

Figure 1. Protocol for Rapid Antiretroviral Therapy Initiation

Identify Rapid ART Candidates	Counseling and Education	Assess and Refer	Baseline Lab Testing	Initiate ART	Payment Assistance?	Follow-Up	Adjust ART
<p>Candidates have:</p> <ul style="list-style-type: none"> ▪ A new reactive POC HIV test result, new HIV diagnosis, acute HIV, or known HIV, <i>and</i> ▪ No or limited prior ARV use, <i>and</i> ▪ No medical conditions or OIs that require deferral of ART initiation 	<ul style="list-style-type: none"> ▪ HIV diagnosis ▪ Disclosure ▪ Adherence ▪ Side effects and management of ▪ Management of lifelong medications 	<ul style="list-style-type: none"> ▪ Health literacy ▪ Identify and address medical and psychosocial barriers to treatment and adherence ▪ As indicated, refer for substance use treatment, behavioral health services, housing assistance 	<ul style="list-style-type: none"> ▪ Confirm HIV diagnosis ▪ Viral load ▪ Resistance testing ▪ CD4 count ▪ HAV, HBV, HCV testing ▪ Metabolic panel ▪ STIs ▪ Urinalysis ▪ Pregnancy test for individuals of childbearing potential 	<ul style="list-style-type: none"> ▪ Choose a preferred regimen based on patient characteristics and preference ▪ Initiate ART immediately—preferably on the same day—or within 96 hours ▪ Administer the first dose on site if possible 	<ul style="list-style-type: none"> ▪ Assess need for payment assistance ▪ Refer patients with no insurance to NYS UCP ▪ Provide resources for payment assistance 	<ul style="list-style-type: none"> ▪ Contact the patient within 24 to 48 hours by phone (or other preferred method) ▪ Assess medication tolerance and adherence ▪ If feasible, schedule in-person visit with medical care provider within 7 days ▪ Reinforce adherence 	<ul style="list-style-type: none"> ▪ Change or adjust the initial ART regimen based on results of initial lab and resistance testing