbox"/> sonstige: _____              |                                                       | <input type="checkbox"/> rtv (Norvir <sup>®</sup> , "Booster") |                                                        |

**BESTIMMUNG/VORHERSAGE DES KOREZEPTORTROPISMUS (10 ML EDTA):**

|                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Ausschluss von CXCR4-tropen Viren im Vorfeld eines MVC (Celsentri <sup>®</sup> ) Einsatzes |
|---------------------------------------------------------------------------------------------------------------------|

Die Untersuchungsanforderung setzt zur Einstellung der Sequenzierreaktion eine parallele HIV-Viruslastbestimmung voraus.

Unterschrift u. Stempel des Auftraggebers