

HIV Prevention, Detection and Early Management Utilizing a Street Medicine Approach

Bryan Tune PhD, FNP-C, CRNA, FAANA University of California, Davis

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The Street Medicine Approach

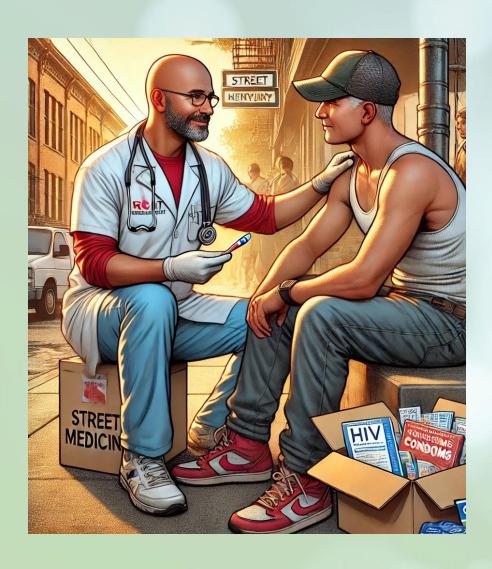




- Point of care service what can I do right here
- Population: Unhoused and sex workers
- Focus on bringing primary healthcare to streets
- Serving a vulnerable population
- Compliance Low
- Follow up Low
 - Importance of POC delivery

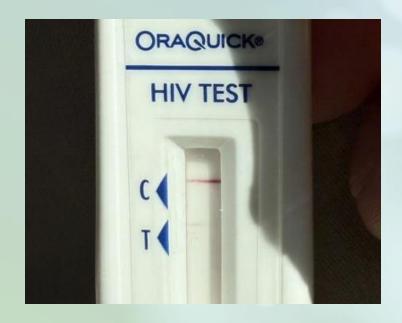
Street Delivered HIV Program:





- Nurse Practitioner led
- Testing at-risk population
- Increased dialogue within the unhoused community
- A physical and personal presence/known entity
- Ability to track and follow patients
- Rapid medication management
- Full team to implement referrals and assist in complex care delivery





Street Medicine process

- HIV point of care testing
 - Done at any interface possible
- Positive results:
 - Antigen/Antibody serum testing
 - CD4
 - Metabolic and liver panels
 - CBC
 - Hep-B and C
 - STI panel

Start antiretroviral therapy (ART): Goal to be nondetectable in 1-3 months.

- Biktarvy
- Dovato

Outcomes Data – 1 Year Retrospective

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- 14 positive results
- Labs, referrals, social work, ART

- All 14 started on ART
- 2 lost to follow

- 68 placed on PrEP
- Doxy PEP also encouraged.-

- Vulnerable population served.
- Year 2 data showing
- >50% decrease in HIV+

- -Increased demand
- -Increased trust
- Decrease in HIV+