

VACCINE	WHO	FREQUENCY	COMMENTS
Flu vaccine	All PLWH	Annually	Use high-dose inactivated vaccine for age: 65+ years.
Hepatitis A	MSM, PWID, Persons with liver disease (including HBV and HCV).	2 doses: 0 & 6 months	Consider vaccination for all PLWH.
Hepatitis B	Non-immune patients (1)	3 doses: 0, 1 & 6 months	Recheck serology at least 4 weeks after last dose. If surface AB levels are not protective: repeat vaccine series; consider double dose.
Human Papilloma Virus	PLWH, both genders, age: 13 – 26 years.	3 doses: 0, 1 & 6 months	
Meningococcus	All PLWH	2 doses: <i>Menveo</i> or <i>Menactra</i> at least 8 – 12 weeks apart, booster in 5 years.	Does not cover meningococcus serotype B (outbreaks, asplenic)
Diphtheria & Tetanus (Td)	All PLWH	1 dose every 10 years	One-time substitution of Td with Tdap (acellular pertussis).
Varicella Zoster Live attenuated (Zostavax) (2)	Age > 60 years & CD4 > 200 cells/mm <sup>3</sup>	1 dose	Limited evidence on efficacy and safety
Pneumococcus	All PLWH	2 doses: <i>PCV13</i> followed by <i>PPSV23</i> at least 8 weeks apart. <i>PPSV23</i> boosters in 5 years & at age 65 years.	Consider deferring <i>PPSV23</i> until CD4 > 200 cells/mm <sup>3</sup> . If <i>PPSV23</i> given first, give <i>PCV13</i> after 12 months.

- Hepatitis B non-immune patients include: *HBsAg/Ab(-) HBeAB(-)* & *HBsAg/Ab(-) HBeAB(+)/HBVPCR(-)*
- Abbreviations: PLWH: Persons Living with HIV; MSM: Men Who Have Sex with Men; PWID: Persons Who Inject Drugs; HBV: Hepatitis B Virus; HCV: Hepatitis C Virus; AB: Antibody; PCV13: Prevnar 13; PPSV23: Pneumovax; HBsAg/Ab: Hepatitis B surface antigen & antibody; HBeAB: Hepatitis B core antibody
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**HEALTH MAINTENANCE**

**RECOMMENDATIONS**

**FOR PLWH**

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SCREENING	WHO	FREQUENCY	COMMENTS
Breast Cancer	Women age ≥ 40 years	Annually	
Lung Cancer	PLWH age 55 – 80 with 30 pack-year smoking history	One-time screening with low-dose CT Lung	Applicable if quit smoking < 15 years ago.
Colorectal Cancer	All PLWH age ≥ 50 years	Colonoscopy every 10 years if normal	Consider earlier screening for patients with strong family history & patients with IBD.
Cervical Cancer	Women 21 – 65 years	Pap Smear with HPV testing: At initiation of care, repeat in 6 months & annually thereafter	Not required after hysterectomy unless done for cancerous or precancerous disease.
Anal Cancer	PLWH, of both genders, age ≥ 25 years, who engage in receptive anal intercourse	Pap Smear with HPV testing. Screening data is lacking	Screen only if high-resolution anoscopy + biopsy & ablative treatments are available.
Abdominal Aortic Aneurysm	Men age 65 – 75 years who ever smoked	One-time Abdominal Ultrasound screening	Not required if patient has recent abdominal CT scan without evidence of aortic aneurysm.
Hepatitis C	All PLWH	HCV Antibody on initiation of care and then annually	
Osteoporosis (DEXA Scan)	PLWH, both genders, age: ≥ 50 years or ≥ 40 years with FRAX score ≥ 10%	Repeat in 10 – 15 years if normal or 2-5 years if osteopenic.	For women: start at age 50 or 10 years after menopause.
Dyslipidemia	All PLWH	Baseline, within 1-3 months from starting new regimen then annually.	Consider TG treatment for levels ≥ 1,000 mg/dL & statin if ASCVD ≥ 7.5%.
Diabetes Mellitus (Hemoglobin A1C)	All PLWH	Baseline, within 1-3 months from starting new regimen then annually.	Consider starting diabetes treatment at Hemoglobin A1C ≥ 7 – 7.5%.

- Abbreviations: PLWH: Persons Living with HIV; HPV: Human Papilloma Virus; IBD: Inflammatory Bowel Disease; TG: Triglycerides; HCV: Hepatitis C
- FRAX Risk Assessment Tool: <https://www.sheffield.ac.uk/FRAX/tool.aspx?country=9>,
- ASCVD (Atherosclerotic Cardiovascular Disease) Risk Assessment Tool: <http://www.cvriskcalculator.com/>

The Southeast AIDS Education & Training Center's (SE AETC) goal is to build the capacity of clinicians throughout their careers to care for people living with HIV/AIDS.

Skill building opportunities are available for pre-novice, novice and experienced providers. By increasing the HIV clinical competency of providers, outcomes along the HIV Care Continuum will improve with a greater number of patients diagnosed, engaged in care, on antiretroviral medications and virally suppressed.

**Providing state-of-the-art HIV education, consultation, and resource materials to healthcare professionals throughout the region.**

Chart Reviews	Clinical Consultation
Customized Programs	Live & Online Learning
Skill-building Workshops	Preceptorships
Treatment Guideline Resources	Weekly Webcasts

**Resources are available for:**

Physicians	Nurses
Medical Assistants	Advanced Practice Nurses
Pharmacists	Oral Health Professionals
Physician Assistants	Mental Health Counselors
Ryan White Funded Providers	Nutritionists
Social Service Providers and Case Managers	Medical & Health Professional Students

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