

**Scottish Paediatric and Adolescent Infection and Immunology Network (SPAIIN)**

HIV Perinatal Pathway – Delivery Checklist

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| Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DOB \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CHI Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  | Date | Sign |
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| **Maternal Checklist** |  |
| 1 | All women are recommended to continue ART post-partum  |  |  |
| 2 | Ensure follow up appointment arranged at HIV clinic within 4 -6 weeks |  |  |
| 3 | Ensure sufficient ART supplied on discharge to last until next HIV clinic appointment |  |  |
| 4 | Ensure contraception has been discussed and the chosen method provided. If this is not possible, advise this will be revisited at 4 -6 week follow-up,  |  |  |
| 5 | Ensure review of potential drug-drug interactions with any new contraception and patient’s current ART  |  |  |
| 6 | Letter to GP |  |  |
| **Neonatal Checklist** |  |  |
| 7 | Ensure neonatal PEP plan documented in mother and baby’s clinical notes |  |  |
| 8 | Ensure mother receives remaining course of neonatal PEP on discharge |  |  |
| 9 | Reiterate advice on infant feeding |  |  |
| 10 | Access local pathway for support for formula feeding |  |  |
| 11 | Ensure immunisation plan |  |  |
| 12 | Ensure follow-up and testing pathway accessed |  |  |
| 13 | Letter to GP |  |  |

*NOTE*

*This guideline is not intended to be construed or to serve as a standard of care. Standards of care are determined on the basis of all clinical data available for an individual case and are subject to change as scientific knowledge and technology advance and patterns of care evolve. Adherence to guideline recommendations will not ensure a successful outcome in every case, nor should they be construed as including all proper methods of care or excluding other acceptable methods of care aimed at the same results. The ultimate judgement must be made by the appropriate healthcare professional(s) responsible for clinical decisions regarding a particular clinical procedure or treatment plan. This judgement should only be arrived at following discussion of the options with the patient, covering the diagnostic and treatment choices available. It is advised, however, that significant departures from the national guideline or any local guidelines derived from it should be fully documented in the patient’s case notes at the time the relevant decision is taken.*