**Newly Diagnosed HIV Patient at CCI Detailed Workflow**

1. **HIV antibody ( INSTI rapid ) result is positive**
2. Inform patient of positive/reactive HIV antibody test result
3. Discuss next steps with patient informing them of the following:
	* 1. A confirmatory test ( venous ) will need to be drawn by the lab today
		2. A follow-up appointment will be scheduled in 3 days to give results and determine next steps
4. Inform provider of positive/reactive HIV antibody result
5. Provider orders confirmatory HIV test ( antigen test)(4th generation)
6. Schedule follow-up visit and escort patient to lab for confirmatory test
7. Inform BH staff person onsite, inform them of the following pieces of information.
	* 1. The patient has a preliminary HIV+ result
		2. The patient’s next appointment
8. If a BH person is not onsite, inform the BH Director of the following pieces,
	* 1. A patient has a preliminary rapid HIV+ result
		2. Request that a BH person be onsite to assist if the confirmatory result is positive.
		3. The date of the patient’s next appointment
9. Send a Microsoft Teams message to the HIV/ID Team ( CHW/RNCC ) and inform them of the preliminary HIV+ result, the date of the patient’s appointment, and other relevant medical information.
10. Document the HIV antibody result within patient chart, the conversation with BH, the conversation with HIV/ID team, and the next steps into a Telephone Encounter (TE) with eCW. Assign the TE to the HIV/ID Team and the Infectious Disease Director.
11. **Patient returns in 3 days for confirmatory test results**
	1. Staff member who administered test notifies onsite BH staff member
	2. ID Team is contacted and made aware of potential new HIV diagnosis
	3. Staff member coordinates telehealth visits between pt. site nurse and ID care team to take place when pt. comes in for confirmatory lab results with the Registered Nurse.
	4. Staff member documents this exchange (TE) and addresses it to the ID care team
	5. ID staff member shares w/pt. the upcoming steps leading up to apt (What to expect)(labs)
12. **Pt. returns for HIV confirmatory test results (Results is positive)**
	1. Nurse shares the results of the “HIV Screen 4th Generation “test results to pt. in person.
	2. Nurse must contact the ID care team directly either by teams or phone for tele visit to provide warm hand off for pt. and schedule first ID program apt. (aim to schedule within 1 week)
		1. Schedule w/ID Provider | ID RNCC | ID CHW ( must be on each schedule )
	3. ID RNCC does initial intake of newly Dx pt.
		1. Name | DOB | Contact Information |What to expect | What to Bring
	4. Nurse/Provider runs additional labs, in preparation for first ID Program apt.
	5. Nurse or provider fills out and completes the DHMH 1140 form for the county/state and sends to state (fax).



1. **Pt. arrives for initial HIV visit**
	1. Patient arrives and checks in with the PR (front staff)
		1. Provides; identification, insurance (if available), proof of income (sliding fee if needed )
2. **Medical Assistant (MA)**
	1. Warm welcome and introduction
	2. Confirms pt. identification
	3. Conducts triage (adult visit workflow)
	4. Warm hand off to provider
3. **Infectious Disease (ID) Provider**
	1. Warm welcome and introduction
	2. Provider intake
		1. HPI | medical history | medication history/allergies | previous medical history
		2. Sexual history | revision of laboratory results
		3. Patient education
		4. Provider treatment initial treatment (if needed)
		5. Review next steps
		6. Provider calls in prescription to pharmacy
		7. Medical Assistant (MA) in room will schedule follow up for pt.
		8. Warm hand of to ID RNCC
4. **ID Registered Nurse Care Coordinator (RNCC)**
	1. Warm welcome and introduction
	2. Nursing intake and assessment(s)
		1. Chief Complaint
		2. Documentation of medication list (current and past)
		3. Overall HIV education recap
		4. Confirm contact information, pharmacy
	3. HIV Care Management
		1. Review of Care Management (CM)
		2. Agreement and enrollment (sign, document, scan into pt. chart)
		3. Schedule pt. for first CM apt. (both ID RNCC and ID CHW) ( 30 min each )
		4. Review next steps ( what to expect/next visit )
	4. Warm hand off to ID CHW
	5. RNCC begin enrollment process within ECW Population Health Module ( if they agree to CM )
5. **ID Community Health Worker (ID CHW)**
	1. Warm welcome and introduction
	2. CHW Intake and assessment(s)
		1. Patient needs ( MADAP,ins, sliding fee, community resources, connection to care )
	3. Schedule Care Management apt (align with ID RNCC CM apt.) ( 30 mins. )
	4. Introduction to BH ( if available )
	5. Review next steps
	6. Walk pt. to the front for check out process