Implementation of Preventive Care in a Large Urban Veterans Affairs HIV Clinic

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Abstract

Background: Preventive care in outpatient HIV clinics provides opportunities to enhance patient outcomes. Objectives: To implement a process for routine evaluation of patients at high risk for AIDS-defining events, through an STI clinic and system wide policies. Methods: Between 10/1/2012 and 10/31/2013, all patients with a positive HIV test at our clinic were invited to participate in the process with a single Women’s ID Health provider. **No** patients refused. Results: The process was implemented in all 5 of our clinics, 541 patients were invited, 385 (71%) completed the process. Conclusion: The implementation process was successful despite challenges with acceptance and workflow.

Objectives:

1. To implement a process for rapid evaluation of patients at high risk for AIDS-defining events through an STI clinic and system wide policies.
2. To establish an anal pathology screening program within the ID clinic.
3. To improve adherence for preventive cervical/anal PAP smear screening in patients with prior history of screening.

The STI Clinic

- **Preceding the ID Consult:** STI Consult with key components:
  1. **SYPHILIS:** serologic test, sexually active, sex partner found, concurrent sexual partners, condom use
  2. **CHLAMYDIA:** serologic test, recent gonorrhea/Chlamydia, recent PID
  3. **GONORRHEA:** serologic test, recent PID
  4. **PAP Smear:** if indicated

The Anal Cytology Clinic

- **Practice adapted from the New York State Dept of Health:** ‘Screening' for Anal Dysplasia and Cancer in Patients with HIV.
  - It's been estimated that anal squamous dysplasia and squamous intraepithelial lesions are responsible for approximately 55% of all cancers. It can affect cells of the skin and mucous membranes of the skin, mouth, and throat.

The Anal Pap Smear

1. No anal sex or douching within 24 hours prior to procedure.
2. Verbal informed consent obtained.
3. Patient placed in semi-Fowler position, with head elevated above hips.
4. Speculum inserted into rectum.
5. Lubricated anoscope inserted into rectum.
6. Obturator withdrawn to visualize the anal mucosa for anal Cytology/Smear and HIV (prep) and swabbing simultaneously for Gonorrhea/Chlamydia.

References