



CLINICAL GUIDELINES PROGRAM

NEW YORK STATE DEPARTMENT OF HEALTH AIDS INSTITUTE | HIV · HCV · SUBSTANCE USE · LGBT HEALTH

Comprehensive Primary Care for Adults With HIV

February 2021

Table 2: Psychosocial, Behavioral Health, Sexual Health, and Well-Being Assessment of Adults With HIV				
*Frequency Key: I = initial (baseline) visit; A = annual visit; N = as needed				
Assessment	To Include	Frequency*		
		I	A	N
<i>Gender and Sexual Identity</i>				
Gender identity	<ul style="list-style-type: none"> Current gender identity and sex assigned at birth Pronouns 	I	A	N
Current sexual identity	<ul style="list-style-type: none"> History of sexual identity 	I	A	N
Gender transition	<ul style="list-style-type: none"> Gender transition goals; successes and challenges History of, planned, or desired gender-affirming surgery Current, past, or planned use of gender-affirming hormones Source of gender-affirming hormones Adverse effects of gender-affirming treatments 	I		
Inventory of sexual organs	<ul style="list-style-type: none"> Presence or absence of penis, testes, prostate, breasts, vagina, cervix, uterus, ovaries, and determination of patient's preferred terms for body parts 	I	A	N
<i>Current Psychosocial Status and History</i>				
Housing	<ul style="list-style-type: none"> Housing stability or connection to resources if housing is unstable Relocation plans <input checked="" type="checkbox"/> Monitor for signs of instability. 	I	A	N
Family and other significant relationships and responsibilities	<ul style="list-style-type: none"> Immediate and extended family members as defined by the patient Significant relationships Disclosure status Financial and care-giving dependents, including children, spouse or life partner, aging parents, and extended or chosen family members Community support, including functional needs and agency or family assistance Transportation Pets in home <input checked="" type="checkbox"/> Monitor for signs of instability. 	I	A	
Interpersonal and social support network	<ul style="list-style-type: none"> Members of the patient's primary interpersonal and social support network People to whom the patient has disclosed their HIV status Discussion of experienced and perceived stigma <input checked="" type="checkbox"/> Monitor for signs of instability. 	I	A	N
Employment	<ul style="list-style-type: none"> Current employment status or employment goals Access to financial support if unemployed or under-employed Employment-associated risks to health or well-being, including stigma and discrimination 	I	A	
Medical insurance	<ul style="list-style-type: none"> Access to private medical insurance, Medicaid, ADAP, or Medicare Prescription coverage Hospitalization coverage Access to resources for coverage if uninsured 	I	A	N

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Incarceration	<ul style="list-style-type: none"> History of incarceration Probation, parole, and other legal status 	I		
End-of-life planning	<ul style="list-style-type: none"> Documented healthcare proxy Documented preferences for end-of-life care and living will Long-term care plans 	I	A	
<i>Current Mental Health Status and History</i>				
Mental illness	<ul style="list-style-type: none"> History of mental illness and treatment Adverse reactions to medications History of psychiatric hospitalization Suicide risk assessment and past history of suicide attempts Family history <input checked="" type="checkbox"/> See <i>Depression: Screening and Diagnosis</i>; assess mental health using standardized tools, such as <i>The Patient Health Questionnaire-2 (PQH-2)</i>, <i>The Patient Health Questionnaire-9 (PQH-9)</i>, and the <i>Columbia-Suicide Severity Rating Scale (C-SSRS)</i>. 	I	A	
Trauma	<ul style="list-style-type: none"> History of trauma, including domestic violence; physical, verbal, sexual, or emotional abuse; or witnessed trauma History or current experience of elder abuse Any effects on current function and coping strategies 	I	A	N
Stress	<ul style="list-style-type: none"> Current major stressors Stress management and coping skills Current experience or history of HIV-associated or other stigmas 	I	A	N
<i>Current Substance Use and History</i>				
Alcohol	<ul style="list-style-type: none"> History of use, including use disorder diagnosis and treatment Adverse reactions to medications Screening for current use; if indicated, perform risk assessment using standardized tools. See the NYSDOH AI guideline <i>Substance Use Screening and Risk Assessment in Adults</i>. <input checked="" type="checkbox"/> If indicated, implement a <i>harm reduction treatment plan</i>. 	I	A	N
Tobacco use and vaping	<ul style="list-style-type: none"> Current level of tobacco use and type History of use and prior treatment Adverse reactions to medications <input checked="" type="checkbox"/> Smoking prevalence is high in people with HIV [Pacek and Cioe 2015]. 	I	A	N
Use of nonprescription drugs and misuse of prescribed drugs	<ul style="list-style-type: none"> All types of drug use, including misused prescription medications History of use, including use disorder diagnosis and treatment Route of use History of overdose Screening for current use; if indicated, perform risk assessment using standardized tools. See the NYSDOH AI guideline <i>Substance Use Screening and Risk Assessment in Adults</i>. <input checked="" type="checkbox"/> If indicated, implement a <i>harm reduction treatment plan</i>. 	I	A	N

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<i>Sexual and Reproductive Health and History</i>				
Sex partner(s) and activity	<ul style="list-style-type: none"> • Current sex partner(s) • HIV, ART, and viral load status of partner(s), if known; PrEP and other measures to prevent STIs used by partner(s) • Frequency of and preferred sexual activities; challenges • History of sexual dysfunction • History of or current engagement in transactional sex ☑ NYSDOH AI Resources: <i>GOALS Framework for Sexual History Taking in Primary Care, U=U Guidance for Implementation in Clinical Settings</i> 	I	A	N
Sexually transmitted infections	<ul style="list-style-type: none"> • History of and treatment for syphilis, gonorrhea, chlamydia, human papillomavirus, and other STIs • Source of prior treatment for any STI • Assessment of ongoing risk factors and implementation of harm or risk reduction plan if indicated; use of condoms or other barrier protection ☑ Screening should include all potentially exposed sites. For evidence-based recommendations, see the NYSDOH AI guideline <i>Management of Syphilis in Patients with HIV > Screening and Update to the CDC's Treatment Guidelines for Gonococcal Infection, 2020</i>. 	I	A	N
Reproductive history	<ul style="list-style-type: none"> • Offspring • Previous failed attempts at reproduction • Previous treatment for reproductive issues and source • Adverse effects • Contraceptive history • Previous abortion(s) 	I		
Reproductive goals	<ul style="list-style-type: none"> • Family planning goals • Contraception use and options ☑ Check for possible drug-drug interactions for individuals taking ART. 	I		N
Abbreviations: ADAP, AIDS Drug Assistance Program; ART, antiretroviral therapy; NYSDOH AI, New York State Department of Health AIDS Institute; PrEP, pre-exposure prophylaxis; STI, sexually transmitted infection; U=U, undetectable = untransmittable.				

Reference

Pacek LR, Cioe PA. Tobacco use, use disorders, and smoking cessation interventions in persons living with HIV. *Curr HIV/AIDS Rep* 2015;12(4):413-420. [PMID: 26391516] <https://pubmed.ncbi.nlm.nih.gov/26391516>