

Indian Country PrEP ECHO Case Form

Presentation Date:

Presenting Clinician:

Patient Information

ECHOID:

Age

Gender

Sexual History

Last HIV test date

Last HIV test result

Any Hx of STI's

STI's within last 6 months

Possible Indication for PrEP

Last STI test date

Last STI test result

Frequency of condom usage

Sexual Behavior

Labs

Hepatitis B Surface Antigen

Hepatitis B Surface Antibody

Hepatitis B Core Antibody

Creatinine

eCrCl

Drug Use

Intravenous Drug Use?

Frequency of Shared Syringe

Knowledge of Syringe Exchange Programs

Current Medications

Medication Name	Dosage	Frequency

Medication Name	Dosage	Frequency

PrEP Knowledge and Readiness

Is the patient committed to

Daily medication?

Quarterly monitoring of labs?

Quarterly appointments?

Current PrEP knowledge level

What is your main question?