

**Women Alive Coalition**  
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*Please note: Information and resources included with our newsletter are for informational purposes only and do not constitute any endorsement or recommendation of, or for, any medical treatment or product by Women Alive. With regard to medical information, Women Alive recommends that any and all medical treatment you receive or engage in be discussed thoroughly and frankly with a competent, licensed, and fully HIV/AIDS informed medical practitioner, preferably an HIV specialist and/or your personal physician.*

### Dear Debbie Question or Concern

1. If you want a direct response to your question, please include your name and address.
2. Confidentiality, your name or any other information that you may include on this form, will NOT be released within the column or to any individual. It will remain confidential.
3. Once Women Alive receives your question, it will become the property of Women Alive and will not be returned to you.
4. The response to your concerns may not be directed to you individually, if many other women express the same concerns. It may be a generic (addressed to everyone) response.
5. Please keep your question short and clear. Please write clearly.
6. Remember, all questions are important and if you thought of it, so have many others.

**Name:** \_\_\_\_\_

**CD4 count:** \_\_\_\_\_

*(Optional)*

**Address:** \_\_\_\_\_

**HIV RNA:** \_\_\_\_\_

*(Optional)*

**Age:** \_\_\_\_\_

**Medications:** \_\_\_\_\_

*(Optional)*

### Concerns:

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