Implementing a routine testing model to improve diagnosis and linkage to care of newly HIV positive patients

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Abstract

Statement of the Problem: Interfaith Medical Center's (IMC) Emergency Room lacked a systematic process to ensure that newly diagnosed HIV+ patients were linked to care. The lack of defined policies and procedures to test and treat HIV+ patients was compounded by the high rate of socio-economic factors affecting the patient population. Through a FOCUS grant, in January 2015 IMC implemented an improved system for conducting HIV testing in the ED and linking newly diagnosed patients to follow up care.

Findings: Interfaith Medical Center's FOCUS program has conducted a retrospective study of patients initiating emergency department care where routine HIV testing was conducted from January 2015 to March 2017. The purpose of this study was to evaluate the increase in newly HIV diagnosed patients resulting from the routine HIV testing in the emergency department and the efforts of the HIV clinical linkage to care team. Prior to routine HIV testing, IMC's emergency department only tested on average 100 patients during January 2014 to December 2014. During the study period; IMC has performed 10,520 4th generation HIV tests. Additionally, IMC was able to scale up HIV screening from year one to year two of the study. From January 2015 to Dec 2015 a total of 3,546 HIV tests were conducted. HIV testing almost doubled in year two increasing numbers to 6,974 tests. From January 2015 to December 2015, IMC diagnosed 19 new HIV positives and linked 14 to care (68%). From January 2016 to March 2017, IMC diagnosed 22 new HIV positives and linked 19 to care (72%).

Conclusion & Significance: While the use of this model successfully identified patients with undiagnosed HIV infection in the ED, and enabled scale up of routine HIV screening in an emergency department setting innovative testing approaches, such as routine, non-targeted screening, are necessary to effectively diagnose new HIV cases and link those patients to regular HIV medical care.

Recommendations: In summary, routine HIV testing at Interfaith Medical Center Emergency Department has increased the number of new HIV cases identified. The steps that we undertook-i.e. EMR updates, updating polices, administrative support, training, lab procedures for notification, lab testing updates all aided in the increase of HIV Testing and linkage to care.



Biography

Jeff K H Cheung, MD, FACEP, FASAM, is a graduate of Mount Sinai School of Medicine. He was trained in Emergency Medicine at Lincoln Medical and Mental Health Center in the Bronx, New York. He recently accepted the position of Interfaith Medical Center's Chairman of Emergency Medicine.

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Natasha M Russell, MPA is a graduate of Long Island University With over 20 years of experience in managing data and program related initiatives in Hospital's and Not for Profit environments. She exhibits superior interpersonal skills communicating with diverse range of individuals. Currently, she is the FOCUS Program Director at Interfaith Medical Center.

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