



Pueblo
Community
Health Center



Early Intervention Services

www.PuebloCHC.org

What is EIS?

EIS stands for Early Intervention Services, which is a Pueblo Community Health Center (PCHC) program to care for people with HIV/AIDS. Comprehensive case management services within the EIS Program include the following:

- Physician who is an HIV specialist
- Medical assistant and nurse case managers
- Referral to medical specialty providers
- Pharmaceutical services
- Oral health care
- Behavioral health care
- Medication therapy adherence counseling
- Outpatient substance abuse counseling
- Other services as available

Did you just learn you are HIV-positive?

It can be scary to learn that your HIV blood test came back positive, but this is not a death sentence. The test means that you are infected with the virus that causes AIDS, the human immunodeficiency virus (HIV).

What is HIV?

HIV is one of many viruses that can make you sick. The common cold, flu, measles, and chicken pox are also caused by viruses. HIV is a type of virus that cannot reproduce (make copies of itself) on its own. Instead, HIV attacks the cells in your body and uses your body's cells to make copies of itself.

What is AIDS?

AIDS is the most serious stage of HIV infection. It results from the destruction of the infected person's immune system. By damaging your immune system, HIV interferes with your body's ability to fight the organisms that cause disease.

How is HIV transmitted?

HIV spreads from person to person through bodily fluids such as blood, semen, vaginal fluids, or an infected mother's breast milk. HIV can get into the body through an open cut or sore on your skin or through a mucous membrane. These membranes are found in the penis, vagina, anus, rectum, mouth, nose and eyes. You can get HIV from sex (including oral, anal, or vaginal); sharing needles (like the ones used to inject street drugs); and (very rarely) accidental needle sticks. Women who have HIV can infect the unborn baby during pregnancy, during labor and delivery or breastfeeding. Breastfeeding is not recommended for women who have HIV.

Is HIV/AIDS Different in Older People?

In 2018 over half (51%) of all people with HIV/AIDS in the United States are age 50 and older. One in six new diagnoses are over age 50.

Older people may be coping with other diseases common to aging, such as high blood pressure, diabetes, or heart problems. As HIV/AIDS get worse, many people will need help with mobility and caring for themselves. Older people with HIV/AIDS need support and understanding from their doctors, family, and friends.

Will I develop AIDS now that I am HIV positive?

Not everyone who has HIV will develop AIDS. There are people who have been HIV positive for more than 20 years and have not had any serious AIDS-related illnesses. Untreated, almost all cases of HIV will develop into AIDS. The timeframe varies greatly from person to person and can depend on many factors, including a person's health status and their health-related behaviors. Consistently taking prescribed HIV medications can prevent progression to this stage.

What is CD4?

CD4 cells(also known as T-cells) are part of your body's immune system. These cells recognize viruses and bacteria and help your body fight them before they make you sick.

What is a viral load?

A viral load test shows how much HIV is in your blood. The lower your viral load, the fewer viruses are attacking your cells. A low viral load also means HIV is less likely to make you sick. An undetectable viral load means that your viral load is below the level that the test can measure. Even if your viral load is undetectable, there is still a small amount of virus in your body and you still have HIV. You can still give HIV to others. Your goal is to keep your viral load as low as possible and keep your CD4 count as high as possible. This is how you can prevent HIV from making you sick.

What does viral mutation mean?

An HIV "mutation" is actually just a slight change in a specific section of HIV's RNA, the genetic code that provides all the instructions for how HIV works. Mutations occur naturally, not just in HIV, but in other viruses as well.

How often do I need to have lab tests drawn?

There are lab tests that are routinely monitored. CD4 count labs are done every 12 months. Viral load is done every 6 months. CBC and CMP are done every 6 months as long as stable. These tests may be done more often as needed. Other required lab tests—such as lipids and syphilis—are done yearly. TB testing is done every 2 years. Hepatitis C testing is done every 5 years. Other tests may be done as needed and some tests may be repeated if you are experiencing health issues or you have an abnormal result.

If you are not taking HIV medications, your immune system needs to be monitored to make sure that it remains at a healthy level. If you are taking HIV medications, you need to make sure the medications are effective

and that there are no adverse effects on your other systems related to the medications or your HIV. The CD4 and Viral Load tests provide a snapshot of your immune function and the amount of virus present in your body. The CBC is a “complete blood count” that incorporates a number of tests of different components in your blood to evaluate for anemia, infection, as well as a number of other conditions. The CMP includes a blood sugar test and tests that monitor kidney and liver functions. If your viral load is up while on medications, or if you are a new patient, a genotype or phenotype may be done to check which medications are best for you.

What if I get AIDS?

AIDS is an indication that your CD4 is 200 or less or is the development of a condition defined as one that would only be present with a damaged immune system. If your immune system is damaged, it is not protecting you from other types of infections. These infections are called “opportunistic infections.” If it is determined that you are at risk or have developed an opportunistic infection, the doctor will treat you with antibiotics. You will be required to take these antibiotics every day until your blood work indicates it is safe to discontinue the antibiotics.

What is an opportunistic infection? How can I protect myself from getting an opportunistic infection?

Opportunistic infections are infections that your body can no longer fight off because HIV has destroyed too many CD4 cells. To prevent opportunistic infections from occurring, research indicates that following a few precautions will help you avoid contracting an opportunistic infection. These include thorough hand washing, avoiding people who are ill, sharing food utensils and cups, cleaning litter boxes (cat feces), and soil gardening. Safe sex should also be practiced and medications should be taken as prescribed.

When will I need to take medications?

HIV medications are prescribed for all patients diagnosed with HIV as soon as lab tests results for genotype are received by your doctor. You should plan to start medications when you are ready for 100% adherence.

During pregnancy, should I take HIV medication(s)?

HIV medications are used during pregnancy. It is important to review your medications with your doctor. If you do not take HIV medications currently, you will be started on HIV medications to protect the baby. HIV medications reduce the amount of HIV infection in the mother’s body. HIV medications will reduce the risk of passing HIV to the unborn baby. It is important for you to see your doctor so that the right medications can be started by the second trimester. During labor and delivery, HIV medications will be given to you by intravenous infusion and you will continue to take HIV medications orally.

After the baby is born, will the baby need to be on HIV medication?

Yes. The baby will be on oral liquid HIV medication for 6 weeks. The baby will also be tested for HIV.

What if I also have Hepatitis C?

Since Hepatitis C is transmitted in the same way as HIV, many patients with HIV are co-infected. There are treatments now for certain Hepatitis C types that can provide a Hepatitis C cure (depending on whether the patient is a candidate).

What is adherence?

Adherence refers to how closely you follow a prescribed treatment regimen.

Adherence includes taking your HIV medications 100% of the time. If even 1 dose is missed, the virus has the opportunity to reproduce more rapidly and change or mutate. This could leave you with fewer treatment options. Studies have shown that your first medication regimen has the best chance for long-term success. Medications need to be taken the same time of the day. If you miss a dose by a few hours, you can take it, but you may not double-up. Specific medication questions can be answered by your doctor or case manager. If you are having problems staying on a medication schedule, you can set an alarm or cell phone alert. You can keep a medication diary. You can have friends or family members help remind you. If you are having side effects that are more than occasional, you can ask your doctor or case manager for advice about controlling side effects.

If you have just started medications, it is important to know that during the first 2 to 4 weeks, you may experience side effects that usually slowly improve. If you go to the hospital or are incarcerated, you may need to supply your own medications for at least the first few days, so be sure to prepare for such a situation. Remember to order your medications with time to spare and keep your insurance and other coverage current.

Adherence may also apply to lab tests and appointments. If you miss an appointment, your care may be delayed as schedules are often full. Being adherent is the best way to assure that you have consistent health care.

What does my case manager do for me?

When you first become a PCHC EIS patient, your case manager will schedule an intake appointment with you. Your case manager provides many services for you, including scheduling all of your appointments, assisting with medication adherence, helping you access supportive resources, etc. You will be provided with direct contact information so you can reach your case manager when needed. Your case manager can also help you access behavioral health, dental, dietary, specialty care, and other services. Your case manager will help with any questions about any aspect of your care. It is your case manager's job to talk to you about adherence to your medications, risk reductions, safe sex practices, and other relevant topics for managing your health care.

Always contact your case manager first if you need to make or reschedule an appointment; a minimum of 48 hours notice should be given when possible. If your case manager is not available when you call, you may call 719-543-8711 and ask to speak with a triage nurse. It is important that you tell the triage nurse that you are an EIS patient. Although PCHC staff members may remind you of upcoming appointment(s), it is your responsibility to know when your appointments are. If you cancel your appointment, your care may be delayed if there are not immediate appointments available. If you do not show up for your appointment, your case manager will contact you. Please keep your phone number and address current.

Why and how often do I need to see my case manager?

You should see your case manager every time you see your doctor, as well as at other times based upon your needs or your level of care. Case managers are your individual resources for making sure your health care needs are met. They can also help you find other resources in the community.

What does medication resistance mean?

HIV medication resistance means a reduction in the ability of a medication – or combination of medications – to block HIV reproduction in the body. Medication resistance occurs as a result of changes or mutations in HIV's genetic structure. Mutations can be common in HIV if medications are not taken consistently. HIV reproduces at an extremely rapid rate and does not contain the proteins needed to correct the mistakes it makes during copying. [Source:www.hivworkshop.com/drug_resistance.htm]

What do I do if the medications make me sick?

Each HIV medication can have side effects. Many of these side effects your physician and case manager will discuss with you upon issuance of the prescription. Common side effects include, but are not limited to the following:

Diarrhea happens more often at the start of an HIV regimen and tends to go away as your body gets used to the medications. Some medications are more often associated with diarrhea than others. Continual diarrhea can cause you to lose nutrients and water that the body needs. Contact your case manager/doctor if the diarrhea continues more than 1 day.

Nausea is a common side effect of many medications taken for the first time. Usually nausea does not last long, resolving within a few weeks. The nausea goes away as your body gets used to the medication(s). Contact your case manager/doctor if you vomit after taking your pills or have repeated episodes of vomiting over 24 hours.

Fever and flu-like symptoms, such as aches, pains and mild fever less than 100 degrees, may be due to HIV medications, but these symptoms may also be caused from HIV itself. Contact your case manager/doctor if these symptoms occur.

Fatigue and having a lack of energy can be caused by stress, lack of sleep, vitamin and mineral deficiencies, depression, or lack of exercise. It can also be caused by anemia or other medical problems. If this symptom occurs, contact your case manager/doctor.

Headache may occur the first time you take your HIV medications. This side effect tends to go away as your body adjusts to the medications. If the pain is severe or lasts more than a day, contact your case manager/doctor. Most symptoms will subside after 3-4 weeks.

Your case manager will be contacting you within 2 weeks after any new medication has been prescribed to ensure that you are not having any problems with the new medications. You may contact your case manager with any questions.

What do I do if I run out of my medications?

You should not run out. Make sure to order your medications and allow at least 5 days for your prescription(s) to be filled (2 weeks for mail order). Factor in weekends, holidays, and trips you are taking, etc. Your medication orders should not be an emergency and most pharmacies will not treat them as such, especially mail order. You will often have refills, so call the pharmacy for a refill first. If you are out of refills, ask the pharmacy to send your doctor a refill request. If you experience a problem getting your medications, call your case manager.

What is ADAP? What is Bridging the Gap?

ADAP is the AIDS Drug Assistance Program that provides medications at low or no cost to people with HIV/AIDS. Bridging the Gap (BTG), Colorado, is a medications assistance program for people with HIV/AIDS who are eligible for Medicare medication benefits (Part D) or Medicare Advantage plan (Part C). It helps patients with premium and prescription medication expenses on the patient's chosen plan (such as deductibles, co-insurance, and catastrophic level payments for medications that are also on the ADAP formulary). Current ADAP Medicare Advantage (with Prescription Medication Benefits – MAPD) and Medicare Part D participants are eligible to apply for this program by submitting an application. This application must be reviewed every 6 months and again in December for the BTG program. HIAPP is a program to help those that qualify with private insurance. SWAP is a program to help those with Medicaid.

If you have questions regarding your Med D plan you may contact Colorado Department of Public Health and Environment at 877-640-0006. For Medicaid or other questions, please contact PCHC registration at 719-543-8711. Remember to keep your registration current.

Why do I need to see my doctor? How often to I need to see my doctor?

You need to see your doctor on a regular basis—usually every 3-4 months (or as determined by your doctor)—to help you with the treatment of your disease, explain the importance of your medications, and to review lab results.

Who do I see if my doctor is not in clinic or if I get sick after clinic hours?

If you get sick and your PCHC doctor is not available, call 719-543-8711. Tell the receptionist you are an EIS patient and would like to speak to the triage nurse. PCHC's triage nurse will assist you in making an appointment with another health care provider in the clinic. If your symptoms indicate you need to be seen in the emergency room, the triage nurse will direct your care there. Your case manager will be notified. If you need assistance **after clinic hours**, call the above number. A nurse will be available to triage and assist you with your immediate or urgent medical need.

When should I see a dentist?

You should see the dentist at least once per year. You may also need to see the dentist if you develop any symptoms of infections, sore, bleeding gums or dental pain.

When should I see a behavioral health therapist?

You should see a behavioral health therapist if you require assistance with depression, anxiety, or other concerns. You should also consider seeing a behavioral health therapist if your doctor or case manager suggests it.

What happens if I have to go to the hospital?

During your EIS intake appointment, you will receive a card directing the hospital to contact PCHC if you are in the ER or if you are admitted to the hospital. Unfortunately, this system is not perfect, so please call your case manager so they can work with your doctor at the hospital. Take your medications with you in case the hospital does not have your medications. It is also important for the doctors to see which medications you take. If you are admitted into the hospital, your care will be directed by the hospital's doctors. Do not stop your medications before consulting with PCHC's EIS doctor and/or case manager.

What can I do if I have a drug or alcohol problem?

Alcohol and drug use can cause problems for anyone, but patients with HIV are at much greater risk for complications. These substances could interact with your medications or interfere with their effectiveness. If you are under the influence of drugs or alcohol, you might forget (or refuse) to take your medications, which leads to illness or resistance. When impaired, there is also a greater risk of unsafe sex --even by the most well-meaning people.

Drug and alcohol abuse is a serious health problem and there is treatment available. Please tell your case manager if this is an issue for you. The case manager can refer you to out-patient treatment that will likely be paid for by Pueblo Community Health Center's EIS program. If in-patient care is required, the Southern Colorado Health Network (SCHN) may be able to assist you.

How can I reduce my risk of passing this infection to someone else?
Always inform your partner that you have HIV prior to sexual activity. Practice safer sex by using a condom for vaginal or anal sex. Use a condom or dental dam if you are having oral sex. These products are available free of charge from your case manager.

Ask about PREP (a preventative medication) for your partner.

EIS Patient Group

Pueblo Community Health Center’s Consumer Advisory Council’s mission is to improve health care outcomes for EIS patients. This is done by working with PCHC staff and other HIV service providers to advocate for quality care, identify and address opportunities for improvement, and actively participate in HIV awareness and outreach in the community.

Consumer Advisory Council meets every month at one of the clinic sites. This group consists of consumers and service providers who work with the HIV positive community. World AIDS Day and Pueblo Pride are the 2 main events they participate in. Members also help develop the patient survey and identify areas of improvement.

For specific details about day, time and meeting location of the group, please contact an EIS Coordinator at (719) 543-8718 x 245 or 220.

Are there other agencies in the community to help me receive goods and services I may need?

Yes, there are many entities in the Southeastern Colorado region to assist people with HIV/AIDS. The following list is not all-encompassing, but is a good place to start when learning about available resources:

ADAP-AIDS Drug Assistance Program or “Ramsell”:	877-640-0006
Centers for Disabilities in Pueblo:	719-546-1271
CHIP (for pregnancies):	720-777-4671
HOPE Program option for Parenting	720-777-8233
Colorado AIDS Coalition for Education:	www.acecolorado.org
Colorado Department of Public Health & Environment	719-545-4650
Hepatitis C Connection:	800-390-1202
HIV/AIDS Educations and Resources:	www.TheBody.com
Medicaid Application Status:	800-359-1991
Medicaid Customer Service:	800-221-3943
News and resources:	www.POZ.com
Posada Homeless Services:	719-545-8776

Pueblo Department of Social Services:	719-583-6160
Pueblo Social Security:	719-545-9248
Southern Colorado Health Network (SCHN): (formerly SCAP)	Pueblo: 719-924-8925, 719-225-8682 Colorado Springs: 800-241-5468
State Pharmaceutical Assistance Program:	303-692-2783

What can I do to be healthier with HIV/AIDS?

- Take your medication(s) as prescribed. If you have any problems, please contact your case manager.
- See your case manager, doctor, dentist, dietician, and/or behavioral health therapist when scheduled.
- Participate actively in your health care.
- Stay up-to-date with your health care maintenance exam and immunizations
- If you use tobacco, stop. Discuss smoking cessation with your case manager, behavioral health therapist and/or doctor.
- If you use drugs, stop. Discuss drug rehabilitation services with your case manager, behavioral health therapist, and/or doctor.
- If you use alcohol, stop. Discuss alcohol rehabilitation services with your case manager, behavioral health therapist, and/or doctor.
- Practice safe sex.

Other important information:

- PCHC offers FREE HIV testing for partners or anyone desiring a test. This is done on a walk-in basis, and is available at all PCHC locations.
- A syringe/needle exchange is available for IV drug users. Please contact SCHN at 719-924-8925 for more information.
- Research opportunities are available. To learn about HIV-related clinical research trials or other opportunities, see below:

For Centers for Disease Control contact information, call the AIDS Clinical Trials Information Service at 1-800-HIV-0440. You may also visit www.aidsinfo.nih.gov or clinicaltrials.gov for local/regional clinical trial information.

For UC Health Denver opportunities, please call 303-724-0708.



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This booklet is designed to be a resource for Pueblo Community Health Center's Early Intervention Services Program patients. It is not all-inclusive and should be used as a guide for navigating various systems and services within the health care environment.