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# Expanding HIV Screening in the UNMH Emergency Department

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## Background

- Access to HIV screening, diagnosis, and treatment may be limited in resource-constrained healthcare settings.
- US Centers for Disease Control and Prevention recommends routine HIV screening for patients aged 13-64.
- US Preventive Services Task Force recommends routine HIV screening for all patients at increased risk for HIV infection and for all pregnant women.
- New Mexico ranks 34<sup>th</sup> in the US in the rate of HIV diagnoses per year compared to 4<sup>th</sup> for chlamydia, 20<sup>th</sup> for syphilis and 22<sup>nd</sup> for gonorrhea.
- **HIV infection may be underdiagnosed in New Mexico, and patients with HIV infection may be at risk for delayed diagnosis and treatment due to limited screening options.**

## Initial Assessment

- **Clinical Challenges:** Prior to 2018, there was no rapid HIV testing available in the UNMH ED.
- **Barriers to Care:** There was no mechanism for follow-up of HIV laboratory testing obtained in the ED, resulting in reluctance to order HIV testing if a patient might be discharged from the ED prior to the availability of results.
- **Prior Solutions Attempted:** Patients at highest risk for HIV infection were referred to the NM Department of Health to receive testing. These referrals were not consistent and follow-up could not be ensured.

## Choice of Solution

Two domains for infrastructural improvement were identified:

- Availability of rapid HIV screening in the ED
- Establishment of mechanisms to follow-up HIV test results and to connect patients with positive HIV tests to ongoing care.

Improvements across both domains were implemented.

## Implementation



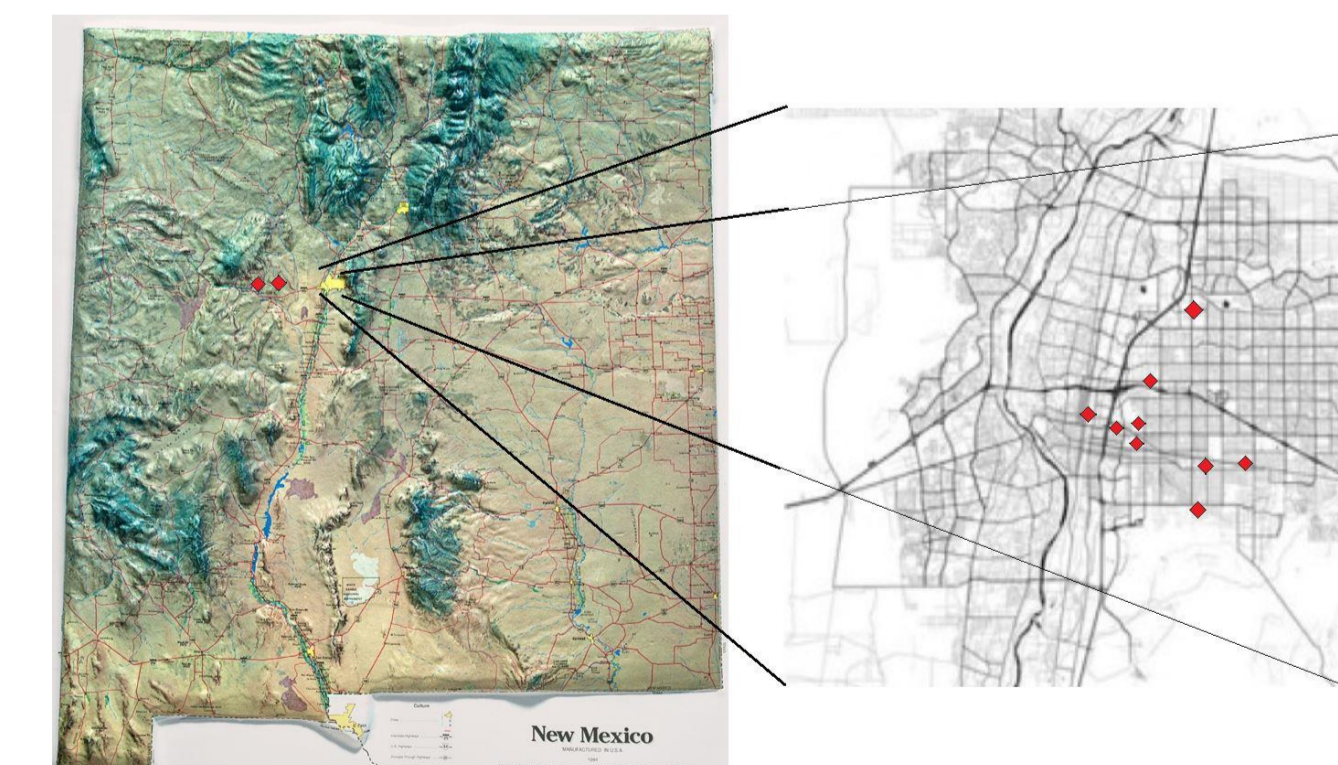
**Figure 1.** Establishment of a rapid, point-of-care (POC) HIV testing protocol, with reflex confirmatory laboratory testing



**Figure 2.** Implementation of an ED nurse-driven protocol for follow-up of positive confirmatory HIV tests after ED discharge



**Figure 3.** Establishment of a 24/7 connect-to-care line for care coordination and referral between the ED and Truman Health Services



**Figure 4.** Recruitment of 7 area clinics to provide HIV care for patients with a positive screening test (+3 additional clinics to provide HIV preventive care)

## Evaluation

- **HIV rapid testing and confirmatory testing is now in use in the UNMH ED, including all items shown in Figures 1-4.**
- A REDCap “tracker” tool has confirmed that one or more outpatient clinics evaluated patients for follow-up after HIV screening. No patients were directly identified by this tool.
- **Next Steps:**
  - Ongoing clinical quality improvement to optimize follow-up mechanisms and strengthen connections to care
  - Interrupted time-series analysis to evaluate trends in HIV testing and diagnosis before and after implementation of this quality improvement project

## Acknowledgments

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- Saadatzadeh T, et al. The IN-STEP Project: Improving Access to HIV Prevention for Patients Evaluated After Sexual Assault Using a Multidisciplinary, Patient-Centered Approach. Poster presented at University of New Mexico Health Sciences Center Quality Improvement and Patient Safety Symposium in February 2019, Albuquerque, NM and the New Mexico HIV & HCV Update Conference in April 2019, Albuquerque, NM. Oral presentation by T. Saadatzadeh at the American College of Physicians Internal Medicine Annual Meeting in April 2019, Philadelphia, PA.

**Disclosure:** Authors of this presentation have no financial or personal relationships with commercial entities that have a direct or indirect interest in the subject matter of this presentation to disclose