



POSTER PRESENTATION

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Results from a multimedia testing and counseling program in an urban emergency department

Yvette Calderon^{1,2}, Ethan Cowan^{1,2}, Jade Fettig^{1*}, Karachi Egbuta¹, Jason Leider^{1,2}

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Background

This study evaluates a novel approach to counseling and testing in a high-volume inner-city ED which utilizes an HIV counselor and a multimedia tool for conveying video HIV information and electronically collecting risk factor data. We evaluated this program to assess the demographic and risk factor characteristics of all patients tested, patient-reported satisfaction with the program and outcomes for positive patients.

Methods

This prospective cross-sectional evaluation was conducted for 2 years. A convenience sample of medically stable patients presenting to an inner-city municipal hospital ED were recruited by 3 to 8 full-time equivalent HIV counselors. Previously developed and validated videos for HIV pre- and post-test counseling were used. Demographic characteristics, risk factors, and satisfaction information were collected using patient self-reporting on the touch screen computer. Data downloaded automatically into a secure database. Chart reviews were conducted by the HIV-positive patients' medical provider to assess outcomes. Data were analyzed using SPSS software.

Results

During the federal grant period, 28,995 patients were tested for HIV. Demographic characteristics of the participants were: 41.9% male, mean age 36.0 ± 14.2 years, 54.7% Hispanic, and 32.2% African-American. Risk factors were: 6.4% MSM, 31.0% had multiple sex partners in the past 3 months, 49.8% reported condom use as "never," 1.5% used injection drugs. Patient satisfaction

was high: 88.8% reported learning a moderate-to-large amount of new information about HIV and 78.6% preferred the format which included both videos and an HIV counselor. There were 101 newly diagnosed or confirmed HIV positive patients and 86% were linked to outpatient HIV care; mean days to first medical visit was 7. Positive patient outcomes were as follows: 85% of eligible patients began HAART, median days to HAART treatment was 35, 62% of patients on HAART had viral load less than 400 copies/mL.

Discussion

A rapid HIV program using a multimedia tool and a counselor in a busy inner-city hospital ED can effectively test a large number of patients, provide consistent prevention messages to patients who report multiple HIV risk factors and link a large percentage HIV-positive patients to existing health care systems.

Author details

¹Jacobi Medical Center, New York, USA. ²Albert Einstein College of Medicine, New York, USA.

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* Correspondence: jade.fettig@nbhn.net

¹Jacobi Medical Center, New York, USA