**SAME-DAY ART INITIATION**

**What is “Same-Day ART”?**

A process of offering antiretroviral therapy (ART) to newly diagnosed or newly reengaged patients on the day of their HIV diagnosis or reengagement, or no later than 72 hours if same-day initiation is not possible.

**Inclusion criteria:**
- Willing to start ART
- ART naïve
- Able to come back for follow-up visit(s) for baseline lab results notification
- Not suspected to have TB, cryptococcal meningitis, and/or other serious opportunistic infections that could compromise treatment

**SAME-DAY ART PROVIDERS**
- Provide post-test counseling
- Assess logistical eligibility for ART initiation
- Provide ART education
- Assess emotional and psychosocial readiness
- Develop a long-term care plan
- Provide on-going support
- Conduct medical history assessment
- Review and notify lab results
- Schedule follow-up visits
- Inform benefits and potential risks of ART
- Perform full clinical assessment
- Determine clinical eligibility
- Prescribe ART

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**Overview of Same-Day ART Services at the Thai Red Cross Anonymous Clinic**

<table>
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<tr>
<th>VISIT 1</th>
<th>VISIT 2</th>
<th>VISIT 3</th>
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| within 2 weeks after ART initiation | Linkage to care  
  - Initiate transfer process of registered hospital based on health (if needed) | Notify baseline lab results  
  - Assess potential side effects from ART  
  - If normal, prescribe ART for 1-2 months |

- HIV status verification
- Readiness assessment
- Determine health insurance eligibility
- Medical history assessment
- Physical examination
- ART initiation for 2 weeks
**Same-day ART Flow**

**Anti-HIV Positive (1st Test)**

**NO REFERRAL**

**Readiness Assessment and Counseling**

**NO REFERRAL**

**Concurrent Blood Collection and CXR** (confirmatory anti-HIV tests, baseline CD4, Creatinine, ALT, HBsAg, Syphilis, anti-HCV, Urinalysis, CrAg if CD<100)

**NO REFERRAL**

**Medical History and Physical Exam**

**NO REFERRAL**

**ART Initiation (TDF/FTC + EFV)**

**Follow up in 2 weeks**

2 weeks

**Notify baseline lab results**

**Assess potential side effects from ART**

**if normal, prescribe ART for 1–2 month(s)**

**Initiate referral process to long-term care site**

**“Warm handoffs” to primary care provider at long-term care site for ART continuation**

**REFERRAL CRITERIA**

1) History of ART
2) Could not come back for follow-up visit(s)

**REFERRAL CRITERIA**

1) Responses indicate further counseling and support needed

**Use additional Gene Xpert MTB/RIF if presented with TB-indicative symptoms**

**REFERRAL CRITERIA**

1) Abnormal CXR result
2) Abnormal GeneXpert MTB/RIF result

**REFERRAL CRITERIA**

1) Suspected TB
2) Suspected cryptococcal meningiti
3) 3 concurrent serious Ol-indicative symptoms
   - Fever for more than 2 weeks within 1 month;
   - >5% weight loss within 1 month;
   - CD4 < 100 cells/mm³
4) Observed conditions suggest further clinical investigation

**Call back for interventions before follow-up visit if presented with abnormal lab results**

**Refer to support group for further counseling**

**Refer for further investigation**

**Bring case back to initiate ART if/when they are ready/cleared by physician**