

Veterans Aging Cohort Study (VACS)
CAUSE OF DEATH FORM

Study ID:

Date of Death: / /

Provider:

Date of Form: / /

1. In your best clinical judgement,
- | | <u>I</u> Immediate
Cause of
Death | <u>C</u> Contributing
Cause of
Death | Not a
Cause of
Death | |
|--|--|--|----------------------------|--|
| - Was the death caused by HIV/AIDS? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | If Immediate or Contributing, please complete #4 |
| - Was the death caused by drug toxicity? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | If Immediate or Contributing, please complete #5 and 6 |
| - Was the death caused by Non-HIV comorbid conditions? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | If Immediate or Contributing, please complete #5 |
| - Information regarding Cause of Death is currently unavailable. | <input type="radio"/> | | | |
| - Was autopsy performed? | <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown | | | |

2. Did the patient refuse to start or choose to discontinue ART? Yes No Unknown

3. Did the patient or their surrogate choose to discontinue life sustaining treatment? Yes No Unknown

4. Contributing HIV/AIDS cause of death (fill circle for all that apply): (I = Immediate, C = Contributing)

- | | |
|---|--|
| <u>I</u> <input type="radio"/> <u>C</u> <input type="radio"/> Candidiasis, esoph/bronch/trach | <u>I</u> <input type="radio"/> <u>C</u> <input type="radio"/> KS |
| <input type="radio"/> <input type="radio"/> Carcinoma, invasive cervical | <input type="radio"/> <input type="radio"/> Lymphoma |
| <input type="radio"/> <input type="radio"/> Coccidioidomycosis | <input type="radio"/> <input type="radio"/> MAC, disseminated |
| <input type="radio"/> <input type="radio"/> Cryptococcosis | <input type="radio"/> <input type="radio"/> M tuberculosis |
| <input type="radio"/> <input type="radio"/> Cryptosporidiosis | <input type="radio"/> <input type="radio"/> PCP |
| <input type="radio"/> <input type="radio"/> CMV Disease | <input type="radio"/> <input type="radio"/> Pneumonia (Bacterial, recurrent) |
| <input type="radio"/> <input type="radio"/> Dementia/Encephalopathy | <input type="radio"/> <input type="radio"/> PML |
| <input type="radio"/> <input type="radio"/> Herpes Simplex Disseminated | <input type="radio"/> <input type="radio"/> Salmonella septicemia |
| <input type="radio"/> <input type="radio"/> Histoplasmosis | <input type="radio"/> <input type="radio"/> Toxoplasmosis |
| <input type="radio"/> <input type="radio"/> Isosporiasis | <input type="radio"/> <input type="radio"/> Wasting |
| | <input type="radio"/> <input type="radio"/> AIDS, unspecified |

